

Retail Food Establishment Inspection Report part I

Page ____ of _2__

As Governed by Title 50, Chapter 50 Montana Code Annotated (MCA) and the Administrative Rules of Montana (ARM):Title 37, Chapter 110, Subchapter 2 Failure to comply with any time limits for corrections of critical item violations may result in cessation of food service operations." [ARM 37.110.239 (5)]

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Establishment LYDIAS SUPPER CLUB			N	lo. o	f Risl	Fact	or/Interve	ention Violations	;	1	Date	10-20	0-20	22	
Address 4915 HARRISON AVE			N	No. of Repeat Risk Factor/Intervention Violations ¹					s 1	Time Ir	n 03:0	09:3	8		
City	DUTTE O'L O'L				Vate			City			MT000017	Time C	out 03:	53:2	6
-		LYDIAS INC	county.					City							_
Licens						ewate			MI	PDDS#	 -	RISK C	ategor	٠.	
Licens	se#	FL 471	License Types (s): EATING ESTA		SHME	NTTA	/ERN C	OR BAR	Curren	t water t	test	2	2	<u> 4</u>	_
Purpo	se of Insp	pection: Regular	Follow-up Pre-opening	_	<u> </u>	Compl	aint _	Illnes	ss HACCP		Investigation	n	_Other	_	_
		FOODBO	RNE ILLNESS RISK FACTO	R	S Al	ND F	UBL	IC HEA	LTH INTERV	ENTI	ONS				
	Circle de	esignated compliance status	s (IN, OUT, N/O, N/A) for each number	ed i	tem				Mark "X" in	appropri	ate box for	COS and	d/or R		
	n complian			_	•				S=corrected on-sit	e during	inspection	R=re	epeat vic		
Co	mplianc	e Status		cos	R		Com	pliance S	Status ntially Hazardous	- Food	Time/Tom	norativ		cos	R
1 IN			CVISION Onstrates knowledge, and performs duties	1		18	N/O	Folei				•	e	Т	
	a INI					19	IN		Proper cooking to Proper reheating		•				
	Certified Food Protection Manager Employee Health					20	N/O		Proper cooling to				<u>ig</u>		
3 IN	Management, food employee and conditional employee, knowledge, responsibilites and		conditional employee, knowledge, responsibiliites and			21	N/O		Proper hot holdi			<u> </u>			
4 IN	Proper use of restriction and exclusion		ion and exclusion			22	IN		Proper cold hold						
5 IN	N Procedures for responding to vomiting and diarrheal events					23	OUT		Proper date mar	king &	disposition			Χ	Χ
		Good Hygier	nic Practices			24	N/A		Time as a public he	alth conti	rol: procedure	es & reco	rds		
6 IN			, drinking, or tobacco use												
7 IN		No discharge from ey							Consun		•				
8 IN		Preventing Contar	•			25	IN		Consumer advis		vided for ra	w or			
8 IN		Hands clean & prope	•						undercooked for Highly Suscer		onulation	2			_
9 IN		No bare hand contact alternative procedure	t with RTE food or a pre-approved						Pasteurized food		-		not	Π	
10 IN		•	sinks properly set up & accessible			26	N/A		offered	15 U5CU	i, prombitot	1100031	101		
			d Source					Foo	d/Color Additve	s and T	Toxic Subs	tances			
11 IN		Food obtained from a	pproved source			27	N/A		Food additives:	approve	ed & prope	rly used			
12 N/	0	Food received at prop	per temperature			28	IN		Toxic substances	properl	ly identified,	stored,	& used		
13 IN		Food in good condition	on, safe, & unadulterated					Co	onformance with	Appro	ved Proce	dures			
14 N/	Δ	Required records ava	ilable: shellstock tags,			29	N/A		Compliance with		ce/speciali	zed			
117	, · ·	parasite destruction	and an electrical and American				14// (process/HACCF						<u> </u>
15 IN			ontamination Arm	1		Г	Di-L		!				11		
16 IN															
	Proper disposition of returned previously served						1								
¹⁷ IN		reconditioned, & unsa	, ,			<u> </u>				0 to p.0	V 0.11. 100 G.D.O		o or my		
			GOOD RE	TΑ	IL P	RAC	TICES	S							
		Good Retail Practices	s are preventative measures to control	the	addit	tion of	pathog	gens, chem	nicals, and physica	lobjects	into foods.				
Mark ">	(" in box if	numbered item is not in co				COS a	nd/or F	₹ CO	S=corrected on-sit	e during	inspection	R=re	epeat vic		
				cos	R									cos	R
20	T 1_	Safe Food				40	.	1.	Proper U		tensils				
30 31		teurized eggs used where				43			tensils: properly			0			-
		tter & ice from approved source riance obtained for specialized processing methods				45			equipment & linens: p se/single-service a						
	van		rature Control			46			used properly	ii licics.	ргорену за	rea & us	<u>seu</u>		
00	Pro		d; adequate equipment for					0.0100	Utensils, Equip	oment a	and Vendii	ng			
33		perature control				47	,	Food &	non-food contact	surface	es cleanabl	e,			
34	Plar	nt food properly cooked fo	or hot holding			47		properly	designed, const	ructed,	& used				
35	Арр	roved thawing methods ι	ised			48		Warewas	hing facilities: installe	ed, mainta	ained, & used	l; test stri	ps		
36	Thermometers provided & accurate				49)	Non-foo	d contact surface						Щ.	
07	T I_		ntification	-		5.0		T	Physic						
37	Foo	d properly labeled; origin				50			old water availabl		_				-
Prevention of Food Contamination 38 Insects rodents & animals not present						51 52			ig installed; prope			5			
39	V	sects, rodents, & animals not present				53			& waste water p lities: properly constr			aned			
40	Contamination prevented during food preparation, storage & display Personal cleanliness		ou preparation, storage & display			54			& refuse properly dis						
		ping cloths: properly used & stored				55			I facilities installe						
42		shing fruits & vegetables	/ / -			56			te ventilation & lig				ısed		
Person in Charge (Signature) Date: /0-20-22															
Inspec	tor (Sign	ature)	· 6 t				Follo	w-up: NO			Follow-u	ın Dato:			
maped	ioi (oigh	arune) (MAXC	-WY_SI				· UIIU	w-up. · · ·			i onow-u	p vale.			

	Retail F	Food Esta	ıblishment Ins _l	pection l	Form part II Page 2	of2_				
Establishm	nent LYDIAS SUPPER CL	.UB	SANITIZER LEVEL		License	# FL 471				
			CHEMICAL LOW TEMPERATUR	RE DISH MACHINE	0.0					
Current Lice	ense Posted ARM 37.110	.238 YES	WIPING CLOTH BUCKET		0.0					
	ood Safety Manager	YES	SPRAY BOTTLES		200.0					
SANITIZER:	QUATERNARY,		MANUAL DISHWASHING (3 COMPARTMENT SINK) 200.0							
	Item/Location	Temp	EMPERATURE OBSER Item/Location	Temp	Item/Location	Temp				
	ır cooler; clamato	34.0	Wooden walk-in; fish	38.0	Walk-in; salad mix	34.0				
	Ware washer	165.0	·		,					
		OPSED	VATIONS AND CORRE	CTIVE ACTIO	Me					
45446		OBSER	VATIONS AND CORRE	CTIVE ACTIO	NO					
ARM Code Reference	violations cited in this report must be corrected withing the time frame listed, or as stated in ARM 37.110.239.									
3-501.17	staff who are not following the proper procedure.									
3-305.11										
		1/115	\-\mathrew\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\rightarrow\		- /0	-20-22				
	Charge (Signature)	15/4.			Date / C	-20-22 20-22				
Inspector (Signature) (/ / /	C gml	-,SIT		Date /0−2	10-22				