

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 0	Date <u>11/3/2021</u>
Establishment <u>Yamato</u>		License/Permit # <u>1087</u>	No. of Repeat Risk Factor/Intervention Violations 0	Time In <u>11:25am</u>
Street Address <u>1013 E. main St.</u>		City/State <u>Carbondale, IL</u>	Permit Holder <u>Xianyinglin</u>	Time Out <u>12:00pm</u>
City/State <u>Carbondale, IL</u>		ZIP Code <u>62901</u>	Purpose of Inspection <u>Routine</u>	Risk Category <u>I</u>

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	Description	COS	R	Compliance Status	Description	COS	R
Supervision							
<input checked="" type="radio"/> In <input type="radio"/> Out	1 Person in charge present, demonstrates knowledge, and performs duties			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	15 Food separated and protected		
<input checked="" type="radio"/> In <input type="radio"/> Out, N/A	2 Certified Food Protection Manager (CFPM)			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A	16 Food-contact surfaces; cleaned and sanitized		
Employee Health							
<input checked="" type="radio"/> In <input type="radio"/> Out	3 Management, food employee and conditional employee; knowledge, responsibilities and reporting			<input type="radio"/> In <input checked="" type="radio"/> Out	17 Proper disposition of returned, previously served, reconditioned and unsafe food		
<input checked="" type="radio"/> In <input type="radio"/> Out	4 Proper use of restriction and exclusion			Time/Temperature Control for Safety			
<input checked="" type="radio"/> In <input type="radio"/> Out	5 Procedures for responding to vomiting and diarrheal events			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	18 Proper cooking time and temperatures		
Good Hygienic Practices							
<input checked="" type="radio"/> In <input type="radio"/> Out, N/O	6 Proper eating, tasting, drinking, or tobacco use			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	19 Proper reheating procedures for hot holding		
<input checked="" type="radio"/> In <input type="radio"/> Out, N/O	7 No discharge from eyes, nose, and mouth			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	20 Proper cooling time and temperature		
Preventing Contamination by Hands							
<input checked="" type="radio"/> In <input type="radio"/> Out, N/O	8 Hands clean and properly washed			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	21 Proper hot holding temperatures		
<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	9 No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	22 Proper cold holding temperatures		
<input checked="" type="radio"/> In <input type="radio"/> Out	10 Adequate handwashing sinks properly supplied and accessible			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	23 Proper date marking and disposition		
Approved Source							
<input checked="" type="radio"/> In <input type="radio"/> Out	11 Food obtained from approved source			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	24 Time as a Public Health Control; procedures & records		
<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	12 Food received at proper temperature			Consumer Advisory			
<input checked="" type="radio"/> In <input type="radio"/> Out	13 Food in good condition, safe, and unadulterated			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A	25 Consumer advisory provided for raw/undercooked food		
<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	14 Required records available: shellstock tags, parasite destruction			Highly Susceptible Populations			
<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	14 Required records available: shellstock tags, parasite destruction			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A	26 Pasteurized foods used; prohibited foods not offered		
GOOD RETAIL PRACTICES							
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	Description	COS	R	Compliance Status	Description	COS	R
Safe Food and Water							
<input checked="" type="radio"/> In <input type="radio"/> Out	30 Pasteurized eggs used where required			Proper Use of Utensils			
<input checked="" type="radio"/> In <input type="radio"/> Out	31 Water and ice from approved source			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	43 In-use utensils: properly stored		
<input checked="" type="radio"/> In <input type="radio"/> Out	32 Variance obtained for specialized processing methods			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	44 Utensils, equipment & linens: properly stored, dried, & handled		
Food Temperature Control							
<input checked="" type="radio"/> In <input type="radio"/> Out	33 Proper cooling methods used; adequate equipment for temperature control			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	45 Single-use/single-service articles: properly stored and used		
<input checked="" type="radio"/> In <input type="radio"/> Out	34 Plant food properly cooked for hot holding			<input checked="" type="radio"/> In <input type="radio"/> Out	46 Gloves used properly		
<input checked="" type="radio"/> In <input type="radio"/> Out	35 Approved thawing methods used			Utensils, Equipment and Vending			
<input checked="" type="radio"/> In <input type="radio"/> Out	36 Thermometers provided & accurate			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	47 Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
Food Identification							
<input checked="" type="radio"/> In <input type="radio"/> Out	37 Food properly labeled; original container			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	48 Warewashing facilities: installed, maintained, & used; test strips		
Prevention of Food Contamination							
<input checked="" type="radio"/> In <input type="radio"/> Out	38 Insects, rodents, and animals not present			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	49 Non-food contact surfaces clean		
<input checked="" type="radio"/> In <input type="radio"/> Out	39 Contamination prevented during food preparation, storage and display			Physical Facilities			
<input checked="" type="radio"/> In <input type="radio"/> Out	40 Personal cleanliness			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	50 Hot and cold water available; adequate pressure		
<input checked="" type="radio"/> In <input type="radio"/> Out	41 Wiping cloths: properly used and stored			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	51 Plumbing installed; proper backflow devices		
<input checked="" type="radio"/> In <input type="radio"/> Out	42 Washing fruits and vegetables			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	52 Sewage and waste water properly disposed		
Employee Training							
<input checked="" type="radio"/> In <input type="radio"/> Out	57 All food employees have food handler training			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	53 Toilet facilities: properly constructed, supplied, & cleaned		
<input checked="" type="radio"/> In <input type="radio"/> Out	58 Allergen training as required			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	54 Garbage & refuse properly disposed; facilities maintained		
<input checked="" type="radio"/> In <input type="radio"/> Out	59			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	55 Physical facilities installed, maintained, and clean		
<input checked="" type="radio"/> In <input type="radio"/> Out	60			<input checked="" type="radio"/> In <input type="radio"/> Out, N/A, N/O	56 Adequate ventilation and lighting; designated areas used		

Food Establishment Inspection Report

Establishment: Yamato Establishment #: 1087

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Chlorine PPM: 100 Heat: N/A

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Walk-in AA	39°	Rice (hot hold)	153°		
make table AA	31°				
Sushi top AA	30°				
Sushi bottom AA	38°				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
	<u>no noted violations at time of inspections.</u>	

CFPM Verification (name, expiration date, ID#):
on file at HD

HACCP Topic: 2, 8, 16

[Signature] Person in Charge (Signature) 11/3/2021 Date

[Signature] Inspector (Signature) Follow-up: Yes No (Check one) Follow-up Date: _____