



Wholesale Food Inspection Report

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Governed by Montana Code Annotated Title 50, Chapter 57 and Administrative Rules Montana (ARM) Title 37, Chapter 110, Sub-chapter 3. Foodborne Illness Risk Factor violations are priority items that should be corrected on-site during the inspection. Failure to comply with any time limits for corrections of critical (priority) item violations may result in cessation of food service operations.

Establishment Western trails	No. of Risk Factor Violations 0	Date 2/2/21
Address 144 River Road	No. of Good Wholesale Practice Violations 0	Time In 0900
City Glendive County Dawson	Water On-Site System Other	Time Out 0930
Licensee Name Stacy Aguirre Email:	Wastewater On-Site System Other	Facility Type Processor X
Establishment Telephone 406-377-4284	License # 312655	Warehouse X
Purpose of Inspection Routine X Follow-up Pre-licensing Complaint Other (specify)		

FOODBORNE ILLNESS RISK FACTORS

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	
Supervision					
1	IN	OUT			Person in charge present, demonstrates knowledge, performs duties
2	IN	OUT	N/A		Required training, documentation
Employee Health					
3	IN	OUT			Management, food workers knowledge, responsibilities and reporting
4	IN	OUT			Proper use of restriction and exclusion
5	IN	OUT			Procedures for responding to vomit and diarrhea 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 or 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 ready-to-eat foods OR pre-approved alternative followed ^A
10	IN	OUT			Handwashing sinks adequate, accessible, supplied
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		Food separated, protected
16	IN	OUT	N/A		Food-contact surfaces: cleaned, sanitized
17	IN	OUT			Proper disposition of returned, previously served, reconditioned, unsafe food
Food Temperatures, Procedures, Records					
18	IN	OUT	N/A	N/O	Proper COOKING time, temperatures ^A
19	IN	OUT	N/A	N/O	Proper RE-HEATING procedures for hot holding ^A
20	IN	OUT	N/A	N/O	Proper COOLING time, temperatures ^A
Notes					
21	IN	OUT	N/A	N/O	Proper HOT-HOLDING temperatures ^A
22	IN	OUT	N/A		Proper COLD-HOLDING temperatures
23	IN	OUT	N/A	N/O	Proper date marking, disposal times ^A
24	IN	OUT	N/A	N/O	Time as public health control: procedures, records ^A
Highly Susceptible Populations					
25	IN	OUT	N/A		Pasteurized foods used; prohibited foods not offered ^A
Food Additives, Colors, Toxic Substances					
26	IN	OUT	N/A		Food additives: approved, properly used ^A
27	IN	OUT			Toxic substances properly identified, stored, used
Conformance with Processes, Approved Procedures					
28	IN	OUT	N/A		Compliance with HACCP plan, Specialized Processing ^A

RISK FACTORS marked **OUT** are improper practices or procedures identified by CDC as the most prevalent that contribute to foodborne illness or injury.

GOOD MANUFACTURING PRACTICES

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

Person in Charge (Signature) **Stacy Aguirre** Date

Inspector (Signature) **[Signature]** Follow-up Needed YES NO Follow-up Date **2/2/20**

^A - Denotes inspection items that are NOT applicable to food warehouses that ONLY hold food and DO NOT repackage or process RTE or NRTE exposed foods.

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Establishment Western Trails Sanitizer Type bleach/water
144 River Road Sanitizer Concentration/Hot Water Temp

Address

TEMPERATURE OBSERVATIONS Types: Hot Hold (HH) Cold Hold (CH) Cooling (CL) Cooking (CK) Re-heating (RH)

Food/Location	Type/Temp	Food/Location	Type/Temp
<u>no TCS foods</u>			

OBSERVATIONS AND CORRECTIVE ACTIONS

Rule violations cited in this report must be corrected within assigned time frames or may be subject to further enforcement action(s).

Item - ARM	Correct By
<u>No violations observed.</u>	

Person in Charge (Signature) Stacy Aguirre Date 2/2/21
 Inspector (Signature) Brian [unclear], ES.