

GEORGIA DEPARTMENT OF PUBLIC HEALTH Food Service Establishment Inspection Report						CURRENT SCORE		CURRENT GRADE	
Establishment Name: LIFETIME FITNESS-LIFE CAFE Address: 1823 N Brown Rd City: Lawrenceville Time In: 03:30 PM Time Out: 04:30 PM Inspection Date: 10/31/2023 CFSM: Jamacia Brown 20382776 03/27/2026 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#: 067-FS-8636 <div style="font-size: small;">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.</div>						100		A	
						<div style="font-size: x-small;">SCORING AND GRADING:</div> A=90-100 B=80-89 C=70-79 U≤69			
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS <small>(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.)</small>									
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									
1 IN OUT NA NO					Supervision		4 points		
<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"/>	
<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"/>	
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"/>		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"/>		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"/>		2-1C No bare hand contact with ready-to-eat foods or approved alternate method properly followed		<input type="radio"/>	<input type="radio"/>	
							4 points		
<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"/>	
<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"/>	
<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"/>	
<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"/>	
<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"/>	
3 IN OUT NA NO					Approved Source		9 points		
<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"/>	
<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"/>	
<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"/>	
<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"/>	
4 IN OUT NA NO					Protection From Contamination		9 points		
<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"/>	
<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"/>	
							4 points		
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		4-2A Food stored covered		<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"/>	
5 IN OUT NA NO					Cooking and Reheating of TCS Foods, Consumer Advisory		9 points		
<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"/>	
<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"/>	
							4 points		
<input checked="" 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"/>		6-1A Proper cold holding temperatures		<input type="radio"/>	<input type="radio"/>	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" 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"/>		6-1C Proper cooling time and temperature		<input type="radio"/>	<input type="radio"/>	
<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"/>	
							4 points		
<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"/>	
7 IN OUT NA NO					Highly Susceptible Populations		9 points		
<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"/>	
8 IN OUT NA NO					Chemicals		4 points		
<input checked="" 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"/>		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"/>		9-2 Compliance with variance, specialized process and HACCP plan		<input type="radio"/>	<input type="radio"/>	
GOOD RETAIL PRACTICES <small>(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)</small> <small>Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.</small>									
10 OUT					Safe Food and Water, Food Identification		3 points		
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		10A. Pasteurized eggs used where required		<input type="radio"/>	<input type="radio"/>	
<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"/>	<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"/>	<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"/>	<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"/>	<input type="radio"/>	<input type="radio"/>		11B. Plant food properly cooked for hot holding		<input type="radio"/>	<input type="radio"/>	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		11C. Approved thawing methods used		<input type="radio"/>	<input type="radio"/>	
<input type="radio"/>	<input 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 type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		12A. Contamination prevented during food preparation, storage, display		<input type="radio"/>	<input type="radio"/>	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		12B. Personal cleanliness		<input type="radio"/>	<input type="radio"/>	
<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"/>	<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"/>	<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"/>	<input type="radio"/>	<input type="radio"/>		13B. Compliance with Georgia Smoke Free Air Act		<input type="radio"/>	<input type="radio"/>	
14 OUT					Proper Use of Utensils		1 point		
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		14A. In-use utensils: properly stored		<input type="radio"/>	<input type="radio"/>	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		14B. Utensils, equipment and linens: properly stored, dried, handled		<input type="radio"/>	<input type="radio"/>	
<input type="radio"/>	<input 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"/>	<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"/>	<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"/>	<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"/>	<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"/>	<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"/>	<input type="radio"/>	<input type="radio"/>		16B. Plumbing installed; proper backflow devices		<input type="radio"/>	<input type="radio"/>	
<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"/>	<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"/>	<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"/>	<input type="radio"/>	<input type="radio"/>		17C. Physical facilities installed, maintained, and clean		<input type="radio"/>	<input type="radio"/>	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		17D. Adequate ventilation and lighting; designated areas used		<input type="radio"/>	<input type="radio"/>	
18 OUT					Pest and Animal Control		3 points		
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		18. Insects, rodents, and animals not present		<input type="radio"/>	<input type="radio"/>	
Person in Charge (Signature) _____ (Print) Jamacia					Date: 10/31/2023				
Inspector (Signature) TWF					Follow-up: YES <input type="radio"/> NO <input checked="" type="radio"/> Follow-up Date: _____				

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Establishment LIFETIME FITNESS-LIFE CAFE	Permit # 067-FS-8636	Date 10/31/2023
Address 1823 N Brown Rd	City/State Lawrenceville GA	Zip Code 30043

[illegible][illegible]

Date 10/31/2023

Date 10/31/2023

Food Service Establishment Inspection Report Addendum

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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 LIFETIME FITNESS-LIFE CAFE	Permit # 067-FS-8636	Date 10/31/2023
Address 1823 N Brown Rd	City/State Lawrenceville GA	Zip Code 30043

Item Number	OBSERVATIONS AND CORRECTIVE ACTIONS
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Comments:

All hot/cold holding temperatures were in compliance unless otherwise stated in temperature log.

NOTE: This facility uses additives - drink syrups and protein powders.

NOTE: Ensure that all dry ingredients have a scoop with handle.

Questions? Visit our website www.gnrhealth.com or call our office 770-963-5132.

Person in Charge (Signature)	Date 10/31/2023
Inspector (Signature) 	Date 10/31/2023