



# 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>	SUNKEN TREASURE CASINO	<b>No. of Risk Factor/Intervention Violations</b>	0	<b>Date</b>	3-04-2016
<b>Address</b>	2902 HARRISON AVE	<b>No. of Repeat Risk Factor/Intervention Violations</b>	0	<b>Time In</b>	02:32:58
<b>City</b>	BUTTE	<b>County:</b>	Silver Bow	<b>Water:</b>	PWS# MT000017
<b>Licensee:</b>	HURRICANE LLC	<b>Wastewater:</b>	MPDDS#	<b>Risk Category</b>	
<b>License #</b>	F 44173	<b>License Types (s):</b>	Tavern or Bar	<b>Current water test</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	IN	Proper eating, tasting, drinking, or tobacco use			
7	IN	No discharge from eyes, nose, and mouth			
<b>Preventing Contamination by Hands</b>					
8	IN	Hands clean & properly washed			
9	N/A	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			
10	IN	Adequate handwashing sinks properly set up & accessible			
<b>Approved Source</b>					
11	IN	Food obtained from approved source			
12	N/O	Food received at proper temperature			
13	IN	Food in good condition, safe, & unadulterated			
14	N/A	Required records available: shellstock tags, parasite destruction			
<b>Protection from Contamination Arm</b>					
15	IN	Food separated & protected			
16	N/A	Food-contact surfaces: cleaned & sanitized			
17	IN	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	IN	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>	<i>[Date]</i>
<b>Inspector (Signature)</b>	<i>[Signature]</i>	<b>Follow-up:</b>	NO
		<b>Follow-up Date:</b>	

# Retail Food Establishment Inspection Form part II

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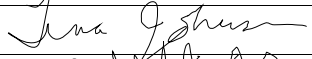

<b>Establishment</b> SUNKEN TREASURE CASINO	<b>SANITIZER LEVEL</b>	<b>License #</b> F 44173
	CHEMICAL LOW TEMPERATURE DISH MACHINE	0.0
Current License Posted ARM 37.110.238	YES	WIPING CLOTH BUCKET
		0.0
Certified Food Safety Manager	YES	SPRAY BOTTLES
		0.0
SANITIZER: CHLORINE,	MANUAL DISHWASHING (3 COMPARTMENT SINK)	100.0

### TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
milk	41.0				

### 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

**Person in Charge (Signature)**   
**Inspector (Signature)** 

**Date** 3/4/16  
**Date** 3-4-16