

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

Name of facility Mullins On Main	Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License Number JZUN-9W2HDZ	Date 19-Dec-2023
Address 105 E Main ST		City/State/Zip Code Mc Arthur OH 45651	
License holder Mullins On Main	Inspection Time 60	Travel Time 0	Category/Descriptive Commercial FSO < 25000 sq. ft. - Risk Level III
Type of Inspection Standard	Follow up date (if required) 2-Jan-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	IN	Person in charge present, demonstrates knowledge, and performs duties	21	N/A	Proper hot holding temperatures
2	OUT	Certified Food Protection Manager	22	IN	Proper cold holding temperatures
Employee Health			23	IN	Proper date marking and disposition
3	IN	Management, food employees and conditional employees; knowledge, responsibilities and reporting	24	N/A	Time as a public health control: procedures & records
4	IN	Proper use of restriction and exclusion	Consumer Advisory		
5	IN	Procedures for responding to vomiting and diarrheal events	25	N/A	Consumer advisory provided for raw or undercooked foods
Good Hygienic Practices			Highly Susceptible Populations		
6	IN	Proper eating, tasting, drinking, or tobacco use	26	N/A	Pasteurized foods used; prohibited foods not offered
7	N/O	No discharge from eyes, nose, and mouth	Chemical		
Preventing Contamination by Hands			27	N/A	Food additives: approved and properly used
8	IN	Hands clean and properly washed	28	IN	Toxic substances properly identified, stored, used
9	IN	No bare hand contact with ready-to-eat foods or approved alternate method properly followed	Conformance with Approved Procedures		
10	IN	Adequate handwashing facilities supplied & accessible	29	N/A	Compliance with Reduced Oxygen Packaging, other specialized processes, and HACCP Plan
Approved Source			30	N/A	Special Requirements: Fresh Juice Production
11	IN	Food obtained from approved source	31	N/A	Special Requirements: Heat Treatment Dispensing Freezers
12	N/O	Food received at proper temperature	32	N/A	Special Requirements: Custom Processing
13	IN	Food in good condition, safe, and unadulterated	33	N/A	Special Requirements: Bulk Water Machine Criteria
14	N/A	Required records available: shellstock tags, parasite destruction	34	N/A	Special Requirements: Acidified White Rice Preparation Criteria
Protection From Contamination			35	N/A	Critical Control Point Inspection
15	IN	Food separated and protected	36	N/A	Process Review
16	IN	Food-contact surfaces: cleaned and sanitized	37	N/A	Variance
17	IN	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.		
Time/Temperature Controlled for Safety Food (TCS food)					
18	N/O	Proper cooking time and temperatures			
19	N/A	Proper reheating procedures for hot holding			
20	N/O	Proper cooling time and temperatures			

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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	N/A	Pasteurized eggs used where required	54	OUT	Food and non-food contact surfaces cleanable, proper designed, constructed, and used
39	IN	Water and ice from approved source	55	IN	Warewashing facilities: installed, maintained, used; test strips
<b>Food Temperature Control</b>		<b>Physical Facilities</b>			
40	IN	Proper cooling methods used; adequate equipment for temp control	56	IN	Non-food contact surfaces clean
41	N/O	Plant food properly cooked for hot holding	57	IN	Hot and cold water available; adequate pressure
42	N/O	Approved thawing methods used	58	IN	Plumbing installed; proper backflow devices
43	IN	Thermometers provided and accurate	59	IN	Sewage and waste water properly disposed
<b>Food Identification</b>		<b>Administrative</b>			
44	IN	Food properly labeled; original container	60	IN	Toilet facilities: properly constructed, supplied, cleaned
<b>Prevention of Food Contamination</b>		<b>Existing Equipment and Facilities</b>			
45	IN	Insects, rodents, and animals not present/outer openings protected	61	IN	Garbage/refuse properly disposed; facilities maintained
46	IN	Contamination prevented during food preparation, storage & display	62	IN	Physical facilities installed, maintained, and cleaned; dogs in outdoor dining areas
47	OUT	Personal cleanliness	63	IN	Adequate ventilation and lighting; designated areas used
48	N/O	Wiping cloths: properly used and stored	64	IN	Existing Equipment and Facilities
49	N/O	Washing fruits and vegetables	<b>Administrative</b>		
<b>Proper Use of Utensils</b>		<b>901:3-4 OAC</b>			
50	IN	In-use utensils: properly stored	<b>3701-21 OAC</b>		
51	OUT	Utensils, equipment and linens: properly stored, dried, handled			
52	IN	Single-use/single-service articles: properly stored, used			
53	N/O	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
02	3717-1-02.4(A)(2)	NC	Observations: Facility does not have an employee with manager certification in food protection.		X
47	3717-1-02.3(C)	NC	Observations: Food employee(s) not wearing a hair restraint.		
51	3717-1-04.8(E)(2)	NC	Observations: Clean equipment and utensils not stored in a self-draining position and covered or inverted. Observed containers on prep table were not inverted. PIC flipped the containers when notified.	X	
54	3717-1-04.4(A)(2)	NC	Observations: Equipment components are not intact, tight or properly adjusted. Observed accumulation of ice in reach in freezer in back storage area.		
Person in Charge JC Mullins			Date 19-Dec-2023		
Sanitarian Justin Sargent			Licensor Vinton County Health Department		