	NINNED	GEORGIA DEPARTMENT OF	PUBLIC	Н	=Δ1	TH				CURRENT SCORE	CURRENT GRAD	ne.	
ě	4	Food Service Establishment In								CORRENT SCORE	CORRENT GRAD	<i>J</i> E	
San	•	Establishment Name: IRON AGE											
COU	NTY HEAD	Address: 3480 Financial Center Way											
City:			_ Time O	ut:	_	12:45	<u>PM</u>						
275 to 45		n Date: 03/16/2022						D-					
		of Inspection: Routine O Follow-up Complia						Da					
Preliminary O Other O					3	l	J   '	03/08/	2022				
Risk	Гуре:	: 1 O 2  3 O Permit#: 067-FSP-26837	Prid	or Sc	ore	Gra	de	Da	te				
Risk Factors are important practices or procedures as the most			115122										
		outing factors in foodborne illness outbreaks. Public Health		90	)		4	08/03/	1			1414-04	200
	nterve	ventions are control measures to prevent illness or injury.		G-van	~ 6	-					90-100 B=80-89 C=70-79	U <u>&lt;</u> 6	59
		FOODBORNE ILLNESS RISK											
INI-in o	omplia	(Mark designated compliance status (IN, OUT, NA, or NO) f										2 noi	inte
		ance OUT=not in compliance NO=not observed NA=not appl		cos		Tirecte			iance S	spection R=Repeat violation o		cos	
		T NA NO Supervision			ints		100		Town Inc.	Cooking and Reheati			
	0	1-2A PIC present, demonstrates knowledge, performs			0	5	IN	OUT	NA NO	Consumer		9 poi	ints
Ŏ	Ŏ	1-2B Certified Food Protection Manager			0		0	0	0	5-1A Proper cooking time a		0	0
2 101	CUT	Employee Health, Good Hygienic Practice					Ŏ	Ŏ	ŎŎ	5-1B Proper reheating prod	edures for hot holding		0
2 IN	001	Preventing Contamination by Hands		9 ро	ints							4 po	ints
	0	2-1A Proper use of restriction & exclusion		0	0			0	$\circ$	5-2 Consumer advisory pro	ovided for raw and	0	0
	0	2-1B Hands clean and properly washed		0	0	L		0	0	undercooked foods		0	U
	0	O 2-1C No bare hand contact with ready-to-eat food	is or	0	0	6	IN	оит	NA NO	Holding of T	CS Foods,		
		approved alternate method properly followed		_	Ŭ					Date Marking o		9 ро	
					ints			8		6-1A Proper cold holding to	711		0
	000	2-2A Management knowledge, responsibilities, re		(minimum)	0		8	8		6-1B Proper hot holding ter	20. F. P.	-	0
	X	2-2B Proper eating, tasting, drinking, or tobacco u		0	-		O	O		6-1C Proper cooling time a		O	0
	$\geq$	2-2C No discharge from eyes, nose, and mouth 2-2D Adequate handwashing facilities supplied & acc		0	0		0	0	•0	6-1D Time as a public heal and records	th control: procedures	0	0
$\leq$		2-2D Adequate handwashing facilities supplied & acc		_	-	╢				and records			100400
3 IN	OUT	T NA NO Approved Source	- 150			-		$\circ$	00	6-2 Proper date marking ar	nd disposition	4 po	
JIN		3-1A Food obtained from approved source			O	7	2000	THE OWNER OF THE OWNER, WHEN	NA NO	400 0 0 0 00	7	9 po	
Ŏ	X	3-1B Food received at proper temperature		ŏ				1 - 1		7-1 Pasteurized foods used			
ĕ	ŏ	3-1C. Food in good condition, safe, and unadulter			ŏ		O	0		offered	1. Pronibited todas not	0	0
ŏ	Ŏ	O 3-1D Required records: shellstock tags, parasite des			Ö	8	IN	OUT	NA NO		cals	4 po	ints
4 IN	OUT	T NA NO Protection From Contamination	- 10		ints				0	8-2A Food additives: appro	ACAD AND ADDRESS OF THE ACAD ADDRESS OF THE AC	-	0
	0	O 4-1A Food separated and protected			0			0		8-2B Toxic substances pro	perly identified stored,		0
	0	4-1B Proper disposition of returned, previously se	erved,	0	0			O		used	~ · ·	0	U
	U	reconditioned, and unsafe food		_	_	9	IN	OUT	NA NO	Conformance with Ap	proved Procedures	4 po	ints
					ints		0	0		9-2 Compliance with varian	ice, specialized process	0	0
	8	4-2A Food stored covered		ŏ						and HACCP plan			_
	O	O 4-25 1 000-00111001 Surfaces, cicarica a surfficed		_	0	200	OT	050					
	/84		OOD RE							P = Panest Violation of the same	code provision = 1 point)		
	(M	Mark the numbered item OUT, if not in compliance. For items marked O Good Retail Practices are preventive measures to c											
Co	mpli	liance Status		cos	1	П			iance S			cos	R
10	OUT			3 ро	oints			TUC		Proper Use of Ut	ensils	1 pc	oint
	The second second	10A. Pasteurized eggs used where required		Ó	0			0	14A. In-ı	use utensils: properly stored		0	0
		10B. Water and ice from approved source		ŏ	Ö		-			nsils, equipment and linens: pro			Ö
	0	10C. Variance obtained for specialized processing metho			0		-	-		gle-use/single-service articles: oves used properly	properly stored, used		00
	0	10D. Food properly labeled; original container		0	0	-	15 (	DUT	140. 010	Utensils, Equipment a	nd Vending	-	oint
11	OUT	Food Temperature Control	:	3 ро	oints				15A. Fo	od and nonfood-contact surf			•
	0	11A Proper cooling methods used: adequate equipment	for	0		1		٠,	properly	designed, constructed, and	used		
	1.000	temperature control		VID.00	5.5					rewashing facilities: installed, m			Ö
	0	11B. Plant food properly cooked for hot holding 11C. Approved thawing methods used		00	Annual Control of the	l	16 (	TUC	15C. No	nfood-contact surfaces clea Water, Plumbing an			0
	-	11D. Thermometers provided and accurate			ŏ				16A. Ho	t and cold water available; a		2 po	O
12	OUT				oints	1 I				imbing installed; proper bac			Ŏ
	0	12A. Contamination prevented during food preparation, st	torage,	0	0				16C. Se	wage and waste water prop			0
		display 12B. Personal cleanliness					17 (	TUC	17A To	Physical Facili			oint
	0	12C. Wiping cloths: properly used and stored		8			H			let facilities: properly constru rbage/refuse properly dispos			00
	ŏ			ŏ		1				ysical facilities installed, ma			ŏ
13	OUT				oint				17D. Ade	equate ventilation and lighting		0	0
	ě	13A. Posted: Permit/Inspection/Choking Poster/Handwas		$\stackrel{\bullet}{\sim}$	-		18 (	TUC	10 1	Pest and Animal C	A STATE OF THE STA	3 po	ints
	0	13B. Compliance with Georgia Smoke Free Air Act		U	0			0	io. Inse	cts, rodents, and animals no	n present	U	0
Person	in C	Charge (Signature)			(1	Print)	Jol	nn		Date:	03/16/2022		
							200	0	VE	s O NO			
Inspec	tor (S	Signature) SMA EHS	S				Fo	low-u	ıp: 'L	Follow-u	up Date:		

<b>stablishment</b> RON AGE		ections (2)(h) and (i).		Doto	
		<b>Permit #</b> 067-FSP-26	6837	<b>Date</b> 03/16/2022	
ddress 480 Financial Center Way			City/State Buford	GA Zip	Code 19
	9.	TEMPERATURE OBSE			
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
tuce 41°F-46°F (over the fill line) - holding	since 46 /		/		
	1		1		
	1		1		
	1		1		
	/		1		
	1		1		
	1		/		
	1		/		
Item		BSERVATIONS AND C	ORRECTIVE AC	TIONS	
umber					
A: .02(1)(d) COS The current in	nspection report was not p	hing sink shall be maintained so to boosted in public view. The 8/3/2020 oort & post the current inspection	20 90/A inspection report	was posted. The current inspec	-
	teen feet of the front or pr	imary public door and between fi	•	•	
5A: .05(1)(a) (Repeat) Correct By od-contact surfaces of equipment oder normal use conditions, and standard repeated warewashing a coring, distortion and decompositi	t shall be made of materia shall be: safe, durable, co and shall be finished to ha	als that do not allow the migration rrosion-resistant, and nonabsorb	n of deleterious substanc ent. In addition, materials	es or impart colors, odors, or tag s shall be sufficient in weight and	stes to food and d thickness to
rson in Charge (Signature)				Date on a conc	2
erson in Charge (Signature)				Date 03/16/202	2

iolations cited in this report must be corrected we egulations Food Service Chapter 511-6-1, Rule	10 subsections (2)(h) and (i).		Georgia Departmen	
stablishment RON AGE		<b>mit #</b> FSP-26837		<b>Date</b> 03/16/2022
ddress 80 Financial Center Way		City/State Buford	GA	Zip Code 30519
Item lumber	OBSERVATIONS A	ND CORRECTIVE	ACTIONS	
mments:				
ww.gnrhealth.com * dph.georgia.gov/food-service * NSATISFACTORY SCORES, REPEAT VIOLATION ood held at required temperatures unless otherwise additives: flavored drink syrups. All equipment must be NSF commercial equipment. Saps observed around front doors - needs weather Repair worn/missing floor grout in the kitchen/by the Reviewed how to clean dining tables. If items such as utensils, single-use items, food are	NS AND UNCORRECTED VIOLATE noted.  stripping & door sweep. Correct by e walkin cooler.	y 7/1/2022.		
erson in Charge (Signature)				Date 03/16/2022