


GEORGIA DEPARTMENT OF PUBLIC HEALTH Food Service Establishment Inspection Report						CURRENT SCORE	CURRENT GRADE
<div style="display: flex; justify-content: space-between;"> <div> </div> <div> Establishment Name: CROWNE PLAZA Address: 6050 Peachtree Industrial Blvd City: Norcross Time In: 09:15 AM Time Out: 12:45 PM Inspection Date: 02/08/2023 CFSM: Keith Lawrence 18665366 11/29/2023 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-FSP-27268 </div> </div>						93	A
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.						Last Score: N/A Prior Score: 96	Grade: N/A Grade: A
						SCORING AND GRADING: A=90-100 B=80-89 C=70-79 U≤69	
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							
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"/>	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"/>		
	<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 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"/>		
	<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 type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	4-2B Food-contact surfaces: cleaned & sanitized <input checked="" 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"/>		
	<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 checked="" 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"/>	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"/>		
	<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							
(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.							
Compliance Status					COS	R	
10	OUT	Safe Food and Water, Food Identification 3 points					
	<input type="radio"/>	10A. Pasteurized eggs used where required <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"/>	10C. Variance obtained for specialized processing methods <input type="radio"/> <input type="radio"/>					
	<input checked="" type="radio"/>	10D. Food properly labeled; original container <input checked="" type="radio"/> <input type="radio"/>					
11	OUT	Food Temperature Control 3 points					
	<input type="radio"/>	11A. Proper cooling methods used: adequate equipment for temperature control <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"/>	11C. Approved thawing methods used <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"/>	12A. Contamination prevented during food preparation, storage, display <input type="radio"/> <input type="radio"/>					
	<input type="radio"/>	12B. Personal cleanliness <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"/>	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"/>	13A. Posted: Permit/Inspection/Choking Poster/Handwashing <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"/>	14A. In-use utensils: properly stored <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"/>	14C. Single-use/single-service articles: properly stored, used <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"/>	15A. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used <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"/>	15C. Nonfood-contact surfaces clean <input type="radio"/> <input type="radio"/>					
16	OUT	Water, Plumbing and Waste 2 points					
	<input type="radio"/>	16A. Hot and cold water available; adequate pressure <input type="radio"/> <input type="radio"/>					
	<input type="radio"/>	16B. Plumbing installed; proper backflow devices <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"/>	17A. Toilet facilities: properly constructed, supplied, cleaned <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"/>	17C. Physical facilities installed, maintained, and clean <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"/>	18. Insects, rodents, and animals not present <input type="radio"/> <input type="radio"/>					
Person in Charge (Signature) _____ (Print) Chef Rahel					Date: 02/08/2023		
Inspector (Signature) JV EHS					Follow-up: YES <input type="radio"/> NO <input checked="" type="radio"/> Follow-up Date: _____		

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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 CROWNE PLAZA		Permit # 067-FSP-27268		Date 02/08/2023	
Address 6050 Peachtree Industrial Blvd		City/State NorcrossGA		Zip Code 30071	
TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
egg batter (cooling) 20 mins temp 1 / Prep Cooler	50	egg batter (cooling) 1 hr temp 2 / Prep Cooler	45	shredded Cheese (Cooling) 1 hr temp 1 / Walk in	43
shredded Cheese (Cooling) 1 hr temp 2 / Walk in	41	cream cheese (cooling) 1 hour temp 1 / Walk in	43	cream cheese (cooling) 1 hour 30 min temp 2 /	40
egg batter (cooling) 3 hrs temp 3 / Prep Cooler	43	/		/	
/		/		/	
/		/		/	
/		/		/	
/		/		/	
/		/		/	
OBSERVATIONS AND CORRECTIVE ACTIONS					
Item Number					
4-2B: .05(7)(a)1 COS Observed two ice machines, soft drink dispense , and bar nozzle with accumulation of mold like substance. // Ice machines, soft drink dispenser, bar nozzle were clean to sight and touch. // Equipment food-contact surfaces and utensils shall be clean to sight and touch. (Pf)					
10D: .04(4)(d) COS Observe several working containers with sauces (mayo, siracha mayo, buffalo sauce, wine, oil) without the label of the common name of the product on the prep cooler, prep table. // Labels were added to bottles. // Except for containers holding food that can be readily and unmistakably recognized, such as dry pasta, working containers holding food or food ingredients that are removed from their original packages for use in the food establishment, such as cooking oils, flour, herbs, potato flakes, salt, spices, and sugar shall be clearly and legibly identified, in English, with the common name of the food. (C)					
Person in Charge (Signature)				Date 02/08/2023	
Inspector (Signature) 				Date 02/08/2023	

Food Service Establishment Inspection Report Addendum

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Establishment CROWNE PLAZA	Permit # 067-FSP-27268	Date 02/08/2023
Address 6050 Peachtree Industrial Blvd	City/State NorcrossGA	Zip Code 30071

Item Number	OBSERVATIONS AND CORRECTIVE ACTIONS
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Comments:

Note: All cold temperatures holding 41oF or below and, all hot holding temperatures holding 135oF or above, unless otherwise noted.

Note: Facility uses vanilla, flavor syrups as an additive(s).

Note: Facility is not offering food to be serve under cook or raw at this time. Disclosure statement must be included in menus if facility planning to serve items under cooked or raw.

Note: Facility has banquet area, coolers on basement floor where kitchen equipment is stored.

Questions/Comments please visit www.gnrhealth.com or call 770.963.5132.

Person in Charge (Signature)	Date 02/08/2023
Inspector (Signature) 	Date 02/08/2023