(2003)	NNE _P	GEORGIA DEPARTMENT OF PUBLIC	CH	ΕΛΙ	TU			CURRENT SCORE CI	URRENT GRAD)E	
8	<	Food Service Establishment Inspecti						CURRENT SCORE C	ORKENT GRAD	/E	_
Sagar)	Establishment Name: MARISCOS MAZATLAN		o*i::.•;c							
COUNTY	HEALT	Address: 1650 Pleasant Hill Rd									
City:	Dulu	ith Time In: 12:15 PM Time	Out	:	01:35 PN	1					
Inspect	ion [Date: 05/25/2023			The state of the s						
Purpose	e of	Inspection: Routine Follow-up O Compliant O			Grade	D	ate				
Prelimir			N/	Α	N/A	04/28	/2022				
Risk Ty	pe:	1 O 2 3 O Permit#: 067-FS-11543				ļ.,					
Ris	k Fa	ctors are important practices or procedures as the most	rior S		Grade	D	ate				
		ting factors in foodborne illness outbreaks. Public Health	N/	Α	N/A	04/14	1/2022				
Inte	erve	ntions are control measures to prevent illness or injury.					s	CORING AND GRADING: A=90-100 B	=80-89 C=70-79	U <u><</u> 6	9
		FOODBORNE ILLNESS RISK FACT	OR	SA	ND PL	JBLI	CHEA	LTH INTERVENTIONS			
		(Mark designated compliance status (IN, OUT, NA, or NO) for each n	12 12 12 1						The same was to the same of the same of		
			1					spection R=Repeat violation of the same			
		ince Status	cos		C	ompi	iance S			cos	R
1 IN O	OLV	NA NO Supervision		oints	5 11	V OUT	T NA NO	Cooking and Reheating of TC		9 poir	nts
	\prec	1-2A PIC present, demonstrates knowledge, performs duties	_	0			00	Consumer Advisory		0	
		1-2B Certified Food Protection Manager Employee Health, Good Hygienic Practices,	U	0		3 8		5-1A Proper cooking time and temporal 5-1B Proper reheating procedures for		0	
2 IN O	UT N	NA NO Preventing Contamination by Hands						5-16 Proper reneating procedures in		W	V 10
		2-1A Proper use of restriction & exclusion		O			1_1	5-2 Consumer advisory provided for		4 poi	
A	≺⊤	2-18 Hands clean and properly washed	ŏ				0	undercooked foods	law allu	0	0
		2-16 Hands clean and properly washed 2-16 No bare hand contact with ready-to-eat foods or approved alternate method properly followed						Holding of TCS Food	e		
0		approved alternate method properly followed		0	6 11	N OU	T NA NO	Date Marking of TCS Fo		9 poi	inte
			4 p	oints			00	6-1A Proper cold holding temperatu		0	_
0		2-2A Management knowledge, responsibilities, reporting		0		Ŏ		6-1B Proper hot holding temperature		Ö	
ŏ	5	2-2B Proper eating, tasting, drinking, or tobacco use	O	-	7	5 ŏ		6-1C Proper cooling time and temper		0	
Ŏ	3	O 2-2C No discharge from eyes, nose, and mouth	0	-		. ~		6-1D Time as a public health contro			
ŏ	Ŏ	2-2D Adequate handwashing facilities supplied & access ble	-	0				and records		0	0
Ŏ		2-2E Response procedures for vomiting & diarrheal events	1	-						4 poi	ints
3 IN O	UT N	NA NO Approved Source	9 pc	oints			00	6-2 Proper date marking and dispos		0	
	C	3-1A Food obtained from approved source	_	0	100 TO 10	OTHER DESIGNATION OF	T NA NO			9 poi	
0 (D (3-1B Food received at proper temperature	0	0				7-1 Pasteurized foods used: Prohibi		0	
		3-1C. Food in good condition, safe, and unadulterated	0	0		O		offered		O	U
0		3-1D Required records: shellstock tags, parasite destruction	0	0	8	N OU	T NA NO	Chemicals		4 poi	ints
4 IN O	UT N	NA NO Protection From Contamination	9 pc	oints		\circ		8-2A Food additives: approved and	properly used	0	0
0		4-1A Food separated and protected	•	0				8-2B Toxic substances properly iden	ntified, stored,	0	0
		4-1B Proper disposition of returned, previously served,	0	0				used			_
		reconditioned, and unsafe food		_	9	N OU.	NA NO			4 poi	nts
	<u> </u>		_	oints				9-2 Compliance with variance, spec	ialized process	0	0
	$\leq $	4-2A Food stored covered	0	-				and HACCP plan			
		O TED TOOG COTTLACT SUTTACES. CICATICA & SUTTALECA	_	0	DDAG	105	_				
	/Mar	GOOD R rk the numbered item OUT, if not in compliance. For items marked OUT, mark						P = Panest Violation of the same code prov	delon = 1 point)		
	(mai	Good Retail Practices are preventive measures to control the									
Com	plia	ince Status	cos	1			iance S		7.50	cos	R
	UT	Safe Food and Water, Food Identification	3 pc	oints	14	OUT		Proper Use of Utensils		1 po	int
(0 1	10A. Pasteurized eggs used where required	Ó	0		0	14A. In-	use utensils: properly stored		Ó	
-		10B. Water and ice from approved source	0	0				nsils, equipment and linens: properly store		0	
(0 1	10C. Variance obtained for specialized processing methods	O	0				gle-use/single-service articles: properly s	stored, used	0	
(0 1	10D. Food properly labeled; original container	0	0	15	OUT	14D. GI	oves used properly Utensils, Equipment and Vendi	ina	0	int
11 0	UT	Food Temperature Control	3 pc	oints	10		15A For	od and nonfood-contact surfaces clea	77.1177		
	4	11A. Proper cooling methods used: adequate equipment for						designed, constructed, and used	arraiore,	0	O
		emperature control	0	3.5		-		rewashing facilities: installed, maintained,	used; test strips	0	
(11B. Plant food properly cooked for hot holding	Ö				15C. No	nfood-contact surfaces clean		0	
	_	11C. Approved thawing methods used 11D. Thermometers provided and accurate	0	00	16	OUT	16A Ha	Water, Plumbing and Waste t and cold water available; adequate		2 poi	nts
12 0	UT	Prevention of Food Contamination	1000	oints				imbing installed; proper backflow dev		ŏ	
	4	12A. Contamination prevented during food preparation, storage,	1	100				wage and waste water properly dispo		ŏ	
	9	display	0		17	OUT		Physical Facilities		1 po	int
		12B. Personal cleanliness	Ö			-		let facilities: properly constructed, sup		0	
		12C. Wiping cloths: properly used and stored 12D. Washing fruits and vegetables	00					rbage/refuse properly disposed; facility ysical facilities installed, maintained,		0	
	UT	Postings and Compliance with Clean Air Act		oint				equate ventilation and lighting; designat	TATE OF THE PARTY	0	ŏ
	-	13A. Posted: Permit/Inspection/Choking Poster/Handwashing	Ö	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO IN COLUMN TO THE PERSON NAMED IN COLUMN TWO IN COLUMN TW	18	OUT		Pest and Animal Control	a areas asca	3 poi	ints
	The second second	13B. Compliance with Georgia Smoke Free Air Act	the second second second second	O			18. Inse	cts, rodents, and animals not present	t .	Ó	
Doroca I		argo (Signaturo)			K	aren		Date 05/25/202	23		
rerson II	ı on	narge (Signature)		()	Print)	OII	(m. 1929) and	Date.			
Inspecto	r (Si	gnature) 7/45 MRB EHS			F	ollow-	up: YE	S ○ NO ● Follow-up Date:	05/25/2023		_

Food Service	Establishr	nent Inspe	ection Re	port Add	endum	Page 2	of 3
Violations cited in this report must be Regulations Food Service Chapter 5 Establishment MARISCOS MAZATLAN			(i). Permit #	stated in the Ge	orgia Departme	Date 05/25/2023	th Rules and
Address			067-FS-11543 City/	State			Code
1650 Pleasant Hill Rd			Duluth		GA	3009	96
		TEMPERATU		A CONTRACTOR OF THE CONTRACTOR OF THE			
Item/Location	Temp	Item/Loc	cation	Temp	Item/	Location	Temp
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Item		OBSERVATIO	NS AND COP	DECTIVE A	CTIONS		
Number	8	OBSERVATIO	NO AND COR	RECTIVE A	CHONS		
2-1C: .04(4)(a)1,2,3 COS Employee employees shall not contact exposed, dispensing equipment. (P)	. •	•			•	•	•
2-2A: .03(2)(m) NCOS Correct By: 06 informed in a verifiable manner of the transmissible through food. (Pf)		•	•	-			
2-2D: .06(2)(o) COS Employee filling for purposes other than handwashing		ndsink in kitchen. Re	eviewed proper use	of handsink with e	employee A han	dwashing facility i	may not be used
2-2E: .03(6) NCOS Facility unable to when responding to vomiting or diarrh shall address the specific actions empromitus or fecal matter. (Pf)	neal events that invol	ve the discharge of v	omitus or fecal mat	ter onto surfaces	in the food servi	ce establishment.	The procedures
3-1D: .04(5)(e) NCOS Facility unable destruction from the supplier stipulating the records specified under paragraph	ng that the fish suppli	ied are frozen to a te				• •	• • • • • • • • • • • • • • • • • • •
3-1D: .04(3)(I) COS Correct By: 06/0/container is sold or served shall be re			hell stock tags. Rev	iewed procedures	s. The date whe	n the last shellsto	ck from the
4-1A: .04(4)(n)1 COS Employee toue Food discarded. If used, single-use g and discarded when damaged or soile	ploves shall be used t	for only one task sucl	h as working with re		•		•
77:							
Person in Charge (Signature)						Date 05/25/2023	3
	7170-						
Inspector (Signature)	1 V Y					Date 05/25/202	3

Address dop Pleasant Hill Rd City/State	GA Zip Code 30096
Number Comments: www.gnrhealth.com Questions?770-963-5132 Note: All cold-holding & hot-holding in compliance unless noted otherwise Note: A follow-up inspection within 10 days	ACTIONS
omments: ww.gnrhealth.com uestions?770-963-5132 ote: All cold-holding & hot-holding in compliance unless noted otherwise ote: A follow-up inspection within 10 days	
uestions?770-963-5132 ote: All cold-holding & hot-holding in compliance unless noted otherwise ote: A follow-up inspection within 10 days	