

	<b>GEORGIA DEPARTMENT OF PUBLIC HEALTH</b>			<b>CURRENT SCORE</b>	<b>CURRENT GRADE</b>
	<b>Food Service Establishment Inspection Report</b>			100	A
Establishment Name: <u>Food by Felicia Catering</u> Address: <u>1360 DOGWOOD DR</u> City: <u>CONYERS</u> Time In: <u>09:18 AM</u> Time Out: <u>09:50 AM</u> Inspection Date: <u>12/09/2022</u> CFSM: <u>Felicia Mitchell</u> 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#: <u>FSP-122-1381</u>					
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 100	Grade A
				Date 05/11/2022	
				Prior Score 100	Grade A
				Date 11/19/2021	
<b>SCORING AND GRADING: A=90-100 B=80-89 C=70-79 U&lt;69</b>					

**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
<b>1</b>	IN	OUT	NA	NO	<b>Supervision</b> 4 points	
<input checked="" type="radio"/>	<input 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"/>	<input type="radio"/>	1-2B Certified Food Protection Manager <input type="radio"/> <input type="radio"/>	
<b>2</b>	IN	OUT	NA	NO	<b>Employee Health, Good Hygienic Practices, Preventing Contamination by Hands</b> 9 points	
<input checked="" type="radio"/>	<input 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"/>	<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"/>	<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"/>	<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"/>	<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"/>	<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"/>	<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"/>	<input type="radio"/>	2-2E Response procedures for vomiting & diarrheal events <input type="radio"/> <input type="radio"/>	
<b>3</b>	IN	OUT	NA	NO	<b>Approved Source</b> 9 points	
<input checked="" type="radio"/>	<input 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 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"/>	<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 checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	3-1D Required records: shellstock tags, parasite destruction <input type="radio"/> <input type="radio"/>	
<b>4</b>	IN	OUT	NA	NO	<b>Protection From Contamination</b> 9 points	
<input checked="" type="radio"/>	<input 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"/>	<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"/>	<input type="radio"/>	4-2A Food stored covered <input type="radio"/> <input type="radio"/>	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4-2B Food-contact surfaces: cleaned & sanitized <input type="radio"/> <input type="radio"/>	
<b>5</b>	IN	OUT	NA	NO	<b>Cooking and Reheating of TCS Foods, Consumer Advisory</b> 9 points	
<input type="radio"/>	<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 type="radio"/>	<input checked="" type="radio"/>	5-1B Proper reheating procedures for hot holding <input type="radio"/> <input type="radio"/>	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	5-2 Consumer advisory provided for raw and undercooked foods <input type="radio"/> <input type="radio"/>	
<b>6</b>	IN	OUT	NA	NO	<b>Holding of TCS Foods, Date Marking of TCS Foods</b> 9 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1A Proper cold holding temperatures <input type="radio"/> <input type="radio"/>	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	6-1B Proper hot holding temperatures <input type="radio"/> <input type="radio"/>	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" 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"/>	<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"/>	<input type="radio"/>	6-2 Proper date marking and disposition <input type="radio"/> <input type="radio"/>	
<b>7</b>	IN	OUT	NA	NO	<b>Highly Susceptible Populations</b> 9 points	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	7-1 Pasteurized foods used: Prohibited foods not offered <input type="radio"/> <input type="radio"/>	
<b>8</b>	IN	OUT	NA	NO	<b>Chemicals</b> 4 points	
<input checked="" type="radio"/>	<input 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"/>	<input type="radio"/>	8-2B Toxic substances properly identified, stored, used <input type="radio"/> <input type="radio"/>	
<b>9</b>	IN	OUT	NA	NO	<b>Conformance with Approved Procedures</b> 4 points	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input 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
<b>10</b>	OUT	<b>Safe Food and Water, Food Identification</b>			3 points	
<input type="radio"/>	<input type="radio"/>	10A. Pasteurized eggs used where required			<input type="radio"/>	<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"/>	<input type="radio"/>	10C. Variance obtained for specialized processing methods			<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	10D. Food properly labeled; original container			<input type="radio"/>	<input type="radio"/>
<b>11</b>	OUT	<b>Food Temperature Control</b>			3 points	
<input type="radio"/>	<input type="radio"/>	11A. Proper cooling methods used: adequate equipment for temperature control			<input type="radio"/>	<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"/>	<input type="radio"/>	11C. Approved thawing methods used			<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	11D. Thermometers provided and accurate			<input type="radio"/>	<input type="radio"/>
<b>12</b>	OUT	<b>Prevention of Food Contamination</b>			3 points	
<input type="radio"/>	<input type="radio"/>	12A. Contamination prevented during food preparation, storage, display			<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	12B. Personal cleanliness			<input type="radio"/>	<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"/>	<input type="radio"/>	12D. Washing fruits and vegetables			<input type="radio"/>	<input type="radio"/>
<b>13</b>	OUT	<b>Postings and Compliance with Clean Air Act</b>			1 point	
<input type="radio"/>	<input type="radio"/>	13A. Posted: Permit/Inspection/Choking Poster/Handwashing			<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	13B. Compliance with Georgia Smoke Free Air Act			<input type="radio"/>	<input type="radio"/>
Compliance Status					COS	R
<b>14</b>	OUT	<b>Proper Use of Utensils</b>			1 point	
<input type="radio"/>	<input type="radio"/>	14A. In-use utensils: properly stored			<input type="radio"/>	<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"/>	<input type="radio"/>	14C. Single-use/single-service articles: properly stored, used			<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	14D. Gloves used properly			<input type="radio"/>	<input type="radio"/>
<b>15</b>	OUT	<b>Utensils, Equipment and Vending</b>			1 point	
<input type="radio"/>	<input type="radio"/>	15A. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			<input type="radio"/>	<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"/>	<input type="radio"/>	15C. Nonfood-contact surfaces clean			<input type="radio"/>	<input type="radio"/>
<b>16</b>	OUT	<b>Water, Plumbing and Waste</b>			2 points	
<input type="radio"/>	<input type="radio"/>	16A. Hot and cold water available; adequate pressure			<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	16B. Plumbing installed; proper backflow devices			<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	16C. Sewage and waste water properly disposed			<input type="radio"/>	<input type="radio"/>
<b>17</b>	OUT	<b>Physical Facilities</b>			1 point	
<input type="radio"/>	<input type="radio"/>	17A. Toilet facilities: properly constructed, supplied, cleaned			<input type="radio"/>	<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"/>	<input type="radio"/>	17C. Physical facilities installed, maintained, and clean			<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	17D. Adequate ventilation and lighting; designated areas used			<input type="radio"/>	<input type="radio"/>
<b>18</b>	OUT	<b>Pest and Animal Control</b>			3 points	
<input type="radio"/>	<input type="radio"/>	18. Insects, rodents, and animals not present			<input type="radio"/>	<input type="radio"/>

Person in Charge (Signature) _____	(Print) Felicia	Date: <u>12/09/2022</u>
Inspector (Signature) <u>RJ</u>	RJ EHS	Follow-up: YES <input type="radio"/> NO <input checked="" type="radio"/> Follow-up Date: _____





# Food Service Establishment Inspection Report Addendum

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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).

<b>Establishment</b> Food by Felicia Catering	<b>Permit #</b> FSP-122-1381	<b>Date</b> 12/09/2022
<b>Address</b> 1360 DOGWOOD DR	<b>City/State</b> CONYERS GA	<b>Zip Code</b> 30013

<b>Item Number</b>	<b>OBSERVATIONS AND CORRECTIVE ACTIONS</b>
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Comments:

Cold-Holding was assessed and in compliance unless noted in the temperature log.  
No foods were hot holding at the time of inspection.  
No foods were being prepped or cooked at the time of the inspection.  
PIC was the only food employee present.  
Inspection report emailed to the PIC.  
Fees will be charged accordingly for any violation which cannot be corrected on-site during inspection.  
Repeat violations may result in permit suspension.  
Corrections of violations does not change the inspection score.  
www.gnrhealth.com  
770-278-7340

Person in Charge (Signature)

Date 12/09/2022

Inspector (Signature)



Date 12/09/2022