



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)]

Establishment Hardees	No. of Risk Factor/Intervention Violations 1	Date 3-08-2018
Address 2551 Harrison Ave	No. of Repeat Risk Factor/Intervention Violations 0	Time In 01:29:26
City Butte County: Silver Bow	Water: City PWS# MT000017	Time Out 02:02:58
Licensee: Bighorn Restaurants	Wastewater: City MPDDS#	Risk Category
License # FL 308577	License Types (s): Eating Establishment	Current water test 1 2 <input checked="" type="checkbox"/> 3 4
Purpose of Inspection: 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

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

Compliance Status		COS	R
SUPERVISION			
1	IN		
2	IN		
Employee Health			
3	IN		
4	IN		
5	IN		
Good Hygienic Practices			
6	N/O		
7	IN		
Preventing Contamination by Hands			
8	N/O		
9	IN		
10	IN		
Approved Source			
11	IN		
12	N/O		
13	IN		
14	N/A		
Protection from Contamination Arm			
15	IN		
16	IN		
17	N/O		

Compliance Status		COS	R
Potentially Hazardous Food Time/Temperature			
18	N/O		
19	N/O		
20	N/O		
21	IN		
22	OUT		
23	IN		
24	IN		
Consumer Advisory			
25	N/A		
Highly Susceptible Populations			
26	N/A		
Food/Color Additives and Toxic Substances			
27	N/A		
28	IN		
Conformance with Approved Procedures			
29	N/A		

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

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
Safe Food and Water			
30			
31			
32			
Food Temperature Control			
33			
34			
35			
36			
Food Identification			
37			
Prevention of Food Contamination			
38			
39			
40			
41			
42			

Compliance Status		COS	R
Proper Use of Utensils			
43			
44			
45			
46			
Utensils, Equipment and Vending			
47			
48			
49			
Physical Facilities			
50			
51			
52			
53			
54			
55			
56			

Person in Charge (Signature) *[Signature]* **Date:** 3/8/2018

Inspector (Signature) *[Signature]* **Follow-up:** NO **Follow-up Date:**

Retail Food Establishment Inspection Form part II

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Establishment Hardees	SANITIZER LEVEL		License # FL 308577
Current License Posted ARM 37.110.238	NO	CHEMICAL LOW TEMPERATURE DISH MACHINE	0.0
Certified Food Safety Manager	YES	WIPING CLOTH BUCKET	200.0
SANITIZER: QUATERNARY,		SPRAY BOTTLES	0.0
		MANUAL DISHWASHING (3 COMPARTMENT SINK)	0.0

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Beef Patties, Counter	70.0	Chicken, Walk In	38.0	Beef Patties, Steam Table	156.0
Beef, Reach In	35.0	Chicken, Hot Hold	135.0	Chicken, Under Grill	37.0
Cheese, Reach In Under Prep	34.0				

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
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3-501.16(A)	Beef patties were out underneath patty cooker. Patties were at 70F. Person in charge discarded the patties and agreed to make sure they are being kept under refrigeration at all times.	

Person in Charge (Signature) *[Signature]* Date 3/8/2018
Inspector (Signature) *[Signature]* Date 3/8/2018