

**State of Ohio**  
**Food Inspection Report**  
 Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility DBA Subway #38523	Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License Number JMMS-9UAMVX	Date 11-Mar-2024
Address 111 N Market ST		City/State/Zip Code Mc Arthur OH 45651	
License holder Capital City Sandwiches, LLC	Inspection Time 30	Travel Time 0	Category/Descriptive Commercial FSO < 25000 sq. ft. - Risk Level III
Type of Inspection Follow-up	Follow up date (if required) 13-Mar-2024		Water sample date/result (if required)

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item:    IN=In Compliance    OUT=Out of Compliance    N/O=Not Observed    N/A=Not Applicable

Supervision		Time/Temperature Controlled for Safety Food (TCS food)	
1	Person in charge present, demonstrates knowledge, and performs duties	21	Proper hot holding temperatures
2	Certified Food Protection Manager	22	Proper cold holding temperatures
<b>Employee Health</b>		23	Proper date marking and disposition
3	Management, food employees and conditional employees; knowledge, responsibilities and reporting	24	Time as a public health control: procedures & records
4	Proper use of restriction and exclusion	<b>Consumer Advisory</b>	
5	Procedures for responding to vomiting and diarrheal events	25	Consumer advisory provided for raw or undercooked foods
<b>Good Hygienic Practices</b>		<b>Highly Susceptible Populations</b>	
6	Proper eating, tasting, drinking, or tobacco use	26	Pasteurized foods used; prohibited foods not offered
7	No discharge from eyes, nose, and mouth	<b>Chemical</b>	
<b>Preventing Contamination by Hands</b>		27	Food additives: approved and properly used
8	Hands clean and properly washed	28	Toxic substances properly identified, stored, used
9	No bare hand contact with ready-to-eat foods or approved alternate method properly followed	<b>Conformance with Approved Procedures</b>	
10	Adequate handwashing facilities supplied & accessible	29	Compliance with Reduced Oxygen Packaging, other specialized processes, and HACCP Plan
<b>Approved Source</b>		30	Special Requirements: Fresh Juice Production
11	Food obtained from approved source	31	Special Requirements: Heat Treatment Dispensing Freezers
12	Food received at proper temperature	32	Special Requirements: Custom Processing
13	Food in good condition, safe, and unadulterated	33	Special Requirements: Bulk Water Machine Criteria
14	Required records available: shellstock tags, parasite destruction	34	Special Requirements: Acidified White Rice Preparation Criteria
<b>Protection From Contamination</b>		35	Critical Control Point Inspection
15	Food separated and protected	36	Process Review
16	Food-contact surfaces: cleaned and sanitized	37	Variance
17	Proper disposition of returned, previously served, reconditioned, and unsafe food	<b>Risk factors</b> are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness. <b>Public Health Interventions</b> are control measures to prevent foodborne illness or injury.	
<b>Time/Temperature Controlled for Safety Food (TCS food)</b>			
18	Proper cooking time and temperatures		
19	Proper reheating procedures for hot holding		
20	Proper cooling time and temperatures		

HEA 5302A Ohio Department of Health (10/19)  
 AGR 1268 Ohio Department of Agriculture (10/19)

# State of Ohio Food Inspection Report

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Name of facility DBA Subway #38523	Type of Inspection Follow-up	Date 11-Mar-2024
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GOOD RETAIL PRACTICES			
Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods. Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item: IN=In Compliance OUT=Out of Compliance N/O=Not Observed N/A=Not Applicable			
<b>Safe Food and Water</b>		<b>Utensils, Equipment and Vending</b>	
38	Pasteurized eggs used where required	54 OUT Food and non-food contact surfaces cleanable, proper designed, constructed, and used	
39	Water and ice from approved source	55 Warewashing facilities: installed, maintained, used; test strips	
<b>Food Temperature Control</b>		56 OUT Non-food contact surfaces clean	
40	Proper cooling methods used; adequate equipment for temp control	<b>Physical Facilities</b>	
41	Plant food properly cooked for hot holding	57 Hot and cold water available; adequate pressure	
42	Approved thawing methods used	58 OUT Plumbing installed; proper backflow devices	
43	Thermometers provided and accurate	59 OUT Sewage and waste water properly disposed	
<b>Food Identification</b>		60 Toilet facilities: properly constructed, supplied, cleaned	
44	Food properly labeled; original container	61 Garbage/refuse properly disposed; facilities maintained	
<b>Prevention of Food Contamination</b>		62 OUT Physical facilities installed, maintained, and cleaned; dogs in outdoor dining areas	
45 OUT	Insects, rodents, and animals not present/outer openings protected	63 Adequate ventilation and lighting; designated areas used	
46	Contamination prevented during food preparation, storage & display	64 Existing Equipment and Facilities	
47	Personal cleanliness	<b>Administrative</b>	
48	Wiping cloths: properly used and stored	65 901:3-4 OAC	
49	Washing fruits and vegetables	66 3701-21 OAC	
<b>Proper Use of Utensils</b>			
50	In-use utensils: properly stored		
51	Utensils, equipment and linens: properly stored, dried, handled		
52	Single-use/single-service articles: properly stored, used		
53	Slash-resistant, cloth, and latex glove use		

Observations and Corrective Actions					
Mark "X" in appropriate box for COS and R: COS=corrected on-site during inspection R=repeat violation PRIORITY LEVEL: C=CRITICAL NC=NON-CRITICAL					
Item No.	Code Section	Priority Level	Comment	COS	R

45	3717-1-06.4(K)	C	Observations: Presence of live insects, rodents, and other pests. Observed flying insects to be present in the basement.No corrective action was taken during the inspection.		X
54	3717-1-04.4(A)(2)	NC	Observations: Equipment components are not intact, tight or properly adjusted. Observed fridge door in kitchen to not be sealed properly. PIC explained that a new seal has been ordered.		X
56	3717-1-04.5(A)(3)	NC	Observations: Non-food contact surfaces of equipment are unclean. Observed orange dressing to be spilled in the bottom of the fridge in the kitchen.		X
58	3717-1-05.1(S)	NC	Observations: Plumbing system not properly maintained or repaired. Observed water being discharged from a pipe in the side of the Subway building, as well as water collecting in the basement.		X
59	3717-1-05.3(E)	C	Observations: Wastewater and sewage is conveyed through an unapproved system. Observed a pipe connected to the Subway building to be discharging water into the alley beside the building. Observed the entire floor in the basement to be wet. There was an odor present and the water appeared grey/black. Dye testing at the facility was inconclusive as to the source. No corrective action was taken during the inspection.		X
62	3717-1-06.1(A)	NC	Observations: Floors, walls, and/or ceilings not smooth and easily cleanable. Observed floor tiles to be cracked throughout the facility, mainly in the back storage area and back kitchen. PIC says floors should be fixed around spring/summer.		X

No corrections have been made since the initial investigation. The facility will voluntarily close until they can come in to compliance. Follow up will take place when corrections have been made.

Person in Charge Dom Doherty	Date 11-Mar-2024
Sanitarian Brittany Riley	Licenser Vinton County Health Department