
	GEORGIA DEPARTMENT OF PUBLIC HEALTH Food Service Establishment Inspection Report	CURRENT SCORE	CURRENT GRADE
	Establishment Name: <u>C AND L JAMAICAN RESTAURANT</u> Address: <u>2296 Henry Clower Blvd SW</u> City: <u>Snellville</u> Time In: <u>02:20 PM</u> Time Out: <u>03:30 PM</u> Inspection Date: <u>11/29/2023</u> CFSM: <u>Stephen Ramsroope 23869288 04/25/2028</u>	100	A
Purpose of Inspection: Routine <input checked="" type="radio"/> Follow-up <input type="radio"/> Compliant <input type="radio"/> Preliminary <input type="radio"/> Other <input type="radio"/> Risk Type: 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> Permit#: <u>067-FS-12396</u>	Last Score: 90 Grade: A Date: 02/28/2023 Prior Score: 92 Grade: A Date: 11/22/2022	SCORING AND GRADING: A=90-100 B=80-89 C=70-79 U<69	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS
(Mark designated compliance status (IN, OUT, NA, or NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable.)

<p>1 IN OUT NA NO Supervision 4 points</p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 1-2A PIC present, demonstrates knowledge, performs duties <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 1-2B Certified Food Protection Manager <input type="radio"/> <input type="radio"/></p> <p>2 IN OUT NA NO Employee Health, Good Hygienic Practices, Preventing Contamination by Hands 9 points</p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 2-1A Proper use of restriction & exclusion <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 2-1B Hands clean and properly washed <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 2-1C No bare hand contact with ready-to-eat foods or approved alternate method properly followed <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 2-2A Management knowledge, responsibilities, reporting <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 2-2B Proper eating, tasting, drinking, or tobacco use <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 2-2C No discharge from eyes, nose, and mouth <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 2-2D Adequate handwashing facilities supplied & accessible <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 2-2E Response procedures for vomiting & diarrheal events <input type="radio"/> <input type="radio"/></p> <p>3 IN OUT NA NO Approved Source 9 points</p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 3-1A Food obtained from approved source <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/> 3-1B Food received at proper temperature <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 3-1C. Food in good condition, safe, and unadulterated <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> <input type="radio"/> <input checked="" type="radio"/> <input type="radio"/> 3-1D Required records: shellstock tags, parasite destruction <input type="radio"/> <input type="radio"/></p> <p>4 IN OUT NA NO Protection From Contamination 9 points</p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 4-1A Food separated and protected <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 4-1B Proper disposition of returned, previously served, reconditioned, and unsafe food <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 4-2A Food stored covered <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 4-2B Food-contact surfaces: cleaned & sanitized <input type="radio"/> <input type="radio"/></p>	<p>5 IN OUT NA NO Cooking and Reheating of TCS Foods, Consumer Advisory 9 points</p> <p><input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/> 5-1A Proper cooking time and temperatures <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> <input type="radio"/> <input type="radio"/> <input checked="" type="radio"/> 5-1B Proper reheating procedures for hot holding <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> <input type="radio"/> <input checked="" type="radio"/> <input type="radio"/> 5-2 Consumer advisory provided for raw and undercooked foods <input type="radio"/> <input type="radio"/></p> <p>6 IN OUT NA NO Holding of TCS Foods, Date Marking of TCS Foods 9 points</p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 6-1A Proper cold holding temperatures <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 6-1B Proper hot holding temperatures <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 6-1C Proper cooling time and temperature <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> <input type="radio"/> <input checked="" type="radio"/> <input type="radio"/> 6-1D Time as a public health control: procedures and records <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 6-2 Proper date marking and disposition <input type="radio"/> <input type="radio"/></p> <p>7 IN OUT NA NO Highly Susceptible Populations 9 points</p> <p><input type="radio"/> <input type="radio"/> <input checked="" type="radio"/> <input type="radio"/> 7-1 Pasteurized foods used: Prohibited foods not offered <input type="radio"/> <input type="radio"/></p> <p>8 IN OUT NA NO Chemicals 4 points</p> <p><input type="radio"/> <input type="radio"/> <input checked="" type="radio"/> <input type="radio"/> 8-2A Food additives: approved and properly used <input type="radio"/> <input type="radio"/></p> <p><input checked="" type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> 8-2B Toxic substances properly identified, stored, used <input type="radio"/> <input type="radio"/></p> <p>9 IN OUT NA NO Conformance with Approved Procedures 4 points</p> <p><input type="radio"/> <input type="radio"/> <input checked="" type="radio"/> <input type="radio"/> 9-2 Compliance with variance, specialized process and HACCP plan <input type="radio"/> <input type="radio"/></p>
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GOOD RETAIL PRACTICES
(Mark the numbered item OUT, if not in compliance. For items marked OUT, mark COS or R for each item as applicable. R = Repeat Violation of the same code provision = 1 point)
Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

<p>10 OUT Safe Food and Water, Food Identification 3 points</p> <p><input type="radio"/> 10A. Pasteurized eggs used where required <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 10B. Water and ice from approved source <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 10C. Variance obtained for specialized processing methods <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 10D. Food properly labeled; original container <input type="radio"/> <input type="radio"/></p> <p>11 OUT Food Temperature Control 3 points</p> <p><input type="radio"/> 11A. Proper cooling methods used: adequate equipment for temperature control <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 11B. Plant food properly cooked for hot holding <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 11C. Approved thawing methods used <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 11D. Thermometers provided and accurate <input type="radio"/> <input type="radio"/></p> <p>12 OUT Prevention of Food Contamination 3 points</p> <p><input type="radio"/> 12A. Contamination prevented during food preparation, storage, display <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 12B. Personal cleanliness <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 12C. Wiping cloths: properly used and stored <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 12D. Washing fruits and vegetables <input type="radio"/> <input type="radio"/></p> <p>13 OUT Postings and Compliance with Clean Air Act 1 point</p> <p><input type="radio"/> 13A. Posted: Permit/Inspection/Choking Poster/Handwashing <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 13B. Compliance with Georgia Smoke Free Air Act <input type="radio"/> <input type="radio"/></p>	<p>14 OUT Proper Use of Utensils 1 point</p> <p><input type="radio"/> 14A. In-use utensils: properly stored <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 14B. Utensils, equipment and linens: properly stored, dried, handled <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 14C. Single-use/single-service articles: properly stored, used <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 14D. Gloves used properly <input type="radio"/> <input type="radio"/></p> <p>15 OUT Utensils, Equipment and Vending 1 point</p> <p><input type="radio"/> 15A. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 15B. Warewashing facilities: installed, maintained, used; test strips <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 15C. Nonfood-contact surfaces clean <input type="radio"/> <input type="radio"/></p> <p>16 OUT Water, Plumbing and Waste 2 points</p> <p><input type="radio"/> 16A. Hot and cold water available; adequate pressure <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 16B. Plumbing installed; proper backflow devices <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 16C. Sewage and waste water properly disposed <input type="radio"/> <input type="radio"/></p> <p>17 OUT Physical Facilities 1 point</p> <p><input type="radio"/> 17A. Toilet facilities: properly constructed, supplied, cleaned <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 17B. Garbage/refuse properly disposed; facilities maintained <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 17C. Physical facilities installed, maintained, and clean <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> 17D. Adequate ventilation and lighting; designated areas used <input type="radio"/> <input type="radio"/></p> <p>18 OUT Pest and Animal Control 3 points</p> <p><input type="radio"/> 18. Insects, rodents, and animals not present <input type="radio"/> <input type="radio"/></p>
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Person in Charge (Signature) _____ (Print) Gerald	Date: <u>11/29/2023</u>
Inspector (Signature) 	LMB EHS Follow-up: YES <input type="radio"/> NO <input checked="" type="radio"/> Follow-up Date: _____

Food Service Establishment Inspection Report Addendum

Violations cited in this report must be corrected within the time frames specified below, or as stated in the Georgia Department of Public Health Rules and Regulations Food Service Chapter 511-6-1, Rule .10 subsections (2)(h) and (i).

Establishment C AND L JAMAICAN RESTAURANT	Permit # 067-FS-12396	Date 11/29/2023
Address 2296 Henry Clower Blvd SW	City/State Snellville GA	Zip Code 30078

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Jerk chicken (cooling 30 min) / counter top	82	Jerk Chicken (cooling 1hr) / walk in cooler	68	/	
/		/		/	
/		/		/	
/		/		/	
/		/		/	
/		/		/	
/		/		/	
/		/		/	

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Observations and Corrective Actions

Person in Charge (Signature)	Date 11/29/2023
Inspector (Signature)	Date 11/29/2023

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Item Number	OBSERVATIONS AND CORRECTIVE ACTIONS
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Comments:

All cold holding and hot holding temperatures were in compliance unless otherwise noted.
Questions (770) 963-5132
www.gnrhealth.com

Person in Charge (Signature)	Date 11/29/2023
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Inspector (Signature) 	Date 11/29/2023
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