



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Public Health

ME

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

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Delaware Division of Public Health Office of Food Protection 417 Federal St., Dover, DE 19901		No. of Risk Factor/Intervention Violations	0	Date	9/3/19
		No. of Repeat Risk Factor/Intervention Violations	0	Time In	11:55
		Score (optional)	N/A	Time Out	1:30
Establishment	Address	City/State	Zip Code	Telephone	
Gardvari	3615 Kirkwood Hwy	Wilmington, DE	19808	302-999-0286	
License/Permit #	Permit Holder	Purpose of Inspection	Est. Type	Risk Category	
11101235	Tanya Chakuri	Complaint	FF	Med	

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	Compliance Status		COS	R
Supervision							
1	IN OUT			17	IN OUT		
Person in charge present, demonstrates knowledge, and performs duties				Proper disposition of returned, previously served, reconditioned & unsafe food			
2	IN OUT N/A			Time/Temperature Control for Safety			
Certified Food Protection Manager				18	IN OUT N/A N/O		
Employee Health				19	IN OUT N/A N/O		
3	IN OUT			20	IN OUT N/A N/O		
Management, food employee and conditional employee, knowledge, responsibilities and reporting				21	IN OUT N/A N/O		
4	IN OUT			22	IN OUT N/A N/O		
Proper use of restriction and exclusion				23	IN OUT N/A N/O		
5	IN OUT			24	IN OUT N/A N/O		
Procedures for responding to vomiting and diarrheal events				Consumer Advisory			
Good Hygienic Practices				25	IN OUT N/A		
6	IN OUT N/O			Highly Susceptible Populations			
Proper eating, tasting, drinking, or tobacco use				26	IN OUT N/A		
7	IN OUT N/O			Pasteurized foods used; prohibited foods not offered			
Preventing Contamination by Hands				Food/Color Additives and Toxic Substances			
8	IN OUT N/O			27	IN OUT N/A		
Hands clean & properly washed				Food additives, approved & properly used			
9	IN OUT N/A N/O			28	IN OUT N/A		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				Toxic substances properly identified, stored, & used			
10	IN OUT			Conformance with Approved Procedures			
Adequate handwashing sinks properly supplied and accessible				29	IN OUT N/A		
Approved Source				Compliance with variance/specialized process/HACCP			
11	IN OUT			<div style="border: 1px solid black; padding: 5px;"> Risk factors are important 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. </div>			
12	IN OUT N/A N/O						
13	IN OUT						
14	IN OUT N/A N/O						
Protection from Contamination							
15	IN OUT N/A N/O						
16	IN OUT N/A						

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

Safe Food and Water		COS	R	Proper Use of Utensils		COS	R
30	Pasteurized eggs used where required			43	In-use utensils, properly stored		
31	Water & ice from approved source			44	Utensils, equipment & linens, properly stored, dried, & handled		
32	Variance obtained for specialized processing methods			45	Single-use/single-service articles, properly stored & used		
Food Temperature Control				46	Gloves used properly		
33	Proper cooling methods used; adequate equipment for temperature control			Utensils, Equipment and Vending			
34	Plant food properly cooked for hot holding			47	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
35	Approved thawing methods used			48	Warewashing facilities, installed, maintained, & used; test strips		
36	Thermometers provided & accurate			49	Non-food contact surfaces clean		
Food Identification				Physical Facilities			
37	Food properly labeled; original container			50	Hot & cold water available; adequate pressure		
Prevention of Food Contamination				51	Plumbing installed; proper backflow devices		
38	Insects, rodents, & animals not present			52	Sewage & waste water properly disposed		
39	Contamination prevented during food preparation, storage & display			53	Toilet facilities, properly constructed, supplied, & cleaned		
40	Personal cleanliness			54	Garbage & refuse properly disposed; facilities maintained		
41	Wiping cloths, properly used & stored			55	Physical facilities installed, maintained, & clean		
42	Washing fruits & vegetables			56	Adequate ventilation & lighting; designated areas used		

Person in Charge (Signature) *Chakuri*

Date: 9/3/19

Inspector (Signature) *NCC #1511033*

Follow-up: YES NO (Circle one) Follow-up Date: TBD



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Public Health

Inspection Report

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Delaware Division of Public Health
Health Systems Protection
417 Federal St., Dover, DE 19901

License/Permit # 11161235

Date 9/3/19

Establishment
Godavari

Address
3665 Kirkwood Hwy

City/State
Wilmington, DE

Zip Code
19803

Telephone
(302) 999-0286

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number

A Complaint was made on Godavari. The complainant reports, seeing a live roach run along the wall [redacted] and flies were everywhere.

An investigative inspection was conducted. During the inspection we spoke with the person in charge regarding the complaint. He acknowledged that they were having an active roach issues. He took us to the bar area where we observed multiple dead, dying and live roaches. Multiple mouse traps were also observed behind the bar. Fly strips with multiple dead flies were also observed in bar area. We continued to inspect the entire restaurant. Roaches (live and dead) adults and nymphs were observed on the walls in the dining area. Under the buffet tables, in dry storage room and in server stations. Mouse droppings were also observed in server stations, in kitchen by hand sinks, mop sink and bathroom. A dead mouse observed in a trap under the mop sink that is not being used and has a wet vacuum inside. Multiple holes in walls throughout Restaurant. Food and debris observed throughout kitchen. Floors, walls and equipment encrusted with debris. Small holes in walls in dining area, storage areas and kitchen and bathroom. Large boxes on the floor, some with food, others with supplies/paper goods. Unnecessary items inside restaurant (tires, christmas tree, etc). Gaps in doors throughout restaurant. AMP Pest service has been treating restaurant every two weeks. Last service was around August 19, 2019. Conditions with pest have not gotten better due to sanitation issues. Also mold under plastic on buffet table where juice dispensers.

3-14911 @ Godavari must cease operation due to pest infestation, and gross insanitary conditions.

Prior to opening the Health Department must reinspect restaurant. The following items must be addressed;

- Roaches, flies and mice shall be eliminated from restaurant.
- Kitchen, server stations, dry storage, walk-in refrigerators, bar and storage areas

Person in Charge (Signature) [Signature]

Date: 09/03/2019

Inspector (Signature) 11cc-FHST-137

Date: 9/3/19



Inspection Report

Delaware Division of Public Health
Health Systems Protection
417 Federal St., Dover, DE 19901

License/Permit #

N106235

Date

9/3/19

Establishment

Sgalavori

Address

3615 Kirkwood Hwy

City/State

Wilmington DE

Zip Code

19808

Telephone

(302) 999-0286

OBSERVATIONS AND CORRECTIVE ACTIONS

Item
Number

- must be cleaned and sanitized.
- All food that is not sealed in original packaging must be discarded.
- Floors, walls, ceiling, equipment, utensils must be cleaned and sanitized.
- All to-go containers must be discarded that are not sealed in plastic.
- Holes in walls in kitchen and bathroom must be sealed. Base boards replaced in kitchen (under mop sink, bathroom and 3 compartment sink)
- Remove all items (tiles, christmas tree, etc) not needed for restaurant.
- Seal gaps in doors to prevent pest from entering
- Remove plastic lining from buffet table under juice dispenser (molded)
- Separate food items from dishes.
- increase pest service to weekly
- Wash, rinse, sanitize all glassware, pitchers, utensils, coffee pans
- Remove fly strips from bar area.
- New contract from pest service company showing new service plan.
- Repair mop sink

Contact Health Department once the above conditions have been corrected.

Person in Charge (Signature)

Chaiorait

Date:

09/03/2019

Inspector (Signature)

NCC-FHS TI-133

Date:

9/3/19