



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

Establishment	SW Montana Detachment 27/1000		No. of Risk Factor/Intervention Violations	0	Date	7/24/2018
Address	525 Garden Ave		No. of Repeat Risk Factor/Intervention Violations	0	Time In	3:00
City	Boite	County: Silver Bow	Water: City Private Public	<input checked="" type="radio"/>	PWS#	MTC00017
Licensee: Marine Corp	Email: hooch@mclswm.com	Wastewater: City Private Public	<input checked="" type="radio"/>	MPDS#	Boite	Risk Category
License # 01 FL 305925	License Subtype(s): Eating Establishment	Current water test Y/N				1 <input checked="" type="radio"/> 2 3 4
Purpose of Inspection:	Regular <input 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				
Person in charge present, demonstrates knowledge, and performs duties					
2	IN				
Certified Food Protection Manager					
Employee Health					
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					
Good Hygienic Practices					
6	IN				
Proper eating, tasting, drinking, or tobacco use					
7	IN				
No discharge from eyes, nose, and mouth					
Preventing Contamination by Hands					
8	IN				
Hands clean & properly washed					
9	IN				
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed					
10	IN				
Adequate handwashing sinks properly set up & accessible					
Approved Source					
11	IN				
Food obtained from approved source					
12	IN				
Food received at proper temperature					
13	IN				
Food in good condition, safe, & unadulterated					
14	IN				
Required records available: shellstock tags, parasite destruction					
Protection from Contamination Air					
15	IN				
Food separated & protected					
16	IN				
Food-contact surfaces: cleaned & sanitized					
17	IN				
Proper disposition of returned, previously served, reconditioned, & unsafe food					

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

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					
Pasteurized eggs used where required					
31					
Water & ice from approved source					
32					
Variance obtained for specialized processing methods					
Food Temperature Control					
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					
Food Identification					
37					
Food properly labeled; original container					
Prevention of Food Contamination					
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					
Proper Use of Utensils					
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					
Utensils, Equipment and Vending					
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					
Physical Facilities					
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					

Person in Charge (Signature)	<i>[Signature]</i>	Date:	7/24/2018
Inspector (Signature)	<i>[Signature]</i>	Follow-up:	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> (Circle one)
		Follow-up Date:	

