



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).

ME

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 <u>0</u>		Date <u>11/19/19</u>	
		No. of Repeat Risk Factor/Intervention Violations <u>0</u>		Time In <u>10:30</u> Time Out <u>11:10</u>	
Establishment <u>Royal Garden</u>		Address <u>3629 Siderside Rd</u>		City/State <u>Wilmington DE</u>	
License/Permit # <u>New N192717</u>		Permit Holder <u>Susan Asian Kitchen LLC</u>		Zip Code <u>19810</u> Telephone <u>(302) 479-2838</u>	
Purpose of Inspection <u>Change of Ownership</u>		Est. Type <u>FF</u>		Risk Category <u>Med</u>	

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. COS=corrected on-site during inspection. R=repeat violation.

Compliance Status		COS		R	
Supervision					
1	IN OUT				
Person in charge present, demonstrates knowledge, and performs duties					
2	IN OUT N/A				
Certified Food Protection Manager					
Employee Health					
3	IN OUT				
Management, food employee and conditional employee; knowledge, responsibilities and reporting					
4	IN OUT				
Proper use of restriction and exclusion					
5	IN OUT				
Procedures for responding to vomiting and diarrheal events					
Good Hygienic Practices					
6	IN OUT N/O				
Proper eating, tasting, drinking, or tobacco use					
7	IN OUT N/O				
No discharge from eyes, nose, and mouth					
Preventing Contamination by Hands					
8	IN OUT N/O				
Hands clean & properly washed					
9	IN OUT N/A N/O				
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed					
10	IN OUT				
Adequate handwashing sinks properly supplied and accessible					
Approved Source					
11	IN OUT				
Food obtained from approved source					
12	IN OUT N/A N/O				
Food received at proper temperature					
13	IN OUT				
Food in good condition, safe, & unadulterated					
14	IN OUT N/A N/O				
Required records available: shellstock tags, parasite destruction					
Protection from Contamination					
15	IN OUT N/A N/O				
Food separated and protected					
16	IN OUT N/A				
Food-contact surfaces cleaned & sanitized					

Compliance Status		COS		R	
17	IN OUT				
Proper disposition of returned, previously served, reconditioned & unsafe food					
Time/Temperature Control for Safety					
18	IN OUT N/A N/O				
Proper cooking time & temperatures					
19	IN OUT N/A N/O				
Proper reheating procedures for hot holding					
20	IN OUT N/A N/O				
Proper cooling time and temperature					
21	IN OUT N/A N/O				
Proper hot holding temperatures					
22	IN OUT N/A N/O				
Proper cold holding temperatures					
23	IN OUT N/A N/O				
Proper date marking and disposition					
24	IN OUT N/A N/O				
Time as a Public Health Control; procedures & records					
Consumer Advisory					
25	IN OUT N/A				
Consumer advisory provided for raw/undercooked food					
Highly Susceptible Populations					
26	IN OUT N/A				
Pasteurized foods used; prohibited foods not offered					
Food/Color Additives and Toxic Substances					
27	IN OUT N/A				
Food additives: approved & properly used					
28	IN OUT N/A				
Toxic substances properly identified, stored, & used					
Conformance with Approved Procedures					
29	IN OUT N/A				
Compliance with variance/specialized process/HACCP					

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.

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) _____ Date: 11/19/19

Inspector (Signature) NCC-51511-038 Follow-up: YES NO (Circle one) Follow-up Date: 12/20/19



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 # New

Date 11/19/19

Establishment Kingal Garden

Address 3629 Silverside Rd

City/State Wilmington, DE

Zip Code 19810

Telephone (302) 479-2333

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number

A hand sink is needed behind front counter. 30 Days to install a hand sink.

This inspection report serves as your Interim Food Establishment Permit to operate. It expires on January 31, 2020. You will be involved a permit fee. Failure to pay permit shall result in closure. The above condition must be met in 30 Days.

Reinspection on 12/20/19

Person in Charge (Signature) [Signature]

Date: 11/19/19

Inspector (Signature) NCC - FITS II - 039

Date: 11/19/19