



GEORGIA DEPARTMENT OF HUMAN RESOURCES
Food Service Establishment Inspection Report

Establishment Name: Mirko Pasta
Address: 300 City Circle, Suite 1520

City: Peachtree City **Time In:** 10:45 am **Time Out:** 12:30 pm

Inspection Date: 8/30/2011 **CFSM:** Justin and Jacob Massey (5/17/16)

Purpose of Inspection: Routine: Follow-Up: Complaint:
 Preliminary: Other:

Risk Type: 1 2 3 **Permit#:** 2-97820

'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: **79** Grade: **C** Date: **4/4/11**

Prior Score: **67** Grade: **U** Date: **3/22/11**

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

Compliance Status					COS	R
5	IN	OUT	NA	NO	Cooking and Reheating of Potentially Hazardous Foods, Consumer Advisory-Subcategory 1 9 points	
<input type="radio"/>	<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 type="radio"/>	<input checked="" type="radio"/>	5-1B. Proper reheating procedures for hot holding	
6	IN	OUT	NA	NO	Consumer Advisory-Subcategory 2 4 points	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	5-2. Consumer advisory provided for raw and undercooked foods	
6	IN	OUT	NA	NO	Holding of Potentially Hazardous Foods, Date Marking Potentially Hazardous Food-Subcategory 1 9 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input 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"/>	<input type="radio"/>	6-1B. Proper hot holding temperatures	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1C. Proper cooling time and temperature	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-1D. Time as a public health control: procedures and records	
7	IN	OUT	NA	NO	Date Marking-Subcategory 2 4 points	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	6-2. Proper date marking and disposition	
7	IN	OUT	NA	NO	Highly Susceptible Populations 9 points	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	7-1. Pasteurized foods used; prohibited foods not offered	
8	IN	OUT	NA	NO	Chemicals 4 points	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8-2A. Food additives: approved and properly used	
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	8-2B. Toxic substances properly identified, stored, used	
9	IN	OUT	NA	NO	Conformance with Approved Procedures 4 points	
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input 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	Safe Food and Water, Food Identification 3 points				
<input type="radio"/>	<input type="radio"/>	10A. Pasteurized eggs used where required				
<input type="radio"/>	<input type="radio"/>	10B. Water and ice from approved source				
<input type="radio"/>	<input type="radio"/>	10C. Variance obtained for specialized processing methods				
<input type="radio"/>	<input type="radio"/>	10D. Food properly labeled; original container; required records available; shellstock tags				
11	OUT	Food Temperature Control 3 points				
<input type="radio"/>	<input type="radio"/>	11A. Proper cooling methods used; adequate equipment for temperature control				
<input type="radio"/>	<input type="radio"/>	11B. Plant food properly cooked for hot holding				
<input type="radio"/>	<input type="radio"/>	11C. Approved thawing methods used				
<input type="radio"/>	<input type="radio"/>	11D. Thermometers provided and accurate				
12	OUT	Prevention of Food Contamination 3 points				
<input type="radio"/>	<input type="radio"/>	12A. Contamination prevented during food preparation, storage, display				
<input type="radio"/>	<input type="radio"/>	12B. Personal cleanliness				
<input type="radio"/>	<input type="radio"/>	12C. Wiping cloths: properly used and stored				
<input type="radio"/>	<input type="radio"/>	12D. Washing fruits and vegetables				
13	OUT	Postings and Compliance with Clean Air Act 3 points				
<input type="radio"/>	<input type="radio"/>	13A. Posted: Permit/Inspection/Choking Poster/Handwashing				
<input type="radio"/>	<input type="radio"/>	13B. Compliance with Georgia Smoke Free Air Act				

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

Person in Charge (Signature): _____ **(Print)** _____ **Date:** 8/30/2011 10:45:00 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 Mirko Pasta	Permit 2-97820	Date InspectionDate2
Address 300 City Circle, Suite 1520	City/State Peachtree City, GA 30269	Zip Code 30269

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Diced tomatoes/ shrimp/ butter (prep top)	37/44/41	Sliced melon/ cut cherry tomatoes (prep top)	42/43	Ground beef (WIF)	6
Crab meat/ alfredo/ meat sauce (prep top)	39/41/41	Feta (prep top)/ salmon (uc cooler)	44/41	Sauces/ lasagna (WIC)	31-40/30
Mozzarella (prep top)/ sauce (container cut board)	44/43	Chicken/ provolone (uc cooler)	42/42	Cheeses (WIC)	27-29
Mussels/ diced tomatoes/ chicken (uc cooler)	31/31/30	Lasagna/ ham (uc cooler)	41/43	Butter/ cheesecake (upright cooler wait station)	35/37
Heavy cream/ mozzarella (uc cooler)	33/32	Lasagna (cooling- on rack)	79	Drinks/ dessert (display cooler)	30-31
Pastas/ ravioli (uc unit)	19-21/7	Heavy cream/ butter/ ham (WIC)	25/26/27	Bean dip (hot held)	137
Sauces (hot held)	134/136	Shell eggs/ liquid eggs (WIC)	28/28	Milk (bar reach-in)	41
Sliced tomatoes/ olives (prep top)	44/44	Gnocchi/ cheesecake (WIF)	8/18	Heavy cream (bar reach-in)	43

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Observations and Corrective Actions
S4	4-2A All food items must be kept/ stored covered at all times when not actively in use. Chicken, pasta and ravioli uncovered in under-counter coolers; salt, pepper, almonds, raisins, and flour mixture uncovered in front prep line area; dried rosemary uncovered at bread prep area; bowl of parmesan cheese uncovered at drink prep area at front of facility.
S6	6-2 All food must be used or discarded by the expiration date. Gallon of milk (open) in under-counter/ reach-in bar cooler dated Aug 22.
S14	14A 1. Do not allow scoop/ spoon handles to lay/ dip down into food. Some spoon/ scoop handles observed down in in sauce and cut tomatoes in front line prep top cooler. 2. Do not store knife/ knives in between equipment. Store in a way that protects from possible contamination. 14C Ensure that all single use items are inverted/ covered to protect them. Stack of styrofoam (small) to go containers stored upright at front line area.
S15	15A Replace broken bulk cornstarch container lid. 15C Additional cleaning is needed of outside of bulk storage containers to remove build-up.
S17	17C 1. Additional cleaning is needed of floors in some hard to reach areas and in walk-in units to remove build-up. 2. Push ceiling tile back into place above dry storage shelves. 17D 1. Additional cleaning is needed of air vent and ceiling surrounding vent to remove dust in front line area. 2. All personal items must be stored in a designated area away from all food, equipment, and single use items. Bag of Halls cough drops stored on dish table with utensils in bins next to clean dish shelf.
S18	18 1. Ensure that rear door is kept shut completely/ tightly when not actively in use. Door not sealed shut during inspection. 2. Fruit flies noted in rear kitchen area.

Person in Charge (Signature)

Date

Inspector (Signature)

Date 8/30/2011 10:45:00 AM

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Address 300 City Circle, Suite 1520	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** 8/30/2011 10:45:00 AM