



GEORGIA DEPARTMENT OF HUMAN RESOURCES
Food Service Establishment Inspection Report

Establishment Name: Cooper Lighting
Address: 1121 Hwy 74 S

City: Peachtree City **Time In:** 9:45 am **Time Out:** 11:15 am

Inspection Date: 2/4/2011 **CFSM:** David A. Taylor (6/5/14)

Purpose of Inspection: Routine: Follow-Up: Complaint:
 Preliminary: Other:
Risk Type: 1 2 3 **Permit#:** 1-10728

'Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health Interventions are control measures to prevent illness or injury.

'Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Last Score: 75 Grade: C Date: 1/24/11

Prior Score: 97 Grade: A Date: 10/4/10

CURRENT SCORE	CURRENT GRADE
91	A
SCORING AND GRADING: A=90-100 B=80-89 C=70-79 U<69	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, or NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance OUT=not in compliance NO=not observed NA=not applicable COS=corrected on-site during inspection R=repeat (violation of the same code provision)=2 points per subcategory

Compliance Status					COS	R
1	IN	OUT	NA	NO	4	0
Supervision						
	<input checked="" type="radio"/>	<input type="radio"/>				
1-2. Person in charge present, demonstrates knowledge, and performs duties						
2	IN	OUT	NA	NO	9	0
Employee Health, Good Hygienic Practices, Preventing Contamination by Hands-Subcategory 1						
	<input checked="" type="radio"/>	<input type="radio"/>				
2-1A. Proper use of restriction & exclusion						
	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>		
2-1B. Hands clean and properly washed						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
2-1C. No bare hand contact with ready-to-eat foods or approved alternate method properly followed						
	<input checked="" type="radio"/>	<input type="radio"/>			4	0
Employee Health, Good Hygienic Practices-Subcategory 2						
	<input checked="" type="radio"/>	<input type="radio"/>				
2-2A. Management awareness; policy present; reporting						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
2-2B. Proper eating, tasting, drinking, or tobacco use						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
2-2C. No discharge from eyes, nose, and mouth						
	<input checked="" type="radio"/>	<input type="radio"/>				
2-2D. Adequate handwashing facilities supplied & accessible						
3	IN	OUT	NA	NO	9	0
Approved Source						
	<input checked="" type="radio"/>	<input type="radio"/>				
3-1A. Food obtained from approved source; parasite destruction						
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
3-1B. Food received at proper temperature						
	<input checked="" type="radio"/>	<input type="radio"/>				
3-1C. Food in good condition, safe, and unadulterated						
4	IN	OUT	NA	NO	9	0
Protection from Contamination-Subcategory 1						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>			
4-1A. Food separated and protected						
	<input checked="" type="radio"/>	<input type="radio"/>				
4-1B. Proper disposition of contaminated food; returned food or unused food not re-served						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		4	0
Protection from Contamination-Subcategory 2						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>			
4-2A. Food stored covered						
	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>			
4-2B. Food-contact surfaces: cleaned & sanitized						

Compliance Status					COS	R
5	IN	OUT	NA	NO	9	0
Cooking and Reheating of Potentially Hazardous Foods, Consumer Advisory-Subcategory 1						
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
5-1A. Proper cooking time and temperatures						
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
5-1B. Proper reheating procedures for hot holding						
	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		4	0
Consumer Advisory-Subcategory 2						
	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>			
5-2. Consumer advisory provided for raw and undercooked foods						
6	IN	OUT	NA	NO	9	0
Holding of Potentially Hazardous Foods, Date Marking Potentially Hazardous Food-Subcategory 1						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>			
6-1A. Proper cold holding temperatures						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
6-1B. Proper hot holding temperatures						
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		
6-1C. Proper cooling time and temperature						
	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		
6-1D. Time as a public health control: procedures and records						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	4	0
Date Marking-Subcategory 2						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
6-2. Proper date marking and disposition						
7	IN	OUT	NA	NO	9	0
Highly Susceptible Populations						
	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>			
7-1. Pasteurized foods used; prohibited foods not offered						
8	IN	OUT	NA	NO	4	0
Chemicals						
	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>			
8-2A. Food additives: approved and properly used						
	<input checked="" type="radio"/>	<input type="radio"/>				
8-2B. Toxic substances properly identified, stored, used						
9	IN	OUT	NA	NO	4	0
Conformance with Approved Procedures						
	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>			
9-2. Compliance with variance, specialized process and HACCP plan						

GOOD RETAIL PRACTICES

(Mark the numbered item OUT, if not in compliance. For items marked OUT, mark COS or R for each item as applicable. R=Repeat (violation of the same code provision) = 1 point per

Compliance Status					COS	R
10	OUT				3	0
Safe Food and Water, Food Identification						
	<input type="radio"/>					
10A. Pasteurized eggs used where required						
	<input type="radio"/>					
10B. Water and ice from approved source						
	<input type="radio"/>					
10C. Variance obtained for specialized processing methods						
	<input type="radio"/>					
10D. Food properly labeled; original container; required records available; shellstock tags						
11	OUT				3	0
Food Temperature Control						
	<input type="radio"/>					
11A. Proper cooling methods used; adequate equipment for temperature control						
	<input type="radio"/>					
11B. Plant food properly cooked for hot holding						
	<input type="radio"/>					
11C. Approved thawing methods used						
	<input type="radio"/>					
11D. Thermometers provided and accurate						
12	OUT				3	0
Prevention of Food Contamination						
	<input type="radio"/>					
12A. Contamination prevented during food preparation, storage, display						
	<input type="radio"/>					
12B. Personal cleanliness						
	<input type="radio"/>					
12C. Wiping cloths: properly used and stored						
	<input type="radio"/>					
12D. Washing fruits and vegetables						
13	OUT				3	0
Postings and Compliance with Clean Air Act						
	<input type="radio"/>					
13A. Posted: Permit/Inspection/Choking Poster/Handwashing						
	<input type="radio"/>					
13B. Compliance with Georgia Smoke Free Air Act						

Compliance Status					COS	R
14	OUT				1	0
Proper Use of Utensils						
	<input type="radio"/>					
14A. In-use utensils: Properly stored						
	<input checked="" type="radio"/>					
14B. Utensils, equipment and linens: properly stored, dried, handled						
	<input checked="" type="radio"/>					
14C. Single-use/single-service articles: properly stored, used						
	<input type="radio"/>					
14D. Gloves used properly						
15	OUT				1	0
Utensils, Equipment and Vending						
	<input type="radio"/>					
15A. Food & nonfood-contact surfaces cleanable, properly designed, constructed, used						
	<input type="radio"/>					
15B. Warewashing facilities: installed, maintained, used; test strips						
	<input checked="" type="radio"/>					
15C. Nonfood-contact surfaces clean.						
16	OUT				2	0
Water, Plumbing and Waste						
	<input type="radio"/>					
16A. Hot and cold water available; adequate pressure						
	<input type="radio"/>					
16B. Plumbing installed; proper backflow devices						
	<input type="radio"/>					
16C. Sewage and waste water properly disposed						
17	OUT				1	0
Physical Facilities						
	<input type="radio"/>					
17A. Toilet facilities: properly constructed, supplied, cleaned						
	<input type="radio"/>					
17B. Garbage/refuse properly disposed; facilities maintained						
	<input type="radio"/>					
17C. Physical facilities installed, maintained, and clean						
	<input type="radio"/>					
17D. Adequate ventilation and lighting; designated areas used						
18	OUT				3	0
Pest and Animal Control						
	<input type="radio"/>					
18. Insects, rodents, and animals not present						

Person in Charge (Signature): _____ **(Print)** _____ **Date:** 2/4/2011 9:45:00 AM

Inspector (Signature): _____ **Follow-up:** Yes No **Follow-up Date:** _____

Food Service Establishment Inspection Report Addendum

Violations cited in this report must be corrected within the time frames specified below, or as stated in the Georgia Department of Human Resources Rules and Regulations Food Service Chapter 290-5-14, Rule .10 subsection (2)(i) and (j)

Establishment Cooper Lighting	Permit 1-10728	Date InspectionDate2
Address 1121 Hwy 74 S	City/State Peachtree City, GA 30269	Zip Code 30269

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Onion rings/ cake/ batter (upright freezer)	20/21/20	Oatmeal (crock pot)	148	Sliced turkey (uc cooler)	38
Turkey breast/ shrimp/ tenders (upright freezer)	13/15/12	Juices/ milk (reach-in)	37-39/ 37/38	Chicken (uc cooler)	44
Bacon/sausage/pork loin/corned beef (upright frzr)	20/6/6/6	Prepped salads/ cream cheese (reach-in)	38-41/38	Burger patties (hot held grill)	179
Whipped cream/ sauerkraut/ yogurt (upright cooler)	42/40/40	Salad dressing/ juices (reach-in)	40/39	Chicken (hot held on grill)	142
Shell eggs/ butter/ tuna (upright cooler)	41/38/42	Cut melon/ diced tomatoes/ ham (salad bar)	42/39/37	Shredded cheese upright cooler)	44
Chicken wings/ cream cheese (upright cooler)	41/40	Bacon/ sauce (uc cooler)	37/35	Sauces (upright cooler)	42-43
Shredded cheese/ cut veggies (upright cooler)	34-37/ 40-42	Turkey/ sliced provolone (uc cooler)	42/41	Wings (upright cooler)	43
Soup mix/ sour cream (upright cooler)	33/41	Sliced tomatoes (uc cooler)	41		

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	OBSERVATIONS AND CORRECTIVE ACTIONS
S4	4-2B Additional cleaning is needed of sandwich press/ griddle due to some build-up on unit.
S14	14B Ensure that all utensils are stored with handles facing out and in same direction to protect from contamination when being picked up. Two containers on shelf under prep table full of utensils with handles facing different directions. 14C 1. All single use items must be inverted or covered to protect from contamination. Sleeve of coffee cup lids open and upright at self service line area. 2. Ensure that plastic wrap is protected from possible contamination. Box of plastic wrap with top of cardboard cover removed and food debris observed inside it.
S15	15C 1. Additional cleaning is needed of stand/ floor fan unit to remove dust build-up. 2. Additional cleaning is needed of handsink faucet handles/ area to remove debris build-up front handsink at line).

Person in Charge (Signature)

Date

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Address 1121 Hwy 74 S	City/State Peachtree City, GA 30269	Zip Code 30269
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Item Number	OBSERVATIONS AND CORRECTIVE ACTIONS
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Person in Charge (Signature)	Date
Inspector (Signature)	Date 2/4/2011 9:45:00 AM