GEORGIA DEPARTMENT OF PUBL	IC HE	ALT	Н			CURRENT SCORE	CURRENT GRAD	DE
Food Service Establishment Inspec	tion R	epor	rt					
Establishment Name: JINYA RAMEN BAR OUNTY HEALTH Address: 2925 Buford Dr					-			
DEPARTMENTS	Out:	02	2:50 PN	1				
Inspection Date: 05/05/2022 CFSM: Sanaya Saboowala 1			01/03/2					
Purpose of Inspection: Routine O Follow-up Compliant O			Grade		ate	Uh		
Preliminary O Other O	49)	U	04/25	5/2022			
Risk Type: 1 () 2 () 3 () Permit#: 067-FSP-27628	Prior Sco	ore	Grade	D	ate			
Risk Factors are important practices or procedures as the most contributing factors in foodborne illness outbreaks. Public Health	81		В	02/0	4/2022			
Interventions are control measures to prevent illness or injury.	OI	-	D	03/02	4/2022	SCORING AND GRADING: A	=90-100 B=80-89 C=70-79	U<69
FOODBORNE ILLNESS RISK FACT	TORS	S AI	ND PL	BLI				
(Mark designated compliance status (IN, OUT, NA, or NO) for each								
IN=in compliance OUT=not in compliance NO=not observed NA=not applicable		=cor				nspection R=Repeat violation	of the same code provision=	
Compliance Status	cos	R	С	omp	liance	Status	ting of TCC Foods	COS R
1 IN OUT NA NO Supervision 1-2A PIC present, demonstrates knowledge, performs duties	4 poi		5 II	N OU	T NA N	O Cooking and Rehea	er Advisory	9 points
1-28 Pic present, demonstrates knowledge, periorns duties 1-28 Certified Food Protection Manager	ő				00	5-1A Proper cooking time		00
Employee Health, Good Hygienic Practices				ŎŎ	Ŏ	5-1B Proper reheating pro		00
2 IN OUT NA NO Preventing Contamination by Hands	9 poi	ints						4 points
2-1A Proper use of restriction & exclusion		0			0	5-2 Consumer advisory p	rovided for raw and	00
O 2-1B Hands clean and properly washed	0	0				undercooked foods		
O O 2-1C No bare hand contact with ready-to-eat foods or approved alternate method properly followed	0	0	6 11	N OU	T NA N	0	TCS Foods, of TCS Foods	0
approved alternate metrica property relieved	4 poi	ints			00) 6-1A Proper cold holding		9 points
2-2A Management knowledge, responsibilities, reporting		_		Ŏ		6-1B Proper hot holding t		00
2-2A Management knowledge, responsibilities, reporting 2-2B Proper eating, tasting, drinking, or tobacco use 2-2C No discharge from eyes, nose, and mouth 2-2D Adequate handwashing facilities supplied & accessible	0	0		Ó	Ŏ	6-1C Proper cooling time	and temperature	00
2-2C No discharge from eyes, nose, and mouth		0			00	6-1D Time as a public he	alth control: procedures	00
2-2D Adequate handwashing facilities supplied & access bloom	-	-				and records		0
2-2E Response procedures for vomiting & diarrheal event		-				C 2 Decree data markina	and discouling	4 points
3 IN OUT NA NO Approved Source 3-1A Food obtained from approved source	9 poi	O	D. F. D.	OTHER DESIGNATION OF	TNAN	6-2 Proper date marking	ible Populations	O O
O O 3-1B Food received at proper temperature		ŏ				7-1 Pasteurized foods us		
3-1C. Food in good condition, safe, and unadulterated		0		O		offered	ed. Proffibiled 10005 flot	00
O O 3-1D Required records: shellstock tags, parasite destruction	n O	0			TNAN	O Cher	nicals	4 points
4 IN OUT NA NO Protection From Contamination	9 poi				0	8-2A Food additives: app	roved and properly used	00
O O 4-1A Food separated and protected	0	0				8-2B Toxic substances p	roperly identified, stored,	00
4-1B Proper disposition of returned, previously served, reconditioned, and unsafe food	0	0	9 11	A OII	TNAN	O Conformance with A	Approved Procedures	Appleto
COCCUSION CONTRACTOR C	4 poi	ints					ance, specialized process	4 points
4-2A Food stored covered 4-2B Food-contact surfaces: cleaned & sanitized	0					and HACCP plan		00
O O 4-2B Food-contact surfaces: cleaned & sanitized	•	0						
GOODI							have the result of the second	
(Mark the numbered item OUT, if not in compliance. For items marked OUT, ma Good Retail Practices are preventive measures to control								
Compliance Status	cos	R		-		Status		COS R
10 OUT Safe Food and Water, Food Identification	3 poi	ints	14	OUT		Proper Use of U		1 point
O 10A. Pasteurized eggs used where required		Ö				-use utensils: properly store		00
O 10B. Water and ice from approved source O 10C. Variance obtained for specialized processing methods	00	8				ensils, equipment and linens: p ngle-use/single-service article		0 0
O 10D. Food properly labeled; original container	100	0		ŏ		Sloves used properly	o. property stored, asca	ŏŏ
	-		15	OUT	SEC. 25	Utensils, Equipment		1 point
11 OUT Food Temperature Control 11A. Proper cooling methods used: adequate equipment for	3 poi			0		ood and nonfood-contact su ly designed, constructed, ar		00
temperature control	0	0		-	1	arewashing facilities: installed,		00
O 11B. Plant food properly cooked for hot holding		0		and the latest designation of	15C. N	onfood-contact surfaces cle		00
O 11C. Approved thawing methods used O 11D. Thermometers provided and accurate	0	8	16	OUT	16A H	ot and cold water available;		2 points
12 OUT Prevention of Food Contamination	3 poi	0.00		ŏ		lumbing installed; proper ba		ŏŏ
O 12A. Contamination prevented during food preparation, storage		0		0		ewage and waste water pro	perly disposed	00
O 12B. Personal cleanliness		0	17	OUT	17A T	Physical Fac oilet facilities: properly const		1 point
O 120. Personal clearniness O 12C. Wiping cloths: properly used and stored		ŏ		ŏ		arbage/refuse properly disposit	The state of the s	ŏŏ
O 12D. Washing fruits and vegetables		ŏ		Ŏ		hysical facilities installed, m		00
13 OUT Postings and Compliance with Clean Air Act	- The second sec	oint	40	-	17D. A	dequate ventilation and lighting		00
O 13A. Posted: Permit/Inspection/Choking Poster/Handwashing O 13B. Compliance with Georgia Smoke Free Air Act	0	8	18	OUT	18. Ins	Pest and Animal ects, rodents, and animals		3 points
						Laws and	05/05/0000	
Person in Charge (Signature)		(Pr	rint) S	uiiiy	(PIC) &		05/05/2022	
Inspector (Signature) SMA EHS			F	ollow-	up: Y	ES O NO ● Follow	-up Date:	

		subsections (2)(h) and	Permit #		Dat	e
Establishment JINYA RAMEN BAR			067-FSP-27628	01-1-	05/0	5/2022
Address 925 Buford Dr			City/s Buford		GA	Zip Code 30519
		TEMPERATU	RE OBSERV	ATIONS		
Item/Location	Temp	Item/Loc		Temp	Item/Locati	ion Temp
nermapen / calibration	32.1	deltatrak / calibration		32	deltatrak / calibration	31
easoned eggs (81°F, 88°F, 109°F) / cookline hot	81	chicken - cooking / fryer		209	1	
		1			1	
		1			1	
		1			1	
		1			1	
		1			1	
		1			1	
Item		OBSERVATIO	NC AND COD	DECTIVE	ACTIONS	

stablishment NYA RAMEN BAR	Permit # 067-FSP-27628	Date 05/05/2022
ddress 925 Buford Dr	City/State Buford	Zip Code GA 30519
Item OB	SERVATIONS AND CORRECTIVE ACT	
Number comments:		
ww.gnrhealth.com * dph.georgia.gov/food-service * QUESTIC INSATISFACTORY SCORES, REPEAT VIOLATIONS AND U		T SUSPENSION.
Cold & hot food held at required temperatures unless otherwis Additives: flavored drink syrups. The most current graded inspection report shall be posted in place in the far end of the hushrooms), wet shrimp tempura batter, seasoned eggs.	public view, readable from one foot away.	chashu (cooked), spinach, kikurage (cooked
Salmon, tuna, masago are served raw; parasite destruction d	ocumentation provide; consumer advisory provided on n	nenu.
*Reduced Oxygen Packaging Without a Variance and no HAC arge cooling sink & sed within 48 hours	CCP Plan Required - Facility is using cook-chill ROP for	soups. Food is cooked, bagged, sealed, cooled in
Butane lighter/chemicals shall be stored separate from food, f	ood storage & prep areas, clean equipment/utensils & s	ingle-use items.
Employee drinks shall be stored separate from single-use glo	ves, food, sanitizer, etc.	
Reviewed hand washing/glove usage requirements.		
CFSM & PIC have decided to use time as a control for the sea	asoned eggs at the cookline. They will be fully cooked, c	cooled down to 41°F & stored in the walkin cooler.
hen ney will be removed from temperature control, time stamped f ot holding units where they will be for service. IOTE: there is a consumer advisory on the menus.	or 4 hours, put into the hot holding units at the cookline.	Boiled sauce will be poured over the eggs in the
Shrimp tempura wet batter has been added to the time contro	l procedures.	
Relocate paper towels next to the dish machine so that they a	are not above the drain board used for holding clean dish	nes.
Person in charge stated that the handwashing sink (wall mour egs that will be pulled out to be level with the front of the cook	,	be replaced with a more accessible hand sink on
Person in charge stated that an outdoor storage area may be pproval.	added. Facility must apply for a remodel at Gwinnett En	vironmental Health office before constructing for
oint inspection w/ZAJ		
erson in Charge (Signature)		Date 05/05/2022