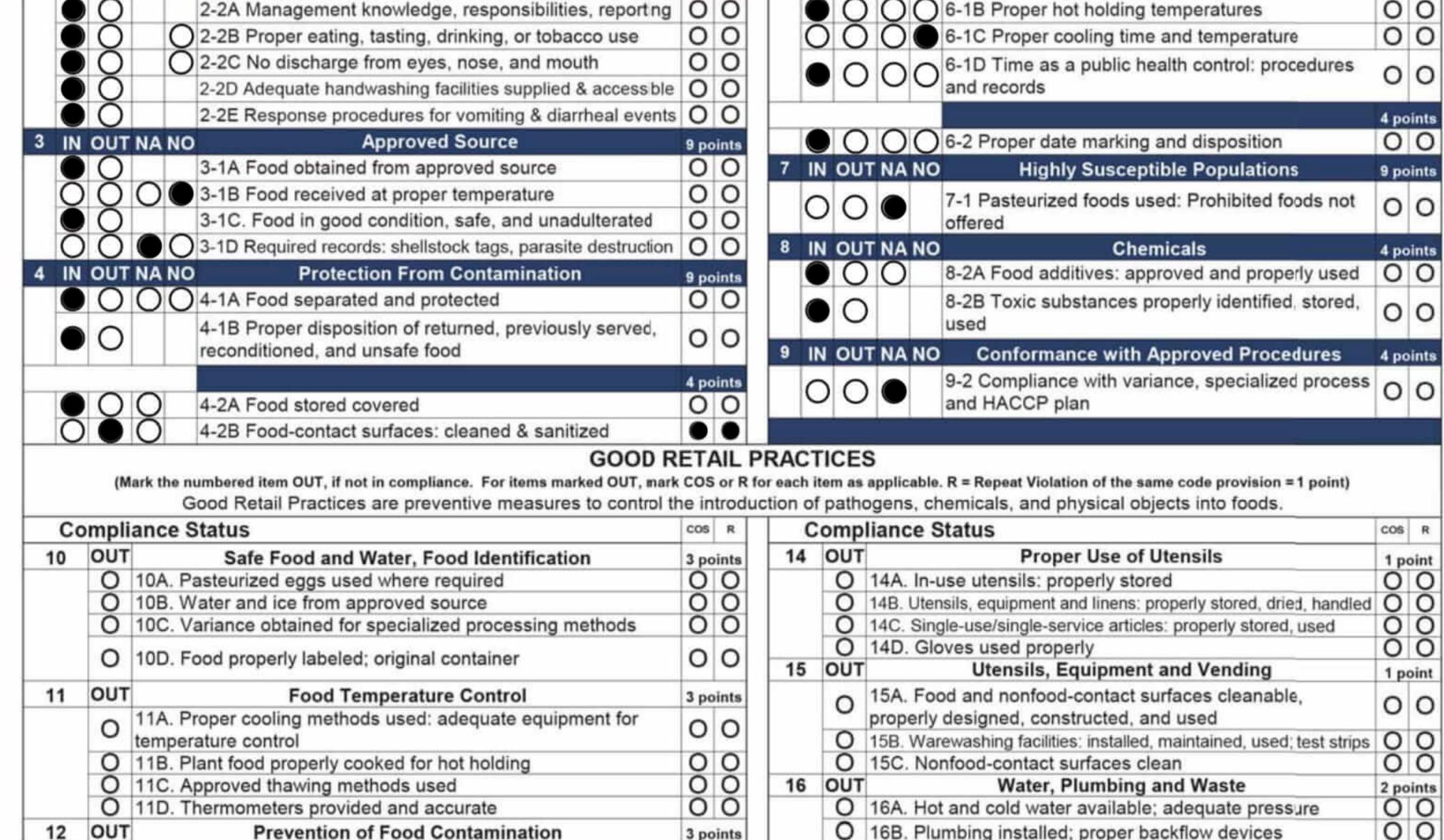
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GEORGIA DEPARTMENT OF PUBLIC HEALTH						CURRENT SCORE	CURRENT GRA	DE
Food Service Establishment Inspection Report								
Establishment Name: Maki of Japan								
Address: 3333 Buford Dr								
	ne Out: _	02:30) PN	Л			_	
	Inspection Date: 05/19/2022 CFSM: I Putu Saputra 19619631 07/15/2025							
Purpose of Inspection: Routine O Follow-up Compliant O		e Gra	de	Da	te			
Preliminary O Other O	47	ι	J	05/11/	2022			
Risk Type: 1 () 2 () 3 () Permit#: 067-FSP-27018								
Risk Factors are important practices or procedures as the most	Prior Score	Gra	de	Da	te			
contributing factors in foodborne illness outbreaks. Public Health	66	1	J	05/02/	12022			
Interventions are control measures to prevent illness or injury.				03/02/			=90-100 B=80-89 C=70-7	9 U<69
FOODBORNE ILLNESS RISK FAC	TORS		PI	IBL IC				-
(Mark designated compliance status (IN, OUT, NA, or NO) for each								
IN=in compliance OUT=not in compliance NO=not observed NA=not applicable						spection R=Repeat violation		=2 points
Compliance Status		1				Status		COS R
1 IN OUT NA NO Supervision	4 poin	ts _	- 11			Cooking and Rehea	ting of TCS Foods,	0 materia
O 1-2A PIC present, demonstrates knowledge, performs duties	s O C	D °	, 11	NUUI	NA NO	Consume	r Advisory	9 points
O O 1-2B Certified Food Protection Manager	00				OC	5-1A Proper cooking time	and temperatures	00
Employee Health, Good Hygienic Practices,			C	0 C	ÕČ	5-1B Proper reheating pro	cedures for hot holding	00
2 IN OUT NA NO Preventing Contamination by Hands	9 poin	ts			1			4 points
2-1A Proper use of restriction & exclusion	00		1			5-2 Consumer advisory pr	rovided for raw and	00
O 2-1B Hands clean and properly washed	00)	4	0		undercooked foods		00
O O O 2-1C No bare hand contact with ready-to-eat foods or approved alternate method properly followed	00				NANC	Holding of	TCS Foods,	
approved alternate method properly followed		1	· "		INA INC	Date Marking	of TCS Foods	9 points
	4 poin	ts		0	OC	6-1A Proper cold holding	temperatures	00



1.64	00.	rievention of rood oontainmation	2 pr	mina			U U	rob. r iumbing matanea, pi	oper backnow devices		~
	0	12A. Contamination prevented during food preparation, storage,	0	0				16C. Sewage and waste w		ŏ	С
	-	display	-	\sim		17	OUT	Physic	cal Facilities	1 poi	nt
	O 12B. Personal cleanliness			0			0	17A. Toilet facilities: proper	ly constructed, supplied, cleaned	00	C
	O 12C. Wiping cloths: properly used and stored			00			0	17B. Garbage/refuse prope	rly disposed; facilities maintained	00	С
	O 12D. Washing fruits and vegetables			0			0	17C. Physical facilities inst	alled, maintained, and clean	0 (C
13	13 OUT Postings and Compliance with Clean Air Act			oint			0	17D. Adequate ventilation an	nd lighting; designated areas used	00	
	0	13A. Posted: Permit/Inspection/Choking Poster/Handwashing	0	0		18	OUT	Pest and	Animal Control	3 poin	Its
	0	13B. Compliance with Georgia Smoke Free Air Act	0	0			0	18. Insects, rodents, and a	nimals not present	00	
Perso	n in C	harge (Signature)		(P	rint)	С	hava		Date: 05/19/2022		
nspec	ctor (S	Signature) MLS EHS				F	ollow-	up: YES O NO O	Follow-up Date:		_

Food Service	e Establis	hment Inspection	Report Ac	ldendum	Page 2	of		
Violations cited in this report mus Regulations Food Service Chapter		hin the time frames specified below subsections (2)(h) and (i).	w, or as stated in the	Georgia Departmer	nt of Public Healt	h Rules and		
Establishment Maki of Japan		2010-T-700-5822-70	Permit # 067-FSP-27018			Date 05/19/2022		
Address 3333 Buford Dr				GA	Zip Code 30519			
TEMPERATURE OBSERVATIONS								
Item/Location	Temp	Item/Location	Temp	ltem/l	_ocation	Temp		
chicken (cook temp) / off the flat top	173.1	Shrimp (cook temp) / off the flat top	162.8	1				
1		1		1				
1		1		1				
1		1		1				
1		1		1				
1		1		1				
1		<i>I</i>		1				
1		1		1				
Item		OBSERVATIONS AND	CODDECTIVE	ACTIONS				

Number

OBSERVATIONS AND CORRECTIVE ACTIONS

4-2B: .05(6)(n) (Repeat) COS Observed the chlorine sanitized to be under 50ppm. PIC added bleach to sanitizer to reach 50-100ppm. A chemical sanitizer used in a sanitizing solution for a manual or mechanical operations must meet a specified minimum concentration (for chlorine sanitizer it must be 50-100 ppm; for quat ammonia, it must be used according to the manufacturer's specifications). (P)



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 Maki of Japan	Permit # 067-FSP-2			Date 05/19/2022		
Address 3333 Buford Dr		City/State Buford	GA	Zip Code 30519		
Item Number	TIONS AND	CORRECTIVE	ACTIONS			
Comments:						
NOTE: All cold and hot held temperatures were in compliance unless othe	erwise noted.					
NOTE: Food coloring is used at this facility.						
NOTE: Questions? Please visit www.gnrhealth.com						



Person in Charge (Signature)	Date 05/19/2022
Inspector (Signature)	Date 05/19/2022