

<b>GEORGIA DEPARTMENT OF PUBLIC HEALTH</b> <b>Food Service Establishment Inspection Report</b>				CURRENT SCORE	CURRENT GRADE
Establishment Name: <u>Food by Felicia Catering</u> Address: <u>1360 DOGWOOD DR</u>				100	A
City: <u>CONYERS</u> Time In: <u>09:30 AM</u> Time Out: <u>10:30 AM</u>					
Inspection Date: <u>10/18/2023</u> CFSM: _____					
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"/>				Last Score	Grade
Risk Type: 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> Permit#: <u>FSP-122-1381</u>				100	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.				Prior Score	Grade
				100	A
				Date	
				12/09/2022	
				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
<b>1</b>	IN	OUT	NA	NO	4 points
<b>Supervision</b>					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
1-2A PIC present, demonstrates knowledge, performs duties					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
1-2B Certified Food Protection Manager					
<b>2</b>	IN	OUT	NA	NO	9 points
<b>Employee Health, Good Hygienic Practices, Preventing Contamination by Hands</b>					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2-1A Proper use of restriction & exclusion					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2-1B Hands clean and properly washed					
<input checked="" type="radio"/>	<input 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 checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2-2A Management knowledge, responsibilities, reporting					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2-2B Proper eating, tasting, drinking, or tobacco use					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2-2C No discharge from eyes, nose, and mouth					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2-2D Adequate handwashing facilities supplied & accessible					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2-2E Response procedures for vomiting & diarrheal events					
<b>3</b>	IN	OUT	NA	NO	9 points
<b>Approved Source</b>					
<input checked="" type="radio"/>	<input 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 checked="" type="radio"/>	<input type="radio"/>
3-1B Food received at proper temperature					
<input checked="" type="radio"/>	<input 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 checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3-1D Required records: shellstock tags, parasite destruction					
<b>4</b>	IN	OUT	NA	NO	9 points
<b>Protection From Contamination</b>					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4-1A Food separated and protected					
<input checked="" type="radio"/>	<input 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 checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4-2A Food stored covered					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4-2B Food-contact surfaces: cleaned & sanitized					

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Compliance Status				COS	R
<b>5</b>	IN	OUT	NA	NO	9 points
<b>Cooking and Reheating of TCS Foods, Consumer Advisory</b>					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
5-1A Proper cooking time and temperatures					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input 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					
<b>6</b>	IN	OUT	NA	NO	9 points
<b>Holding of TCS Foods, Date Marking of TCS Foods</b>					
<input checked="" type="radio"/>	<input 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 checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
6-1B Proper hot holding temperatures					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
6-1C Proper cooling time and temperature					
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6-1D Time as a public health control: procedures and records					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6-2 Proper date marking and disposition					
<b>7</b>	IN	OUT	NA	NO	9 points
<b>Highly Susceptible Populations</b>					
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7-1 Pasteurized foods used: Prohibited foods not offered					
<b>8</b>	IN	OUT	NA	NO	4 points
<b>Chemicals</b>					
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8-2A Food additives: approved and properly used					
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8-2B Toxic substances properly identified, stored, used					
<b>9</b>	IN	OUT	NA	NO	4 points
<b>Conformance with Approved Procedures</b>					
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9-2 Compliance with variance, specialized process and HACCP plan					

**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.

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Compliance Status				COS	R
<b>10</b>	OUT	IN	NA	NO	3 points
<b>Safe Food and Water, Food Identification</b>					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10A. Pasteurized eggs used where required					
<input type="radio"/>	<input type="radio"/>	<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"/>	<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"/>	<input type="radio"/>	<input type="radio"/>
10D. Food properly labeled; original container					
<b>11</b>	OUT	IN	NA	NO	3 points
<b>Food Temperature Control</b>					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<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"/>	<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"/>	<input type="radio"/>	<input type="radio"/>
11C. Approved thawing methods used					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11D. Thermometers provided and accurate					
<b>12</b>	OUT	IN	NA	NO	3 points
<b>Prevention of Food Contamination</b>					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<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"/>	<input type="radio"/>	<input type="radio"/>
12B. Personal cleanliness					
<input type="radio"/>	<input type="radio"/>	<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"/>	<input type="radio"/>	<input type="radio"/>
12D. Washing fruits and vegetables					
<b>13</b>	OUT	IN	NA	NO	1 point
<b>Postings and Compliance with Clean Air Act</b>					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<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"/>	<input type="radio"/>	<input type="radio"/>
13B. Compliance with Georgia Smoke Free Air Act					
Compliance Status				COS	R
<b>14</b>	OUT	IN	NA	NO	1 point
<b>Proper Use of Utensils</b>					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14A. In-use utensils: properly stored					
<input type="radio"/>	<input type="radio"/>	<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"/>	<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"/>	<input type="radio"/>	<input type="radio"/>
14D. Gloves used properly					
<b>15</b>	OUT	IN	NA	NO	1 point
<b>Utensils, Equipment and Vending</b>					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<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"/>	<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"/>	<input type="radio"/>	<input type="radio"/>
15C. Nonfood-contact surfaces clean					
<b>16</b>	OUT	IN	NA	NO	2 points
<b>Water, Plumbing and Waste</b>					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<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"/>	<input type="radio"/>	<input type="radio"/>
16B. Plumbing installed; proper backflow devices					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16C. Sewage and waste water properly disposed					
<b>17</b>	OUT	IN	NA	NO	1 point
<b>Physical Facilities</b>					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<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"/>	<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"/>	<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"/>	<input type="radio"/>	<input type="radio"/>
17D. Adequate ventilation and lighting; designated areas used					
<b>18</b>	OUT	IN	NA	NO	3 points
<b>Pest and Animal Control</b>					
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Insects, rodents, and animals not present					

Person in Charge (Signature) _____ (Print) Felicia	Date: <u>10/18/2023</u>
Inspector (Signature)  LG EHS	Follow-up:    YES <input type="radio"/> NO <input checked="" type="radio"/> Follow-up Date: _____