GEORGIA DEPARTMENT OF PUBL Food Service Establishment Inspect	tion R					CURRENT SCOR	CURRENT GRAD	DE
Address: 4300 Buford Drive  City: Buford Time In: 01:40 PM Time	Out		)3:15 PN	/				
Inspection Date: 11/29/2023				/1				
Purpose of Inspection: Routine Follow-up O Compliant O			Grade	D	ate	$\times$ /I		
Preliminary O Other O	N/A	4	N/A	09/20	/2023	O4		
Risk Type: 1 O 2	Prior Sco	ore	Grade	D	ate			
Risk Factors are important practices or procedures as the most contributing factors in foodborne illness outbreaks. Public Health Interventions are control measures to prevent illness or injury.	91		Α		3/2023	CORING AND GRADING:	A=90-100 B=80-89 C=70-79	U<69
FOODBORNE ILLNESS RISK FACT					C HEA	LTH INTERVENT	IONS	
(Mark designated compliance status (IN, OUT, NA, or NO) for each IN=in compliance OUT=not in compliance NO=not observed NA=not applicable	12731717						item as applicable.) ation of the same code provision=	2 points
Compliance Status	cos	R			iance S		ation of the same code provision-	cos R
1 IN OUT NA NO Supervision	4 poi				T NA NO	Cooking and Re	eheating of TCS Foods,	9 points
1-2A PIC present, demonstrates knowledge, performs duties		-	5 1	1 00		Cons	umer Advisory	
1-2B Certified Food Protection Manager	0	0					time and temperatures	00
2 IN OUT NA NO Employee Health, Good Hygienic Practices,						5-1B Proper reheatin	g procedures for hot holding	00
Preventing Contamination by Hands  2-1A Proper use of restriction & exclusion	9 poi	O				5.2 Consumor adviso	ons provided for row and	4 points
O 2-18 Hands clean and properly washed		ŏ		$\circ$		undercooked foods	ory provided for raw and	00
2 40 No have based contact with sounds to antifered as						Holdin	g of TCS Foods,	
approved alternate method properly followed	0	0	6 1	N OUT	T NA NO		king of TCS Foods	9 points
	4 poi	ints			00	6-1A Proper cold hol		00
2-2A Management knowledge, responsibilities, reporting C 2-2B Proper eating, tasting, drinking, or tobacco use	9 0	0			00	6-1B Proper hot hold	ling temperatures	00
2-2B Proper eating, tasting, drinking, or tobacco use		0		$\circ$	0	6-1C Proper cooling	time and temperature	00
2-2C No discharge from eyes, nose, and mouth		0		$\circ$		6-1D Time as a publi	ic health control: procedures	00
2-2D Adequate handwashing facilities supplied & access bloom		_			•	and records		
2-2E Response procedures for vomiting & diarrheal event		-			00	0.00		4 points
3 IN OUT NA NO Approved Source	9 poi		7	OR SHOOT	NAME OF TAXABLE PARTY.	6-2 Proper date mark	32 7 E S S S	• 0
3-1A Food obtained from approved source     3-1B Food received at proper temperature	0	ö	/- 1	N OU	T NA NO		ceptible Populations	9 points
3-1C. Food in good condition, safe, and unadulterated		ŏ		0   0		7-1 Pasteurized food offered	s used: Prohibited foods not	00
O O 3-1D Required records: shellstock tags, parasite destruction			8 1	N OUT	T NA NO		Chemicals	4 points
4 IN OUT NA NO Protection From Contamination	9 poi	-					approved and properly used	00
O O 4-1A Food separated and protected	0					8-2B Toxic substance	es properly identified, stored,	
4-1B Proper disposition of returned, previously served, reconditioned, and unsafe food	0	0			T NA NO	used Conformance w	ith Approved Procedures	• O
	4 poi	ints					variance, specialized process	
4-2A Food stored covered		0				and HACCP plan		00
4-2B Food-contact surfaces: cleaned & sanitized	0	0						
GOOD								
(Mark the numbered item OUT, if not in compliance. For items marked OUT, man Good Retail Practices are preventive measures to control								
Compliance Status	cos	R		-	iance S		ii objects iiito loods.	COS R
10 OUT Safe Food and Water, Food Identification	3 poi	inte	14	OUT	idiloc c	17,10,100,000,000	of Utensils	200
O 10A. Pasteurized eggs used where required		O	1.4		14A. In-	use utensils: properly		1 point
O 10B. Water and ice from approved source	0	0		0	14B. Uter	nsils, equipment and line	ns: properly stored, dried, handled	00
O 10C. Variance obtained for specialized processing methods	0	0					rticles: properly stored, used	00
O 10D. Food properly labeled; original container	0	0	15	OUT		oves used properly Utensils, Equipm	nent and Vending	O O
11 OUT Food Temperature Control	3 poi	ints		_	SELECTED A SEC		ct surfaces cleanable,	A
O 11A. Proper cooling methods used: adequate equipment for		0				designed, constructe	And the second s	00
temperature control	1.55.50						alled, maintained, used; test strips	
11B. Plant food properly cooked for hot holding     11C. Approved thawing methods used		8	16	OUT	15C. No	nfood-contact surface	ing and Waste	O O
O 11D. Thermometers provided and accurate	ŏ	And in column 2 is not a local division of the local division of t	10		16A. Ho		able; adequate pressure	OO
12 OUT Prevention of Food Contamination	3 poi					imbing installed; prope		00
O 12A. Contamination prevented during food preparation, storage,	0	0			16C. Se	wage and waste wate		00
display			17	OUT	17A To		Facilities	1 point
O 12B. Personal cleanliness O 12C. Wiping cloths: properly used and stored		8					constructed, supplied, cleaned disposed; facilities maintained	00
O 12D. Washing fruits and vegetables		ŏ					ed, maintained, and clean	00
13 OUT Postings and Compliance with Clean Air Act	1 po	MATERIAL PROPERTY.		-	17D. Ade		ighting; designated areas used	• 0
O 13A. Posted: Permit/Inspection/Choking Poster/Handwashing	and the second second second second	0	18	OUT	10 1		imal Control	3 points
O 13B. Compliance with Georgia Smoke Free Air Act	0	U		0	io. inse	cts, rodents, and anim	iais not present	00
Person in Charge (Signature)		(P	Print) J	oseph		20 (20)	ite:11/29/2023	
Inspector (Signature) VKM EKM EHS			F	ollow-	up: YE	s O NO ● Fo	llow-up Date: <u>11/29/2023</u>	

Food Service	Establis	nment Inspection	Report Ad	ldendum	Page 2 of 3		
Violations cited in this report must Regulations Food Service Chapter Establishment		in the time frames specified below, subsections (2)(h) and (i).  Permit #			Public Health Rules and ate		
GOLDEN BUDDHA RESTAURANT		067-1344		11/29/2023			
Address 4300 Buford Drive			City/State Buford	GA	Zip Code 30518		
		TEMPERATURE OBSI	ERVATIONS				
Item/Location	Temp	Item/Location	Temp	Item/Loca	ation Temp		
chicken (cooked from raw) #1 / wok	193	chicken (cooked from raw) #2 / wok	177	/			
1		1		1			
1		1		/			
1		1		1			
				/			
		/		/			
Item				/			
Number		OBSERVATIONS AND	CORRECTIVE	ACTIONS			
		lwashing sink and rubber bands and be used for purposes other than hand	. •	er hand washing sink. // It	tems were removed from the		
of cook/preparation. // Refrigerated,	ready-to-eat time/t	chicken, noodles, canned vegetables, emperature control for safety foods poy with the food shall be used/discard	repared and held in a	a food establishment for	more than 24-hours shall be		
8-2B: .07(6)(c) COS Observed ster stored so they cannot contaminate f equipment, utensils, linens, and sing	ood,	iners stored above prep cooler. // Ste gle-use articles	rnos were taken out o	of the kitchen. // Poisono	us or toxic materials shall be		
11C: .04(6)(c) COS Observed froze safety food shall be thawed: 1. Under refrigeration that maintains 2. Completely submerged under run (i) At a water temperature of 70°F (2)	the food temperation	ving in standing water at room temper ure at 41°F (5°C) or less; or	ature. // Shrimp was	placed in walk in cooler.	// time/temperature control for		
items. // Areas designated for emplo	oyees to eat, drink,	n walk in cooler and chest freezer ab and use tobacco shall be located so t rticles are protected from contaminati	that food,	ems. // Items were move	d to not contaminate customer		
<u> </u>							

Date 11/29/2023

Date 11/29/2023

Person in Charge (Signature)

Inspector (Signature)

gulations Food Service Chapter 511-6-1, Rule .10 sub tablishment	Permit #	Date
LDEN BUDDHA RESTAURANT	067-1344	11/29/2023
dress 00 Buford Drive	City/State Buford	GA Zip Code 30518
Item umber	DBSERVATIONS AND CORRECTIVE	E ACTIONS
mments:		
TE: All hot and cold holding temperatures assessed in o	compliance unless otherwise noted.	
cility uses food colorings and MSG as an additive.		
od in freezer frozen solid.		
od storage chart provided to facility.		
sure stickers and glue residue are removed before items	s are washed and sanitized.	
not reuse boxes that held raw meat.		
nt inspection with JND		
estions? 0-963-5132 w.gnrhealth.com		
rson in Charge (Signature)		Date 11/29/2023
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Date 11/29/2023