

Violations cited in this report shall be corrected within the time frames specified below, but within a period not to exceed 3 calendar days for priority items, 10 days for priority foundation items (8-405.11) or 90 days for core items (8-406.11).

Food Establishment Inspection Report											
Delaware Division of Public Health					No. of Risk Factor/Intervention Violations Date						
Office of Food Protection					No. of Repeat Risk Factor/Intervention Violations // Time In						
417 Federal St., Dover, DE 19901								Score (o		Time Out	40
1000	lishment	70 + Neli HUDZ Lancaster Ave.	te	a was been	· No	Zip Code	Telephone	in m			
-	402 LA	10 TO TO TO TO THE TOTAL TOTAL TO THE TOTAL	-			ningtor	1 10	19805	42860		
License/Permit # Permit Holder							finspection		Est. Type	Risk Cat	egory
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS											
-	Civala dasi	gnated compliance status (IN, OUT, N/O, N/A) for each numbered			1415	_	DEIO HERE			or COS and/or R	
IN=	in compliance	OUT=not in compliance N/O=not observed N/A=not			ble		cos	=corrected on-site			olation
	ompliance	The American Indoor State Control of the Control of	:08	-	-	C	ompliance S	THE RESERVE THE PERSON NAMED IN COLUMN TWO	aming mapes and	13 13 13 13	COS R
	omp namo c	Supervision	-					Proper disposition	of returned, p	reviously served	
1 IN	OUT	Person in charge present, demonstrates knowledge				IIN	001	reconditioned & ui	nsafe food		
	001	and performs duties						Time/Temperature	Control for	Safety	
2 IN OUT N/A Certified Food Protection Manager						_		Proper cooking tin	ne & temperat	ures	
		Employee Health				_		Proper reheating p			
3 11	OUT	Management, food employee and conditional employee;	n					Proper cooling tim	e and tempera	ature	
		knowledge, responsibilities and reporting		_		_		Proper hot holding	Company of the Control of the Contro	10.0	
	OUT	Proper use of restriction and exclusion				-		Proper cold holdin			
5 1	OUT	Procedures for responding to vomiting and diarrheal events				-		Proper date marki			
- lie	OUT NO	Good Hygienic Practices			24	IIN	OUT N/A N/O	Time as a Public He	ealth Control; pr or Advisory	ocedures & record	S
	OUT N/C	Proper eating, tasting, drinking, or tobacco use			25	INI	OUT N/A	Consumer advisory	The state of the s	w/undercooked for	d
7   111	1001 10/C	No discharge from eyes, nose, and mouth  Preventing Contamination by Hands	-		23	IIIA	OUTIVIA	Highly Suscept			4
o III	OUT N/C				26	IN	OUT N/A	Pasteurized foods			, , , , , ,
8 11.	1001		-					d/Color Additives			4
9 11	OUT N/A N/C	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			27	IN		Food additives: ap		The state of the s	T = T
10 IN	OUT	Adequate handwashing sinks properly supplied and accessible				_		Toxic substances p	Charles and the second		
101	2. 2/	Approved Source						nformance with			
11 IN	OUT	Food obtained from approved source			29	IN	OUT N/A	Compliance with va	riance/specializ	ed process/HACC	0
12 IN	OUT N/A N/C	Food received at proper temperature			-				The second second second second		
13 IN	OUT	Food in good condition, safe, & unadulterated									
		Paguired records available: shellstock tags		Risk factors are important practices or procedures identified as th							
14 IN OUT N/A N/O parasite destruction				prevalent contributing factors of foodborne illness or injury, Public health interventions are control measures to prevent foodborne illness or injury.							
		Protection from Contamination			L						
	OUT N/A N/C	Food separated and protected									
16 IN	OUT N/A	Food-contact surfaces; cleaned & sanitized					050				
		GOOD RE	-							1 × 5 × 5	iv.
		Good Retail Practices are preventative measures to control									
Mark	'X" in box if nu	mbered item is not in compliance Mark "X" in appropriate b		for C	OS an	nd/c	or R COS	=corrected on-site	during inspection	n R=repeat v	cos R
							177	Proper Us	e of Utensils		0.00
30	Posts	Safe Food and Water	_	_	43	3	In-use ut	ensils: properly sto			
31		urized eggs used where required & ice from approved source			44	_	11.14	equipment & linens		d dried & bandle	d
32		ace obtained for specialized processing methods			45	_	The second second second	e/single-service art		A CONTRACTOR OF THE PARTY OF TH	
	I I varia	Food Temperature Control			46	_		sed properly	- property		
	Prope	r cooling methods used; adequate equipment for						Utensils, Equip	ment and Ver	ding	
33		erature control			4	7	Food & n	on-food contact s	urfaces cleana	able,	
34	A STATE OF THE PARTY OF THE PAR	food properly cooked for hot holding			4	1		designed, constru			
35		red thawing methods used			46	0	Warewast	hing facilities: install	ed, maintained	& used; test strips	
36	Thern	ometers provided & accurate			49	9	Non-food	contact surfaces	clean		
		Food Identification						Physica	Facilities		
37	Food	properly labeled; original container			50	_		ld water available;	THE REAL PROPERTY AND ADDRESS OF THE PERSON.		
	pol.	Prevention of Food Contamination			5	-		installed; proper	The state of the s		
38	The second second	s, rodents, & animals not present			52	_		& waste water pro			
39		mination prevented during food preparation, storage & display			53	_	-	ilities: properly co			
40		Personal cleanliness			54	_	The second secon	& refuse properly		I I I I I I I I I I I I I I I I I I I	-
41		g cloths: properly used & stored		-	56	_		facilities installed			
42 Washing fruits & vegetables 56 Adequate ventilation & lighting; designated areas used											
Person in Charge (Signature) 1 101											
Inspe	Inspector (Signature) NCCEHSII OUY Follow-up: YES NO (Circle one) Follow-up Date:										



Inspection Report Page of O									
Health Sy	Division of Public Health ystems Protection ral St., Dover, DE 19901	License/Permit#	N066706	Date 12/27/19					
Establishn		City/State	cotyp) 120 Zip Code	Telephone					
Establishment Deli Address LUNUSKAR City/State 1/1/10 De Zip Code Telephone OBSERVATIONS AND CORRECTIVE/ACTIONS									
Item									
Number	- /-								
	8-404,11 P foud estab	ushmen	+ has been	permilled					
20	to and rate								
38	38 6-501.111 AD Rodent dispines have been removed, surfaces cleaned and sanitized								
	surfaces cleaned and sanitized								
	No Insects Found		/						
	Pest service conducted 12/26/19, person in charge								
			d month for	hist					
	morth, then truce	a mon	th						
	Possibly entry points			per					
	- pest technitian veco	mmen	da hous	10-10					
	Food contact Surpaces	shall to	e cleaned and	Santized					
	every morning before	WE JUY	vice						
			<u></u>						
				/					
Person in (	Charge (Signature) X 1101		Date: 12/-	27/19					
Inspector (	Signature) NCC EH311 0411		Date: /2	127/19					