

 <p>GEORGIA DEPARTMENT OF PUBLIC HEALTH Food Service Establishment Inspection Report</p>	Establishment Name: ASIA GRILL AND BUFFET	CURRENT SCORE	CURRENT GRADE	
	Address: 3843 Buford Dr	73	C	
City: Buford	<p style="text-align: center; font-weight: bold;">SCORING AND GRADING: A=90-100 B=80-89 C=70-79 U≤69</p>			
Time In: 12:50 PM Time Out: 03:40 PM				
Inspection Date: 02/10/2023 CFSM: Cheung Lee Yeung 20139965 01/13/2026	Last Score N/A Grade N/A Date 04/29/2022			
Purpose of Inspection: Routine <input checked="" type="radio"/> Follow-up <input type="radio"/> Compliant <input type="radio"/>	Prior Score N/A Grade N/A Date 03/28/2022			
Risk Type: 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> Permit#: 067-FS-10674	<p>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.</p>			

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.)

IN=in compliance OUT=not in compliance NO=not observed NA=not applicable COS=corrected on-site during inspection R=Repeat violation of the same code provision=2 points																																																																																																																																																																																																																																																																																																
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="5">Compliance Status</th> <th>COS</th> <th>R</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">IN</td> <td style="text-align: center;">OUT</td> <td style="text-align: center;">NA</td> <td style="text-align: center;">NO</td> <td colspan="2" style="text-align: center;">Supervision 4 points</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">1-2A PIC present, demonstrates knowledge, performs duties <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">1-2B Certified Food Protection Manager <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">2</td> <td style="text-align: center;">IN</td> <td style="text-align: center;">OUT</td> <td style="text-align: center;">NA</td> <td style="text-align: center;">NO</td> <td colspan="2" style="text-align: center;">Employee Health, Good Hygienic Practices, Preventing Contamination by Hands 9 points</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">2-1A Proper use of restriction & exclusion <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">2-1B Hands clean and properly washed <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">2-1C No bare hand contact with ready-to-eat foods or approved alternate method properly followed <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">2-2A Management knowledge, responsibilities, reporting <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">2-2B Proper eating, tasting, drinking, or tobacco use <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">2-2C No discharge from eyes, nose, and mouth <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">2-2D Adequate handwashing facilities supplied & accessible <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">2-2E Response procedures for vomiting & diarrheal events <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">3</td> <td style="text-align: center;">IN</td> <td style="text-align: center;">OUT</td> <td style="text-align: center;">NA</td> <td style="text-align: center;">NO</td> <td colspan="2" style="text-align: center;">Approved Source 9 points</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">3-1A Food obtained from approved source <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">3-1B Food received at proper temperature <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">3-1C. Food in good condition, safe, and unadulterated <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">3-1D Required records: shellstock tags, parasite destruction <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">4</td> <td style="text-align: center;">IN</td> <td style="text-align: center;">OUT</td> <td style="text-align: center;">NA</td> <td style="text-align: center;">NO</td> <td colspan="2" style="text-align: center;">Protection From Contamination 9 points</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">4-1A Food separated and protected <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">4-1B Proper disposition of returned, previously served, reconditioned, and unsafe food <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">4-2A Food stored covered <input checked="" type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">4-2B Food-contact surfaces: cleaned & sanitized <input type="radio"/> <input type="radio"/></td> </tr> </tbody> </table>	Compliance Status					COS	R	1	IN	OUT	NA	NO	Supervision 4 points		<input checked="" type="radio"/>	<input 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"/>		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1-2B Certified Food Protection Manager <input type="radio"/> <input type="radio"/>		2	IN	OUT	NA	NO	Employee Health, Good Hygienic Practices, Preventing Contamination by Hands 9 points		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-1A Proper use of restriction & exclusion <input type="radio"/> <input type="radio"/>		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-1B Hands clean and properly washed <input type="radio"/> <input type="radio"/>		<input checked="" type="radio"/>	<input 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"/>		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-2A Management knowledge, responsibilities, reporting <input type="radio"/> <input type="radio"/>		<input checked="" type="radio"/>	<input 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"/>		<input checked="" type="radio"/>	<input 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"/>		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-2D Adequate handwashing facilities supplied & accessible <input type="radio"/> <input type="radio"/>		<input checked="" type="radio"/>	<input 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"/>		3	IN	OUT	NA	NO	Approved Source 9 points		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3-1A Food obtained from approved source <input type="radio"/> <input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	3-1B Food received at proper temperature <input type="radio"/> <input type="radio"/>		<input checked="" type="radio"/>	<input 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"/>		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3-1D Required records: shellstock tags, parasite destruction <input type="radio"/> <input type="radio"/>		4	IN	OUT	NA	NO	Protection From Contamination 9 points		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4-1A Food separated and protected <input type="radio"/> <input type="radio"/>		<input checked="" type="radio"/>	<input 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"/>		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4-2A Food stored covered <input checked="" type="radio"/> <input type="radio"/>		<input type="radio"/>	<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"/>		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="5">Compliance Status</th> <th>COS</th> <th>R</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">5</td> <td style="text-align: center;">IN</td> <td style="text-align: center;">OUT</td> <td style="text-align: center;">NA</td> <td style="text-align: center;">NO</td> <td colspan="2" style="text-align: center;">Cooking and Reheating of TCS Foods, Consumer Advisory 9 points</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">5-1A Proper cooking time and temperatures <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">5-1B Proper reheating procedures for hot holding <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">5-2 Consumer advisory provided for raw and undercooked foods <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">6</td> <td style="text-align: center;">IN</td> <td style="text-align: center;">OUT</td> <td style="text-align: center;">NA</td> <td style="text-align: center;">NO</td> <td colspan="2" style="text-align: center;">Holding of TCS Foods, Date Marking of TCS Foods 9 points</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">6-1A Proper cold holding temperatures <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">6-1B Proper hot holding temperatures <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">6-1C Proper cooling time and temperature <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">6-1D Time as a public health control: procedures and records <input checked="" type="radio"/> <input checked="" type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">6-2 Proper date marking and disposition <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">7</td> <td style="text-align: center;">IN</td> <td style="text-align: center;">OUT</td> <td style="text-align: center;">NA</td> <td style="text-align: center;">NO</td> <td colspan="2" style="text-align: center;">Highly Susceptible Populations 9 points</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">7-1 Pasteurized foods used: Prohibited foods not offered <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">8</td> <td style="text-align: center;">IN</td> <td style="text-align: center;">OUT</td> <td style="text-align: center;">NA</td> <td style="text-align: center;">NO</td> <td colspan="2" style="text-align: center;">Chemicals 4 points</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">8-2A Food additives: approved and properly used <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">8-2B Toxic substances properly identified, stored, used <input type="radio"/> <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">9</td> <td style="text-align: center;">IN</td> <td style="text-align: center;">OUT</td> <td style="text-align: center;">NA</td> <td style="text-align: center;">NO</td> <td colspan="2" style="text-align: center;">Conformance with Approved Procedures 4 points</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="2">9-2 Compliance with variance, specialized process and HACCP plan <input type="radio"/> <input type="radio"/></td> </tr> </tbody> </table>	Compliance Status					COS	R	5	IN	OUT	NA	NO	Cooking and Reheating of TCS Foods, Consumer Advisory 9 points		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5-1A Proper cooking time and temperatures <input type="radio"/> <input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	5-1B Proper reheating procedures for hot holding <input type="radio"/> <input type="radio"/>		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5-2 Consumer advisory provided for raw and undercooked foods <input type="radio"/> <input type="radio"/>		6	IN	OUT	NA	NO	Holding of TCS Foods, Date Marking of TCS Foods 9 points		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1A Proper cold holding temperatures <input type="radio"/> <input type="radio"/>		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1B Proper hot holding temperatures <input type="radio"/> <input type="radio"/>		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1C Proper cooling time and temperature <input type="radio"/> <input type="radio"/>		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1D Time as a public health control: procedures and records <input checked="" type="radio"/> <input checked="" type="radio"/>		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-2 Proper date marking and disposition <input type="radio"/> <input type="radio"/>		7	IN	OUT	NA	NO	Highly Susceptible Populations 9 points		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	7-1 Pasteurized foods used: Prohibited foods not offered <input type="radio"/> <input type="radio"/>		8	IN	OUT	NA	NO	Chemicals 4 points		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8-2A Food additives: approved and properly used <input type="radio"/> <input type="radio"/>		<input checked="" type="radio"/>	<input 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"/>		9	IN	OUT	NA	NO	Conformance with Approved Procedures 4 points		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	9-2 Compliance with variance, specialized process and HACCP plan <input type="radio"/> <input type="radio"/>	
Compliance Status					COS	R																																																																																																																																																																																																																																																																																										
1	IN	OUT	NA	NO	Supervision 4 points																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input 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"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	1-2B Certified Food Protection Manager <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
2	IN	OUT	NA	NO	Employee Health, Good Hygienic Practices, Preventing Contamination by Hands 9 points																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-1A Proper use of restriction & exclusion <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-1B Hands clean and properly washed <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input 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"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-2A Management knowledge, responsibilities, reporting <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input 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"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input 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"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	2-2D Adequate handwashing facilities supplied & accessible <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input 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"/>																																																																																																																																																																																																																																																																																											
3	IN	OUT	NA	NO	Approved Source 9 points																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3-1A Food obtained from approved source <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	3-1B Food received at proper temperature <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input 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"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	3-1D Required records: shellstock tags, parasite destruction <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
4	IN	OUT	NA	NO	Protection From Contamination 9 points																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4-1A Food separated and protected <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input 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"/>																																																																																																																																																																																																																																																																																											
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4-2A Food stored covered <input checked="" type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input type="radio"/>	<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"/>																																																																																																																																																																																																																																																																																											
Compliance Status					COS	R																																																																																																																																																																																																																																																																																										
5	IN	OUT	NA	NO	Cooking and Reheating of TCS Foods, Consumer Advisory 9 points																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5-1A Proper cooking time and temperatures <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	5-1B Proper reheating procedures for hot holding <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	5-2 Consumer advisory provided for raw and undercooked foods <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
6	IN	OUT	NA	NO	Holding of TCS Foods, Date Marking of TCS Foods 9 points																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1A Proper cold holding temperatures <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1B Proper hot holding temperatures <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1C Proper cooling time and temperature <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1D Time as a public health control: procedures and records <input checked="" type="radio"/> <input checked="" type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-2 Proper date marking and disposition <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
7	IN	OUT	NA	NO	Highly Susceptible Populations 9 points																																																																																																																																																																																																																																																																																											
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	7-1 Pasteurized foods used: Prohibited foods not offered <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
8	IN	OUT	NA	NO	Chemicals 4 points																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8-2A Food additives: approved and properly used <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											
<input checked="" type="radio"/>	<input 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"/>																																																																																																																																																																																																																																																																																											
9	IN	OUT	NA	NO	Conformance with Approved Procedures 4 points																																																																																																																																																																																																																																																																																											
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	9-2 Compliance with variance, specialized process and HACCP plan <input type="radio"/> <input type="radio"/>																																																																																																																																																																																																																																																																																											

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.

<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="5">Compliance Status</th> <th>COS</th> <th>R</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">10</td> <td style="text-align: center;">OUT</td> <td colspan="3" style="text-align: center;">Safe Food and Water, Food Identification</td> <td colspan="2" style="text-align: center;">3 points</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">10A. Pasteurized eggs used where required</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">10B. Water and ice from approved source</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">10C. Variance obtained for specialized processing methods</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">10D. Food properly labeled; original container</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;">11</td> <td style="text-align: center;">OUT</td> <td colspan="3" style="text-align: center;">Food Temperature Control</td> <td colspan="2" style="text-align: center;">3 points</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">11A. Proper cooling methods used: adequate equipment for temperature control</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">11B. Plant food properly cooked for hot holding</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">11C. Approved thawing methods used</td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">11D. Thermometers provided and accurate</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;">12</td> <td style="text-align: center;">OUT</td> <td colspan="3" style="text-align: center;">Prevention of Food Contamination</td> <td colspan="2" style="text-align: center;">3 points</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">12A. Contamination prevented during food preparation, storage, display</td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">12B. Personal cleanliness</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">12C. Wiping cloths: properly used and stored</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">12D. Washing fruits and vegetables</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;">13</td> <td style="text-align: center;">OUT</td> <td colspan="3" style="text-align: center;">Postings and Compliance with Clean Air Act</td> <td colspan="2" style="text-align: center;">1 point</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">13A. Posted: Permit/Inspection/Choking Poster/Handwashing</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">13B. Compliance with Georgia Smoke Free Air Act</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> </tbody> </table>	Compliance Status					COS	R	10	OUT	Safe Food and Water, Food Identification			3 points		<input type="radio"/>	<input type="radio"/>	10A. Pasteurized eggs used where required			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10B. Water and ice from approved source			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10C. Variance obtained for specialized processing methods			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	10D. Food properly labeled; original container			<input type="radio"/>	<input type="radio"/>	11	OUT	Food Temperature Control			3 points		<input type="radio"/>	<input type="radio"/>	11A. Proper cooling methods used: adequate equipment for temperature control			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	11B. Plant food properly cooked for hot holding			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	11C. Approved thawing methods used			<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	11D. Thermometers provided and accurate			<input type="radio"/>	<input type="radio"/>	12	OUT	Prevention of Food Contamination			3 points		<input checked="" type="radio"/>	<input type="radio"/>	12A. Contamination prevented during food preparation, storage, display			<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	12B. Personal cleanliness			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12C. Wiping cloths: properly used and stored			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	12D. Washing fruits and vegetables			<input type="radio"/>	<input type="radio"/>	13	OUT	Postings and Compliance with Clean Air Act			1 point		<input type="radio"/>	<input type="radio"/>	13A. Posted: Permit/Inspection/Choking Poster/Handwashing			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	13B. Compliance with Georgia Smoke Free Air Act			<input type="radio"/>	<input type="radio"/>	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="5">Compliance Status</th> <th>COS</th> <th>R</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">14</td> <td style="text-align: center;">OUT</td> <td colspan="3" style="text-align: center;">Proper Use of Utensils</td> <td colspan="2" style="text-align: center;">1 point</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">14A. In-use utensils: properly stored</td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">14B. Utensils, equipment and linens: properly stored, dried, handled</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">14C. Single-use/single-service articles: properly stored, used</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">14D. Gloves used properly</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;">15</td> <td style="text-align: center;">OUT</td> <td colspan="3" style="text-align: center;">Utensils, Equipment and Vending</td> <td colspan="2" style="text-align: center;">1 point</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">15A. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">15B. Warewashing facilities: installed, maintained, used; test strips</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">15C. Nonfood-contact surfaces clean</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;">16</td> <td style="text-align: center;">OUT</td> <td colspan="3" style="text-align: center;">Water, Plumbing and Waste</td> <td colspan="2" style="text-align: center;">2 points</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">16A. Hot and cold water available; adequate pressure</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">16B. Plumbing installed; proper backflow devices</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">16C. Sewage and waste water properly disposed</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;">17</td> <td style="text-align: center;">OUT</td> <td colspan="3" style="text-align: center;">Physical Facilities</td> <td colspan="2" style="text-align: center;">1 point</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">17A. Toilet facilities: properly constructed, supplied, cleaned</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">17B. Garbage/refuse properly disposed; facilities maintained</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">17C. Physical facilities installed, maintained, and clean</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">17D. Adequate ventilation and lighting; designated areas used</td> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;"><input checked="" type="radio"/></td> </tr> <tr> <td style="text-align: center;">18</td> <td style="text-align: center;">OUT</td> <td colspan="3" style="text-align: center;">Pest and Animal Control</td> <td colspan="2" style="text-align: center;">3 points</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> <td colspan="3">18. Insects, rodents, and animals not present</td> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;"><input type="radio"/></td> </tr> </tbody> </table>	Compliance Status					COS	R	14	OUT	Proper Use of Utensils			1 point		<input checked="" type="radio"/>	<input type="radio"/>	14A. In-use utensils: properly stored			<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	14B. Utensils, equipment and linens: properly stored, dried, handled			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	14C. Single-use/single-service articles: properly stored, used			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	14D. Gloves used properly			<input type="radio"/>	<input type="radio"/>	15	OUT	Utensils, Equipment and Vending			1 point		<input type="radio"/>	<input type="radio"/>	15A. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	15B. Warewashing facilities: installed, maintained, used; test strips			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	15C. Nonfood-contact surfaces clean			<input type="radio"/>	<input type="radio"/>	16	OUT	Water, Plumbing and Waste			2 points		<input type="radio"/>	<input type="radio"/>	16A. Hot and cold water available; adequate pressure			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	16B. Plumbing installed; proper backflow devices			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	16C. Sewage and waste water properly disposed			<input type="radio"/>	<input type="radio"/>	17	OUT	Physical Facilities			1 point		<input type="radio"/>	<input type="radio"/>	17A. Toilet facilities: properly constructed, supplied, cleaned			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	17B. Garbage/refuse properly disposed; facilities maintained			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	17C. Physical facilities installed, maintained, and clean			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	17D. Adequate ventilation and lighting; designated areas used			<input checked="" type="radio"/>	<input checked="" type="radio"/>	18	OUT	Pest and Animal Control			3 points		<input type="radio"/>	<input type="radio"/>	18. Insects, rodents, and animals not present			<input type="radio"/>	<input type="radio"/>
Compliance Status					COS	R																																																																																																																																																																																																																																																																																			
10	OUT	Safe Food and Water, Food Identification			3 points																																																																																																																																																																																																																																																																																				
<input type="radio"/>	<input type="radio"/>	10A. Pasteurized eggs used where required			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	10B. Water and ice from approved source			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	10C. Variance obtained for specialized processing methods			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	10D. Food properly labeled; original container			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
11	OUT	Food Temperature Control			3 points																																																																																																																																																																																																																																																																																				
<input type="radio"/>	<input type="radio"/>	11A. Proper cooling methods used: adequate equipment for temperature control			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	11B. Plant food properly cooked for hot holding			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input checked="" type="radio"/>	<input type="radio"/>	11C. Approved thawing methods used			<input checked="" type="radio"/>	<input checked="" type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	11D. Thermometers provided and accurate			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
12	OUT	Prevention of Food Contamination			3 points																																																																																																																																																																																																																																																																																				
<input checked="" type="radio"/>	<input type="radio"/>	12A. Contamination prevented during food preparation, storage, display			<input checked="" type="radio"/>	<input checked="" type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	12B. Personal cleanliness			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	12C. Wiping cloths: properly used and stored			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	12D. Washing fruits and vegetables			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
13	OUT	Postings and Compliance with Clean Air Act			1 point																																																																																																																																																																																																																																																																																				
<input type="radio"/>	<input type="radio"/>	13A. Posted: Permit/Inspection/Choking Poster/Handwashing			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	13B. Compliance with Georgia Smoke Free Air Act			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
Compliance Status					COS	R																																																																																																																																																																																																																																																																																			
14	OUT	Proper Use of Utensils			1 point																																																																																																																																																																																																																																																																																				
<input checked="" type="radio"/>	<input type="radio"/>	14A. In-use utensils: properly stored			<input checked="" type="radio"/>	<input checked="" type="radio"/>																																																																																																																																																																																																																																																																																			
<input checked="" type="radio"/>	<input type="radio"/>	14B. Utensils, equipment and linens: properly stored, dried, handled			<input type="radio"/>	<input checked="" type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	14C. Single-use/single-service articles: properly stored, used			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	14D. Gloves used properly			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
15	OUT	Utensils, Equipment and Vending			1 point																																																																																																																																																																																																																																																																																				
<input type="radio"/>	<input type="radio"/>	15A. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	15B. Warewashing facilities: installed, maintained, used; test strips			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	15C. Nonfood-contact surfaces clean			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
16	OUT	Water, Plumbing and Waste			2 points																																																																																																																																																																																																																																																																																				
<input type="radio"/>	<input type="radio"/>	16A. Hot and cold water available; adequate pressure			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	16B. Plumbing installed; proper backflow devices			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	16C. Sewage and waste water properly disposed			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
17	OUT	Physical Facilities			1 point																																																																																																																																																																																																																																																																																				
<input type="radio"/>	<input type="radio"/>	17A. Toilet facilities: properly constructed, supplied, cleaned			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	17B. Garbage/refuse properly disposed; facilities maintained			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input type="radio"/>	<input type="radio"/>	17C. Physical facilities installed, maintained, and clean			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			
<input checked="" type="radio"/>	<input type="radio"/>	17D. Adequate ventilation and lighting; designated areas used			<input checked="" type="radio"/>	<input checked="" type="radio"/>																																																																																																																																																																																																																																																																																			
18	OUT	Pest and Animal Control			3 points																																																																																																																																																																																																																																																																																				
<input type="radio"/>	<input type="radio"/>	18. Insects, rodents, and animals not present			<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																			

Person in Charge (Signature) _____	(Print) Cheung	Date: 02/10/2023
Inspector (Signature) JND/CED	JND EHS	Follow-up: YES <input checked="" type="radio"/> NO <input type="radio"/> Follow-up Date: 02/10/2023

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 ASIA GRILL AND BUFFET	Permit # 067-FS-10674	Date 02/10/2023
Address 3843 Buford Dr	City/State Buford GA	Zip Code 30519

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Chicken/Cook temp / Out of the wok	198	Chicken on stick/Cook temp / Out of the steamer	196	Rice pudding #1/Discarded / Walk in Cooler	42
Rice pudding #2/Discarded / Walk in Cooler	42	Vegetable mix/Cooling 20 min / Prep Cooler	51	Vegetable mix/Cooling 1 Hr 55 min / Prep Cooler	42
Lettuce #1/Cooling 2 Hrs 50 min / Walk in Cooler	48	Lettuce #1/Cooling 3Hrs 15 min / Walk in Cooler	46	Lettuce #2/Cooling 2 Hrs 50 min / Walk in Cooler	49
Lettuce #2/Cooling 3 Hrs 15 min / Walk in Cooler	46	Fried shrimp/Cook temp / Out of the fryer	204	Pork fried rice/Cook temp / Hibachi	184
General Tso chicken/Cook temp / Out of the wok	204	Lo mein noodles #1/Discarded / Walk in Cooler	45	Lo mein noodles #2/Discarded / Walk in Cooler	45
Ambient air temp / Walk in Cooler	39	Honeydew melon/Cooling 3 Hrs / Walk in Cooler	44	Honeydew melons/Cooling 4Hrs / Walk-in Freezer	40
/		/		/	
/		/		/	

OBSERVATIONS AND CORRECTIVE ACTIONS

4-2A: .04(4)(c)1(iv) COS Observed multiple food items kept uncovered inside the walk-in freezer. //Food items were covered.// Food must be protected from cross contamination by storing the food in packages, covered containers, or wrappings, except for loosely covered, or uncovered containers in which food is being cooled if protected from overhead contamination. (C)

4-2B: .05(7)(a)1 NCOS Correct By: 02/20/2023 Observed three ice machines with a mold-like substance inside. Observed food debris inside "clean" cups. // Equipment food-contact surfaces and utensils shall be clean to sight and touch. (Pf)
Equipment food-contact surfaces and utensils shall be clean to sight and touch. (Pf)

6-1D: .04(6)(i) (Repeat) COS Observed buffet food items kept in time control without a timestamp of start/discard time on them. ****THIRD CONSECUTIVE VIOLATION-PERMIT SUSPENSION**** //Food items were labeled.// When using Time Control (TPHC) for a maximum of 4 hours:
 1) hot foods shall start at 135°F (57°C) or above and cold foods shall start at 41°F (5°C) or below; (P)
 2) the food items shall be labeled with a start and discard time, not to exceed 4 hours; (Pf)
 3) foods not consumed before the discard time shall be discarded; (P)
 4) when combining ingredients, the start/discard time for the foods shall reflect the start/discard time of the earliest ingredient placed on time control; {P}
 5) food in unmarked containers or packages, or marked to exceed a 4-hour limit shall be discarded; (P)
 6) written procedures TPHC shall be created in advance and made available upon the Health Authorities request. (Pf)

11C: .04(6)(c) (Repeat) COS Observed frozen clams being thawed on top of a prep table. ****SECOND CONSECUTIVE VIOLATION**** //Clams were put under running water.// Time/temperature control for safety food shall be thawed: 1) under refrigeration that keeps the food at 41°F or below; 2) completely submerged in running water with the temperature of the water at 70°F or below, and the no part of the food exceeding 41°F; 3) as a part of the cooking process. (C)

12A: .04(4)(q) (Repeat) COS Observed chicken stored directly on the floor under the stove area. Observed a bag of cabbage stored on the floor inside a walk-in cooler, soy sauce buckets, and cooking oils stored directly on the floor. ****SECOND CONSECUTIVE VIOLATION**** //Food items were removed from the floor.// Food shall be protected from contamination by storing the food:
 1) in a clean dry location; (C)
 2) where it is not exposed to splash, dust, or other contamination; (C) and
 3) at least 6 inches (15 cm) above the floor. (C)

14A: .04(4)(k) (Repeat) COS Observed cups without handles being used as scooping utensils inside working containers. ****SECOND CONSECUTIVE VIOLATION**** //Cups were removed from the containers.// During pauses in food preparation or dispensing, food preparation and dispensing utensils shall be stored: 1. in the food with their handles above the top of the food and the container; 2. in running water of sufficient velocity to flush particulates to the drain, if used with moist food such as ice cream or mashed potatoes; 3. in a clean, dry container; or 4. in a container of water if the water is maintained at a temperature of at least 135°F (57°C) and the container is cleaned at the required frequency. (C)

14B: .05(10)(e) 1,2,4 (Repeat) NCOS Observed multiple containers that were stored as clean, but stacked still wet. ****SECOND CONSECUTIVE VIOLATION****
 Clean equipment and utensils shall be stored in a self-draining position that allows air drying and covered or inverted. (C)

17D: .07(4)(b) (Repeat) COS Observed multiple personal items such as backpacks, hats, jackets, drinks, and protein powder all stored on top of prep tables and over food and single-use items in the dry storage area. ****SECOND CONSECUTIVE VIOLATION**** //Personal items were moved to a designated area.// Areas designated for employees to eat, drink, and use tobacco shall be located so that food, equipment, linens, and single-service and single-use articles are protected from contamination. (C)

Person in Charge (Signature)	Date 02/10/2023
Inspector (Signature)	Date 02/10/2023

Food Service Establishment Inspection Report Addendum

Page 3 of 3

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 ASIA GRILL AND BUFFET	Permit # 067-FS-10674	Date 02/10/2023
Address 3843 Buford Dr	City/State Buford GA	Zip Code 30519

Item Number OBSERVATIONS AND CORRECTIVE ACTIONS

Comments:

Note: All cold-holding and hot-holding items were in compliance unless otherwise noted.

Note: The facility uses MSG, and egg yellow shade as additives.

Note: Ensure all working containers are labeled with their common names.

****YOUR PERMIT HAS BEEN SUSPENDED FOR HAVING THE SAME CODE PROVISION MARKED OUT OF COMPLIANCE ON 3 CONSECUTIVE ROUTINE INSPECTIONS: Violation Code: .04(6)(i) – Time as a Public Health Control (TPHC) (P,Pf, C).**

****PERMIT WAS REINSTATED AFTER ON-SITE TRAINING.****

****UNSATISFACTORY SCORES, REPEAT VIOLATIONS, AND UNCORRECTED VIOLATIONS MAY RESULT IN PERMIT SUSPENSION.**

****Note: A follow-up inspection will occur within 10 days. Ensure all violations are corrected by this time or the permit may be suspended.**

Note: A required additional inspection will occur within the next 12 months.

For questions or comments please call 770-963-5132 or visit www.gnrhealth.com

Person in Charge (Signature)	Date 02/10/2023
Inspector (Signature) JND / CED	Date 02/10/2023