| | - MESSAGE | | | | | | | | | | | | |
|---|------------|-----------|---|---------|--|---------|--------------------|--|------------------------------|--|--|-------|--|
| · | MINNEY | | GEORGIA DEPARTMENT OF PUBL | | | | | | | CURRENT SCORE | CURRENT GRAD | DE | |
| Food Service Establishment Inspection Report Establishment Name: RISING ROLL | | | | | | | | | | | | | |
| COL | NTY HEA | CDH . | Address: 1812 N Brown Rd NW | | | | | | $\overline{}$ | | | | |
| City: | Lav | wrence | | Out | t: | 02:2 | 25 PM | | | | | | |
| Inspe | ction | Date: | 01/11/2024 CFSM: Shayan Lalianpour 2: | 2797 | 7988 | 3 10/2 | 23/20 | 27 | | | | | |
| Purp | ose o | fInspe | | | | | rade | Da | ite | | | | |
| Prelin | ninar | уΟ | Other O | 9 | 1 | | Α | 06/16/ | 2023 | | | | |
| Risk | Туре: | 10 | 2 Permit# : 067-FS-12504 | | | | | | | | | | |
| F | lisk F | actors a | are important practices or procedures as the most | Prior S | core | Gr | rade | Da | te | | | | |
| | | | ctors in foodborne illness outbreaks. Public Health | 7 | 1 | | С | 06/08 | /2023 | | | | |
| | | 100 mm | are control measures to prevent illness or injury. | • | _ | | | 00100 | 1 | CORING AND GRADING: A=9 | 90-100 B=80-89 C=70-79 | U<6 | 39 |
| | | | FOODBORNE ILLNESS RISK FACT | OF | 25 | ANE | PII | RI IO | | | | | |
| | | | (Mark designated compliance status (IN, OUT, NA, or NO) for each | | | | | | | | | | |
| IN=in c | omplia | nce OU | T=not in compliance NO=not observed NA=not applicable | 1277.07 | | | | | | spection R=Repeat violation of | THE REAL PROPERTY OF THE PERSON OF THE PERSO | 2 poi | ints |
| | | ance S | | cos | | | | | iance S | | | cos | - |
| 1 IN | OUT | NA NO | Supervision | 4 p | oints | 8 | E 1N | OUT | NA NO | Cooking and Reheati | ng of TCS Foods, | 9 00 | Into |
| | 0 | | 1-2A PIC present, demonstrates knowledge, performs duties | 0 | 0 | | 5 IN | 001 | NA NO | Consumer | Advisory | 9 poi | nts |
| | 0 | 0 | 1-2B Certified Food Protection Manager | 0 | 0 | | C | 0 | | 5-1A Proper cooking time a | and temperatures | 0 | 0 |
| 2 IN | OUT | NA NO | Employee Health, Good Hygienic Practices, | | | | C | 0 | | 5-1B Proper reheating proc | edures for hot holding | 0 | 0 |
| 2 111 | 001 | NA NO | Preventing Contamination by Hands | 9 p | oints | 9 | | | | | | 4 poi | ints |
| | 0 | | 2-1A Proper use of restriction & exclusion | 0 | 0 | | | 0 | | 5-2 Consumer advisory pro | vided for raw and | 0 | 0 |
| | 0 | 0 | 2-1B Hands clean and properly washed | 0 | 0 | | | | | undercooked foods | | U | U |
| | 0 | 00 | 2-1C No bare hand contact with ready-to-eat foods or | | 0 | | 6 IN | OUT | NA NO | Holding of To | CS Foods, | | |
| | U | | approved alternate method properly followed | 0 | | | 6 III | 001 | NA NO | Date Marking o | f TCS Foods | 9 poi | ints |
| | | | | 4 p | oints | | | 0 | 00 | 6-1A Proper cold holding to | emperatures | 0 | 0 |
| | 0 | | 2-2A Management knowledge, responsibilities, reporting | 0 | 0 | | | 0 | 00 | 6-1B Proper hot holding ter | nperatures | 0 | 0 |
| | O | 0 | 2-2B Proper eating, tasting, drinking, or tobacco use | 0 | 0 | | C | 0 | 0 | 6-1C Proper cooling time a | nd temperature | 0 | 0 |
| | Ŏ | Ŏ | 2-2C No discharge from eyes, nose, and mouth | 0 | 0 | | | 0 | 00 | 6-1D Time as a public heal | th control: procedures | _ | ^ |
| | Ō | | 2-2D Adequate handwashing facilities supplied & access ble | 0 | 0 | | | 0 | 00 | and records | IIT et | 0 | 0 |
| | 0000 | | 2-2E Response procedures for vomiting & diarrheal events | 0 | 0 | | | | | | | 4 poi | ints |
| 3 IN | ALCOHOL: N | NA NO | Approved Source | 9 p | oints | | | 0 | 00 | 6-2 Proper date marking ar | nd disposition | 0 | |
| | 0 | | 3-1A Food obtained from approved source | _ | 0 | _ | MATERIAL PROPERTY. | THE OWNER OF TAXABLE PARTY. | NA NO | 400 F W 2 150 | 7 1 - | 9 poi | |
| Ō | Ŏ | 0 | 3-1B Food received at proper temperature | 0 | | | | | | 7-1 Pasteurized foods used | | | |
| Ŏ | Ŏ | | 3-1C. Food in good condition, safe, and unadulterated | | 0 | | | 0 | | offered | i. Proffibited foods flot | 0 | O |
| Õ | Ŏ | | 3-1D Required records: shellstock tags, parasite destruction | | 0 | | 8 IN | OUT | NA NO | | cals | 4 poi | ints |
| 4 IN | OUT | NA NO | | 100 | oints | | | 0 | THE R. P. LEWIS CO., LANSING | 8-2A Food additives: appro | ACTUAL DESCRIPTION OF THE PROPERTY OF THE PROP | 0 | |
| | | | 4-1A Food separated and protected | | 0 | _ | | | | 8-2B Toxic substances pro | NO. CAN A TRANSPORT OF THE PARTY OF THE PART | | |
| | | 0 | 4-1B Proper disposition of returned, previously served, | | | 7 | | | | used | | • | 0 |
| | 0 | | reconditioned, and unsafe food | 0 | 0 | 1 | 9 IN | OUT | NA NO | Conformance with Ap | proved Procedures | 4 poi | ints |
| | | | | 4 p | oints | | | 0 | | 9-2 Compliance with varian | | | |
| | 8 | 0 | 4-2A Food stored covered | O | _ | _ | | 0 | | and HACCP plan | | 0 | 0 |
| | Ŏ | Ŏ | 4-2B Food-contact surfaces: cleaned & sanitized | 0 | 0 | | | | | <u>.</u> | | | |
| | | | GOOD F | RET | AIL | PR | ACT | ICES | | | | | |
| | (M | ark the n | umbered item OUT, if not in compliance. For items marked OUT, mar | | | | | | | . R = Repeat Violation of the same | code provision = 1 point) | | |
| | | G | Good Retail Practices are preventive measures to control | he i | ntro | duction | on of | patho | gens, ch | nemicals, and physical object | ts into foods. | | |
| Co | mpli | ance S | Status | COS | R | | C | ompl | iance S | Status | | cos | R |
| 10 | OUT | | Safe Food and Water, Food Identification | | ointe | | 14 | OUT | | Proper Use of Ut | | | oint |
| | | | asteurized eggs used where required | | 0 | | | | | use utensils: properly stored | | 0 | The State of |
| | Ö | | /ater and ice from approved source | O | 0 | | | | | nsils, equipment and linens; pro | The state of the s | | |
| | 0 | 10C. V | ariance obtained for specialized processing methods | -0 | 0 | 4 | | | | gle-use/single-service articles: oves used properly | properly stored, used | • | |
| | 0 | 10D. F | ood properly labeled; original container | 0 | 0 | 1 - | 15 | OUT | I4D. GI | Utensils, Equipment a | nd Vendina | 0 | oint |
| 11 | OUT | | Food Temperature Control | 3 n | oints | . | | | 15A For | od and nonfood-contact surf | | | |
| | | 11A. P | roper cooling methods used: adequate equipment for | | | 1 | | | | designed, constructed, and | | 0 | 0 |
| | 0 | | ature control | 0 | 0 | 4 | | - | | rewashing facilities: installed, m | | 0 | 0 |
| | 0 | | lant food properly cooked for hot holding | 0 | | | | and the latest designation of the latest des | 15C. No | nfood-contact surfaces clea | n | 0 | |
| | Ö | | pproved thawing methods used | O | | | 16 | OUT | | Water, Plumbing an | | 2 poi | ints |
| | 0 | 11D. T | hermometers provided and accurate | 1000 | 0 | 1 1 | | | | t and cold water available; a | | 0 | |
| 12 | OUT | 124 0 | Prevention of Food Contamination | 3 p | oints | 8 | | | | imbing installed; proper bac | | 0 | |
| | • | display | ontamination prevented during food preparation, storage, | | 0 | 1 - | 17 | OUT | 100. 56 | wage and waste water property Physical Facili | | 1 00 | oint |
| | 0 | | ersonal cleanliness | 0 | 0 | 1 1 | | | 17A. Toi | let facilities: properly constru | | O | |
| | ŏ | | /iping cloths: properly used and stored | ŏ | | | | | | rbage/refuse properly dispos | | ŏ | |
| | 0 | | ashing fruits and vegetables | 0 | | | | | | ysical facilities installed, ma | | 0 | 0 |
| 13 | OUT | | Postings and Compliance with Clean Air Act | | point | | | The state of the s | 17D. Ade | equate ventilation and lighting | | 0 | 0 |
| | 0 | | osted: Permit/Inspection/Choking Poster/Handwashing | O | the state of the s | | 18 | OUT | 10 1 | Pest and Animal C | | 3 poi | |
| | 0 | 13B. C | ompliance with Georgia Smoke Free Air Act | 0 | 0 | I L | | 0 | 18. Inse | cts, rodents, and animals no | t present | 0 | O |
| Person | in C | harge / | Signature) | | | (Print) | Sh | aylar | ı Lalianp | oour Date: (| 01/11/2024 | | |
| | 0 | ye (| | | | (r-mit) | | , - | | Date. | | | |
| Inspec | tor (S | ignatu | re) + JP KJB EHS | | | | Fo | llow-u | ib: AE | s O NO ● Follow-u | up Date: <u>01/11/2024</u> | | |

| stablishment SING ROLL | | sections (2)(h) and (i). Permit # | | Date | Ith Rules and |
|------------------------------------|--------------------------|---|--------------------|---------------------------------|-----------------|
| | | 067-FS-12504 | | 01/11/2024 | |
| ddress 12 N Brown Rd NW | | _ | State enceville | GA Zip | Code |
| | | TEMPERATURE OBSERV | | GA 300 | 43 |
| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
| item/Location | / | nom/Location | / | item/Location | Temp |
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| | 1 | | <i>J</i> | | |
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| | | | 1 | | |
| Item | | | | | |
| umber | | DBSERVATIONS AND COF | RECTIVE AC | TIONS | |
| he floor. Single-service and singl | le-use articles shall be | le use items stored directly on the floor stored in a clean, dry location, where th nal protective package or stored by usi | ey are not exposed | to splash, dust or other contam | ination, and at |
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| rson in Charge (Signature) | | | | Date 01/11/202 | ✓ |
| rson in Charge (Signature) | | | | Date 01/11/2024 | |

| iolations cited in this report must be corrected Regulations Food Service Chapter 511-6-1, Rule | | or as stated in the G | ieorgia Department | of Public Health Rules and |
|--|------------------------------------|-----------------------|--------------------|----------------------------|
| Establishment RISING ROLL | Permit # 067-FS-125 | Ω4 | | Date 01/11/2024 |
| Address L812 N Brown Rd NW | | City/State | C A | Zip Code |
| Item | OBSERVATIONS AND C | awrenceville | GA | 30043 |
| Number Comments: | ODOLITVATIONO AND C | OKKLOTIVE | .0110110 | |
| NOTE: All cold and hot held temperatures were in | compliance unless otherwise noted. | | | |
| NOTE: No additives are used at this facility. | | | | |
| NOTE: Questions? Please visit www.gnrhealth.co | m or call 770-963-5132 | | | |
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| Person in Charge (Signature) | | | | Date 01/11/2024 |
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| nspector (Signature) | | | | Date 01/11/2024 |