



# Retail Food Establishment Inspection Report part I

As Governed by Title 50, Chapter 50 Montana Code Annotated (MCA) and the Administrative Rules of Montana (ARM): Title 37, Chapter 110, Subchapter 2 Failure to comply with any time limits for corrections of critical item violations may result in cessation of food service operations." [ARM 37.110.239 (5)]

<b>Establishment</b>	HAVANAHS CASINO & LOUNGE, INC	<b>No. of Risk Factor/Intervention Violations</b>	1	<b>Date</b>	8-24-2017
<b>Address</b>	916 E FRONT STREET	<b>No. of Repeat Risk Factor/Intervention Violations</b>	0	<b>Time In</b>	02:05:31
<b>City</b>	BUTTE	<b>County:</b>	Silver Bow	<b>Water:</b>	City PWS# MT000017
<b>Licensee:</b>	GLENN ERICKSON	<b>Wastewater:</b>	City MPDDS#	<b>Time Out</b>	02:10:05
<b>License #</b>	FL 15240	<b>License Types (s):</b>	EATING ESTABLISHMENT TAVERN OR BAR	<b>Risk Category</b>	1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
<b>Purpose of Inspection:</b>	Regular <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Pre-opening <input type="checkbox"/> Complaint <input type="checkbox"/> Illness <input type="checkbox"/> HACCP <input type="checkbox"/> Investigation <input type="checkbox"/> Other <input type="checkbox"/>				

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance Status		COS		R	
<b>SUPERVISION</b>					
1	IN	Person in charge present, demonstrates knowledge, and performs duties			
2	N/A	Certified Food Protection Manager			
<b>Employee Health</b>					
3	IN	Management, food employee and conditional employee, knowledge, responsibilities and reporting.			
4	IN	Proper use of restriction and exclusion			
5	IN	Procedures for responding to vomiting and diarrheal events			
<b>Good Hygienic Practices</b>					
6	N/O	Proper eating, tasting, drinking, or tobacco use			
7	IN	No discharge from eyes, nose, and mouth			
<b>Preventing Contamination by Hands</b>					
8	N/O	Hands clean & properly washed			
9	N/A	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			
10	OUT	Adequate handwashing sinks properly set up & accessible			
<b>Approved Source</b>					
11	N/A	Food obtained from approved source			
12	N/A	Food received at proper temperature			
13	N/A	Food in good condition, safe, & unadulterated			
14	N/A	Required records available: shellstock tags, parasite destruction			
<b>Protection from Contamination Arm</b>					
15	N/A	Food separated & protected			
16	IN	Food-contact surfaces: cleaned & sanitized			
17	N/A	Proper disposition of returned, previously served, reconditioned, & unsafe food			

  

Compliance Status		COS		R	
<b>Potentially Hazardous Food Time/Temperature</b>					
18	N/A	Proper cooking time & temperatures			
19	N/A	Proper reheating procedures for hot holding			
20	N/A	Proper cooling time & temperatures			
21	N/A	Proper hot holding temperatures			
22	N/A	Proper cold holding temperatures			
23	N/A	Proper date marking & disposition			
24	N/A	Time as a public health control: procedures & records			
<b>Consumer Advisory</b>					
25	N/A	Consumer advisory provided for raw or undercooked foods			
<b>Highly Susceptible Populations</b>					
26	N/A	Pasteurized foods used; prohibited foods not offered			
<b>Food/Color Additives and Toxic Substances</b>					
27	N/A	Food additives: approved & properly used			
28	IN	Toxic substances properly identified, stored, & used			
<b>Conformance with Approved Procedures</b>					
29	N/A	Compliance with variance/specialized process/HACCP			

**Risk factors** are improper 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.

## GOOD RETAIL PRACTICES

Compliance Status		COS		R	
<b>Safe Food and Water</b>					
30		Pasteurized eggs used where required			
31		Water & ice from approved source			
32		Variance obtained for specialized processing methods			
<b>Food Temperature Control</b>					
33		Proper cooling methods used; adequate equipment for temperature control			
34		Plant food properly cooked for hot holding			
35		Approved thawing methods used			
36		Thermometers provided & accurate			
<b>Food Identification</b>					
37		Food properly labeled; original container			
<b>Prevention of Food Contamination</b>					
38		Insects, rodents, & animals not present			
39		Contamination prevented during food preparation, storage & display			
40		Personal cleanliness			
41		Wiping cloths: properly used & stored			
42		Washing fruits & vegetables			

  

Compliance Status		COS		R	
<b>Proper Use of Utensils</b>					
43		In-use utensils: properly stored			
44		Utensils, equipment & linens: properly stored, dried, & handled			
45		Single-use/single-service articles: properly stored & used			
46		Gloves used properly			
<b>Utensils, Equipment and Vending</b>					
47		Food & non-food contact surfaces cleanable, properly designed, constructed, & used			
48		Warewashing facilities: installed, maintained, & used; test strips			
49		Non-food contact surfaces clean			
<b>Physical Facilities</b>					
50		Hot & cold water available; adequate pressure			
51		Plumbing installed; proper backflow devices			
52		Sewage & waste water properly disposed			
53		Toilet facilities: properly constructed, supplied, & cleaned			
54		Garbage & refuse properly disposed; facilities maintained			
55		Physical facilities installed, maintained, & clean			
56		Adequate ventilation & lighting; designated areas used			

<b>Person in Charge (Signature)</b>	<i>[Signature]</i>	<b>Date:</b>	8/29/17
<b>Inspector (Signature)</b>	<i>[Signature]</i>	<b>Follow-up:</b>	NO
		<b>Follow-up Date:</b>	

# Retail Food Establishment Inspection Form part II Page 2 of 2

<b>Establishment</b> HAVANAHS CASINO & LOUNGE, INC	<b>SANITIZER LEVEL</b>	<b>License #</b> FL 15240
Current License Posted ARM 37.110.238	CHEMICAL LOW TEMPERATURE DISH MACHINE	0.0
Certified Food Safety Manager	WIPING CLOTH BUCKET	0.0
	SPRAY BOTTLES	0.0
SANITIZER: QUATERNARY,	MANUAL DISHWASHING (3 COMPARTMENT SINK)	200.0

### TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp

### OBSERVATIONS AND CORRECTIVE ACTIONS

ARM Code Reference	Violations cited in this report must be corrected withing the time frame listed, or as stated in ARM 37.110.239.	Correction Date
6-301.11	Hand wash sink is not supplied with soap or paper towels. All employees shall wash their hand at the beginning and throughout their shift to avoid cross contamination. Person in charge agreed to supply hand wash sink with proper supplies.	

**Person in Charge (Signature)** *Laura Rolle* **Date** 8/29/17  
**Inspector (Signature)** *Debra...* **Date** 8/29/17