



Date of Inspection: 4/7/21

Facility Name: Wells Towne Pump Phone Number 284-6655 PR ID # 155
 Facility Site Address: 114 Crescent City: Greenwood Zip 95947
 Permit #: 21-122 Exp Date: 2/1/22 Permit Holder: Rajinder Singh
 Type of Inspection: **SPECIAL**

See reverse side for the code sections and general requirements that correspond to each violation listed below Routine

In = In compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site MAJ = Major violation OUT = Out of Compliance

In	N/O-N/A		COS	MAJ	OUT	In	N/O-N/A		COS	MAJ	OUT
DEMONSTRATION OF KNOWLEDGE						FOOD FROM APPROVED SOURCES					
	X	1. Demonstration of knowledge; food safety certification				X		16. Food obtained from approved source			
		Food Safety Cert Name: <u>Now - Prep</u> Exp. Date									
EMPLOYEE HEALTH & HYGIENIC PRACTICES						CORONAVIRUS GUIDANCE IMPLEMENTATION					
X		2. All food handlers have valid Food Handler Cards						17. Takeout, Curbside Pickup, or Delivery Only			N/A
X		3. Communicable disease; reporting, restrictions & exclusions				X		18. Social Distancing Implemented			
X		4. No discharge from eyes, nose, and mouth				X		19. Face Covering Used			Available
X		5. Proper eating, tasting, drinking or tobacco use				Highly Susceptible Populations					
PREVENTING CONTAMINATION BY HANDS						WATER/HOT WATER					
X		6. Hands clean and properly washed; gloves used properly				X		20. Licensed health care facilities/ public & private schools; prohibited foods not offered			
X		7. Adequate handwashing facilities supplied & accessible				LIQUID WASTE DISPOSAL					
TIME AND TEMPERATURE RELATIONSHIPS						VERMIN					
X		8. Proper hot and cold holding temperatures				X		21. Hot and cold water available			
	X	9. Time as a public health control; procedures & records				X		22. Sewage and wastewater properly disposed			
	X	10. Proper cooling methods				23. No rodents, insects, birds, or animals					
	X	11. Proper cooking time & temperatures				VERMIN					
	X	12. Proper reheating procedures for hot holding				23. No rodents, insects, birds, or animals					
PROTECTION FROM CONTAMINATION						VERMIN					
X		13. Returned and re-service of food				23. No rodents, insects, birds, or animals					
X		14. Food in good condition, safe and unadulterated				VERMIN					
X	X	15. Food contact surfaces: clean and sanitized				23. No rodents, insects, birds, or animals					

FOOD SAFETY AND CORONAVIRUS (COVID-19) SPECIAL INSPECTION OBSERVATIONS

Observation area with multiple blank lines for notes.

Received by (Print) Pat Sanders Title _____
 Email: _____
 Specialist (Print) PAT SANDERS Specialist (Signature) [Signature] Re-inspection Date: _____