



Retail Food Establishment Inspection Report part I

As Governed by Title 50, Chapter 50 Montana Code Annotated (MCA) and the Administrative Rules of Montana (ARM): Title 37, Chapter 110, Subchapter 2

| | | |
|---|--|----------------------|
| Establishment Blu Taco | No. of Risk Factor/Intervention Violations 0 | Date 1/5/21 |
| Address 55 Highway 16 | No. of Repeat Risk Factor/Intervention Violations 0 | Time In 1328 |
| City Glendive County: Dawson | Water: City Private Public PWS# 3811 | Time Out 1338 |
| Licensee: Greg Cross Email: | Wastewater: City Private Public MPDDS# 21733 | Risk Category |
| License # F / FL 315355 License Subtype(s): RFS | Current water test Y/N | 1 2 3 4 |
| Purpose of Inspection: Regular X Follow-up ___ Pre-opening ___ Complaint ___ Illness ___ HACCP ___ Investigation ___ Other ___ | | |

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 | | | 18 | IN | | |
| 2 | IN | | | 19 | IN | | |
| Employee Health | | | | | | | |
| 3 | IN | | | 20 | IN | | |
| 4 | IN | | | 21 | IN | | |
| 5 | IN | | | 22 | IN | | |
| Good Hygienic Practices | | | | | | | |
| 6 | IN | | | 23 | IN | | |
| 7 | IN | | | 24 | IN | | |
| Preventing Contamination by Hands | | | | | | | |
| 8 | IN | | | Consumer Advisory | | | |
| 9 | IN | | | 25 | IN | | |
| 10 | IN | | | Highly Susceptible Populations | | | |
| Approved Source | | | | | | | |
| 11 | IN | | | 26 | IN | | |
| 12 | IN | | | Food/Color Additives and Toxic Substances | | | |
| 13 | IN | | | 27 | IN | | |
| 14 | IN | | | 28 | IN | | |
| Protection from Contamination Arm | | | | | | | |
| 15 | IN | | | Conformance with Approved Procedures | | | |
| 16 | IN | | | 29 | IN | | |
| 17 | IN | | | <div style="border: 1px solid black; padding: 5px;"> <p>Risk factors are improper 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.</p> </div> | | | |

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 | | | | | | | |
| 33 | Proper cooling methods used; adequate equipment for temperature control | | | 46 | Gloves used properly | | |
| 34 | Plant food properly cooked for hot holding | | | Utensils, Equipment and Vending | | | |
| 35 | Approved thawing methods used | | | 47 | Food & non-food contact surfaces cleanable, properly designed, constructed, & used | | |
| 36 | Thermometers provided & accurate | | | 48 | Warewashing facilities: installed, maintained, & used; test strips | | |
| Food Identification | | | | | | | |
| 37 | Food properly labeled; original container | | | 49 | Non-food contact surfaces clean | | |
| Prevention of Food Contamination | | | | | | | |
| 38 | Insects, rodents, & animals not present | | | Physical Facilities | | | |
| 39 | Contamination prevented during food preparation, storage & display | | | 50 | Hot & cold water available; adequate pressure | | |
| 40 | Personal cleanliness | | | 51 | Plumbing installed; proper backflow devices | | |
| 41 | Wiping cloths: properly used & stored | | | 52 | Sewage & waste water properly disposed | | |
| 42 | Washing fruits & vegetables | | | 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) <i>Greg Cross</i> | Date: 1/5/21 |
| Inspector (Signature) <i>Scott Nelson R.S.</i> | Follow-up: YES NO (Circle one) Follow-up Date: |

