

# Food Establishment Inspection Report

Jackson County Health Department PO Box 307 – 415 Health Department Rd Murphysboro IL 62966		(618) 684-3143 ext. 128	No. of Risk Factor/Intervention Violations <b>4</b>	Date <b>8/27/21</b>
Establishment <b>Bottoms up</b>		License/Permit # <b>763</b>	No. of Repeat Risk Factor/Intervention Violations <b>1</b>	Time In <b>12:00</b>
Street Address <b>3683 Neupert Rd.</b>		City/State <b>Jacob, IL</b>	Permit Holder <b>Jason Thies</b>	Time Out <b>2:00</b>
City/State <b>Jacob, IL</b>		ZIP Code <b>62950</b>	Purpose of Inspection <b>Routine</b>	Risk Category <b>I</b>

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item  
**IN**=in compliance    **OUT**=not in compliance    **N/O**=not observed    **N/A**=not applicable  
 Mark "X" in appropriate box for COS and/or R  
**COS**=corrected on-site during inspection    **R**=repeat violation

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance Status		COS	R	Compliance Status		COS	R
<b>Supervision</b>							
1	<input checked="" type="radio"/> In <input type="radio"/> Out			15	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Person in charge present, demonstrates knowledge, and performs duties				Food separated and protected			
2	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		<input checked="" type="checkbox"/>	16	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
Certified Food Protection Manager (CFPM)				Food-contact surfaces; cleaned and sanitized			
<b>Employee Health</b>							
3	<input checked="" type="radio"/> In <input type="radio"/> Out			17	<input checked="" type="radio"/> In <input type="radio"/> Out		
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Proper disposition of returned, previously served, reconditioned and unsafe food			
4	<input checked="" type="radio"/> In <input type="radio"/> Out			<b>Time/Temperature Control for Safety</b>			
Proper use of restriction and exclusion				18	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
5	<input checked="" type="radio"/> In <input type="radio"/> Out			Proper cooking time and temperatures			
Procedures for responding to vomiting and diarrheal events				19	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
				Proper reheating procedures for hot holding			
<b>Good Hygienic Practices</b>							
6	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O			20	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Proper eating, tasting, drinking, or tobacco use				Proper cooling time and temperature			
7	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O			21	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
No discharge from eyes, nose, and mouth				Proper hot holding temperatures			
<b>Preventing Contamination by Hands</b>							
8	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O			22	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Hands clean and properly washed				Proper cold holding temperatures			
9	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			23	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				Proper date marking and disposition			
10	<input checked="" type="radio"/> In <input type="radio"/> Out			24	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Adequate handwashing sinks properly supplied and accessible				Time as a Public Health Control; procedures & records			
<b>Approved Source</b>							
11	<input checked="" type="radio"/> In <input type="radio"/> Out			<b>Consumer Advisory</b>			
Food obtained from approved source				25	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
12	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			Consumer advisory provided for raw/undercooked food			
Food received at proper temperature				<b>Highly Susceptible Populations</b>			
13	<input checked="" type="radio"/> In <input type="radio"/> Out			26	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
Food in good condition, safe, and unadulterated				Pasteurized foods used; prohibited foods not offered			
14	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			<b>Food/Color Additives and Toxic Substances</b>			
Required records available: shellstock tags, parasite destruction				27	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
				Food additives: approved and properly used			
<b>GOOD RETAIL PRACTICES</b>							
				28	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
				Toxic substances properly identified, stored, and used			
<b>Safe Food and Water</b>							
				<b>Conformance with Approved Procedures</b>			
				29	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
				Compliance with variance/specialized process/HACCP			

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.  
 Mark "X" in box if numbered item is not in compliance    Mark "X" in appropriate box for COS and/or R    **COS**=corrected on-site during inspection    **R**=repeat violation

Compliance Status		COS	R	Compliance Status		COS	R
<b>Safe Food and Water</b>							
30	Pasteurized eggs used where required			<b>Proper Use of Utensils</b>			
31	Water and ice from approved source			43	In-use utensils: properly stored		
32	Variance obtained for specialized processing methods			44	Utensils, equipment & linens: properly stored, dried, & handled		
<b>Food Temperature Control</b>							
33	Proper cooling methods used; adequate equipment for temperature control			45	Single-use/single-service articles: properly stored and used		
34	Plant food properly cooked for hot holding			46	Gloves used properly		
35	Approved thawing methods used			<b>Utensils, Equipment and Vending</b>			
36	Thermometers provided & accurate			47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
<b>Food Identification</b>							
37	Food properly labeled; original container			48	Warewashing facilities: installed, maintained, & used; test strips		
<b>Prevention of Food Contamination</b>							
38	Insects, rodents, and animals not present			49	Non-food contact surfaces clean		
39	Contamination prevented during food preparation, storage and display			<b>Physical Facilities</b>			
40	Personal cleanliness			50	Hot and cold water available; adequate pressure		
41	Wiping cloths: properly used and stored			51	Plumbing installed; proper backflow devices		
42	Washing fruits and vegetables			52	Sewage and waste water properly disposed		
<b>Employee Training</b>							
53				53	Toilet facilities: properly constructed, supplied, & cleaned		
57	All food employees have food handler training			54	Garbage & refuse properly disposed; facilities maintained		
58	Allergen training as required			55	Physical facilities installed, maintained, and clean		
				56	Adequate ventilation and lighting; designated areas used		

# Food Establishment Inspection Report

Establishment: Bottoms up

Establishment #: 763

## OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
	dispose, breadings after 4 hours. You cannot leave it out for 2 hours & then put it back in cooler. It either must be 41°F & under or <u>labeled</u> w/ 4hr time stamp & discarded after time expires. you must discard @ 2:00pm!	

Notes:

On last inspection, facility using bleach spray, noted that education was provided on how to properly set up sanitizer for proper concentration. This is crucial to help with elimination of bacteria growth and cross contamination.

Anything you cook & cool gets 7 day d/c label.

Notice to Correct:

You are hereby ordered to correct the above noted violations of the Jackson County Food Service Ordinance by 9/27/21. Failure to correct the violations within the time allotted may result in suspension & removal of your food service permit. Continued operations of the food service establishment without the permit will result in issuance of a Citation & may result in a fine of up to \$500.00. Each day upon which such violation occurs shall constitute a separate violation. If the above violations are not corrected within time allotted, a mandatory hearing may be scheduled @ Jackson County Health Department.

Patricia Ashmy  
Person in Charge (Signature)

8/27/21  
Date

Cheryl Brasley  
Inspector (Signature)

Follow-up:  Yes  No (Check one)

Follow-up Date: 9/1/21

# Food Establishment Inspection Report

Establishment: Bottoms Up Establishment #: 763

Water Supply:  Public  Private Waste Water System:  Public  Private

Sanitizer Type: None PPM: none Heat: n/a

TEMPERATURE OBSERVATIONS					
Item/Location	Temp		Item/Location	Temp	
Trawlsen	41°				
Fish thawing	33°				
Walk in	39°				
Bar cooler	41°				

### OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
2	Provide Certified protection manager (CFPM) @ all times food is prepped & served. NO CFPM on duty.	3 days
16	Provide Sanitizer for all times food is prepped and served. At time of inspection, no Sanitizer set up in kitchen or bar.	9/1/21
23	provide 7 day discard labels for all cooked & cooled TCS items. Upon inspection, Baked potatoes (2 Bowls) with no labels on them. products discarded.	
24/22	Provide proper cold holding for all items that come into contact with TCS items @ 41°F or less. Upon inspection, fish breading out @ RT. Cook stated its been out for ~ 2 hours during lunch rush. If you're not going to keep it under refrigeration, you must label it w/ 4-hr discard &	

CFPM Verification (name, expiration date, ID#):

None

NACCP Topic: 2, 16, 22, 23, 24, 28

Tricia Ashby 8/27/21  
 Person in Charge (Signature) Date

Chupa Bradley Follow-up:  Yes  No (Check one) Follow-up Date: 9/1/21  
 Inspector (Signature)