

# State of Ohio Food Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility THE SPOT OF SIDNEY	Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License Number	Date 02/29/2024
Address 201 S OHIO AVENUE	City/State/Zip Code SIDNEY OH 45365		
License holder MICHAEL JANNIDES	Inspection Time 150	Travel Time 5	Category/Descriptive COMMERCIAL CLASS 4 <25,000 SQ. FT.
Type of inspection (check all that apply) <input checked="" type="checkbox"/> Standard <input checked="" type="checkbox"/> Critical Control Point (FSO) <input type="checkbox"/> Process Review (RFE) <input type="checkbox"/> Variance Review <input type="checkbox"/> Follow Up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 Day <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-licensing <input type="checkbox"/> Consultation		Follow-up date (if required) //	Water sample date/result (if required) //

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item: **IN** = in compliance    **OUT** = not in compliance    **N/O** = not observed    **N/A** = not applicable

Compliance Status		Compliance Status	
<b>Supervision</b>		<b>Time/Temperature Controlled for Safety Food (TCS food)</b>	
1	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	23	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O
Person in charge present, demonstrates knowledge, and performs duties		Proper date marking and disposition	
2	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	24	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
Certified Food Protection Manager		Time as a public health control: procedures & records	
<b>Employee Health</b>		<b>Consumer Advisory</b>	
3	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	25	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
Management, food employees and conditional employees; knowledge, responsibilities and reporting		Consumer advisory provided for raw or undercooked foods	
4	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	<b>Highly Susceptible Populations</b>	
Proper use of restriction and exclusion		26	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
5	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Pasteurized foods used; prohibited foods not offered	
Procedures for responding to vomiting and diarrheal events		<b>Chemical</b>	
<b>Good Hygienic Practices</b>		27	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
6	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Food additives: approved and properly used	
Proper eating, tasting, drinking, or tobacco use		28	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
7	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Toxic substances properly identified, stored, used	
No discharge from eyes, nose, and mouth		<b>Conformance with Approved Procedures</b>	
<b>Preventing Contamination by Hands</b>		29	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
8	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Compliance with Reduced Oxygen Packaging, other specialized processes, and HACCP plan	
Hands clean and properly washed		30	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
9	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Special Requirements: Fresh Juice Production	
No bare hand contact with ready-to-eat foods or approved alternate method properly followed		31	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
10	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Special Requirements: Heat Treatment Dispensing Freezers	
Adequate handwashing facilities supplied & accessible		32	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
<b>Approved Source</b>		Special Requirements: Custom Processing	
11	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	33	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
Food obtained from approved source		Special Requirements: Bulk Water Machine Criteria	
12	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O	34	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
Food received at proper temperature		Special Requirements: Acidified White Rice Preparation Criteria	
13	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	35	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
Food in good condition, safe, and unadulterated		Critical Control Point Inspection	
14	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O	36	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
Required records available: shellstock tags, parasite destruction		Process Review	
<b>Protection from Contamination</b>		37	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
15	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	<p><b>Risk Factors</b> are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness.</p> <p><b>Public health interventions</b> are control measures to prevent foodborne illness or injury.</p>	
Food separated and protected			
16	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Food-contact surfaces: cleaned and sanitized			
17	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT		
Proper disposition of returned, previously served, reconditioned, and unsafe food			
<b>Time/Temperature Controlled for Safety Food (TCS food)</b>			
18	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Proper cooking time and temperatures			
19	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Proper reheating procedures for hot holding			
20	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O		
Proper cooling time and temperatures			
21	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Proper hot holding temperatures			
22	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A		
Proper cold holding temperatures			

# State of Ohio Food Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

<b>Name of Facility</b> THE SPOT OF SIDNEY	<b>Type of Inspection</b> sta ccp	<b>Date</b> 02/29/2024
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## GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.  
Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item: **IN** = in compliance **OUT** = not in compliance **N/O** = not observed **N/A** = not applicable

Safe Food and Water		Utensils, Equipment and Vending	
38	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O	54	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT
Pasteurized eggs used where required		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	
39	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	55	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A
Water and ice from approved source		Warewashing facilities: installed, maintained, used; test strips	
Food Temperature Control		Physical Facilities	
40	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	56	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT
Proper cooling methods used; adequate equipment for temperature control		Nonfood-contact surfaces clean	
41	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	57 <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A Hot and cold water available; adequate pressure	
Plant food properly cooked for hot holding			
42	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	58 <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O Plumbing installed; proper backflow devices	
Approved thawing methods used			
43	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	59 <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A Sewage and waste water properly disposed	
Thermometers provided and accurate			
Food Identification		Administrative	
44	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	65	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
Food properly labeled; original container		901:3-4 OAC	
Prevention of Food Contamination		66	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
45	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	3701-21 OAC	
Insects, rodents, and animals not present/outer openings protected			
46	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT		
Contamination prevented during food preparation, storage & display			
47	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A		
Personal cleanliness			
48	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Wiping cloths: properly used and stored			
49	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O		
Washing fruits and vegetables			
Proper Use of Utensils			
50	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
In-use utensils: properly stored			
51	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A		
Utensils, equipment and linens: properly stored, dried, handled			
52	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A		
Single-use/single-service articles: properly stored, used			
53	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O		
Slash-resistant, cloth, and latex glove use			

## Observations and Corrective Actions

Mark "X" in appropriate box for COS and R: **COS** = corrected on-site during inspection **R** = repeat violation

Item No.	Code Section	Priority Level	Comment	COS	R
	Comment/ Obs		Several areas throughout the facility need a deep cleaning. All equipment surfaces need cleaned, but the following need special attention. -Warewashing equipment in the main kitchen. -ceiling tiles and vents in main kitchen need cleaned. -cooktop in the pie kitchen	<input type="checkbox"/>	<input type="checkbox"/>
16	3717-1-04.5(A)(1)	C	Cleanliness of equipment food-contact surfaces and utensils.	<input type="checkbox"/>	<input type="checkbox"/>
16	3717-1-04.5(B)	C	Equipment food-contact surfaces and utensils - cleaning frequency. 3717-1-04.5.B: Equipment food-contact surfaces and utensils - cleaning frequency. 3717-1-04.5.B.3: Except as specified in paragraph (B)(4) of this rule, if used with time/temperature controlled for safety food, equipment food-contact surfaces and utensils shall be cleaned throughout the day at least every four hours. 3717-1-04.5.B.4.a: In storage, containers of time/temperature controlled for safety food and their contents are maintained at temperatures specified under rule 3717-1-03.4 of the Administrative Code and the containers are cleaned when they are empty; 3717-1-04.5.B.4.b: Utensils and equipment are used to prepare food in a refrigerated room or area that is maintained at one of the temperatures in the following chart and: 3717-1-04.5.B.4.b.i: The utensils and equipment are cleaned at the frequency in the following chart that corresponds to the temperature: Ambient temperature   Cleaning frequency 41F ( 5.0 C) or less   24 hours >41F - 45F (> 5.0 C - 7.2 C)   20 hours >45 F - 50 F (>7.2 C - 10.0 C)   16 hours >50 F - 55 F (>10.0 C - 12.8 C)   10 hours ; and	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35	CCP-III.0011		Preventing Contamination by Hands: Hand washing facilities are properly supplied. CCP-III.0011: Preventing Contamination by Hands: Hand washing facilities are properly supplied.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-VI.0018		TCS Food: Observed hot foods being held at 135 F or above; cold foods being held at 41 F or below. CCP-VI.0018: TCS Food: Observed hot foods being held at 135 F or above; cold foods being held at 41 F or below.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-X.5		Chemical: Toxic materials are properly identified and stored.	<input type="checkbox"/>	<input type="checkbox"/>

<b>Person in Charge</b> DEBBIE	<b>Date</b> 02/29/2024
<b>Environmental Health Specialist</b> BEN HICKERSON, REHS RS/SIT# 4087	<b>Licensor:</b> Sidney-Shelby County Health Department

PRIORITY LEVEL: C= CRITICAL NC = NON-CRITICAL  
As per HEA 5302B The Baldwin Group, Inc. (11/19)  
As per AGR 1268 The Baldwin Group, Inc. (11/19)

**State of Ohio**  
**Continuation Report**  
 Authority: Chapters 3717 and 3715 Ohio Revised Code

<b>Name of Facility</b> THE SPOT OF SIDNEY			<b>Type of Inspection</b> sta ccp	<b>Date</b> 02/29/2024	
<b>Observations and Corrective Actions (continued)</b>					
Mark "X" in appropriate box for COS and R: <b>COS</b> = corrected on-site during inspection <b>R</b> = repeat violation					
Item No.	Code Section	Priority Level	Comment	COS	R
46	3717-1-03.2(Q)	NC	Food storage - preventing contamination from the premises. 3717-1-03.2.Q: Food storage - preventing contamination from the premises. Except as hereinafter provided in this rule, food is to be protected from contamination by storing the food: 3717-1-03.2.Q.3: At least six inches (fifteen centimeters) above the floor. Food in packages and working containers may be stored less than six inches (fifteen centimeters) above the floor on case lot handling equipment as specified under paragraph (II) of rule 3717-1-04.1 of the Administrative Code; and pressurized beverage containers, cased food in waterproof containers such as bottles or cans, and milk containers in plastic crates may be stored on a floor that is clean and not exposed to floor moisture.  Several Items stored on the floor in walk in coolers and walk in freezers. Please elevate 6in off the floor.	<input type="checkbox"/>	<input type="checkbox"/>
46	3717-1-03.2(R)	NC	Food storage - prohibited areas.  3717-1-03.2.R.6: Under sewer lines that are not shielded to intercept potential drips Single use items being stored under sewer pipes in basement, please adjust so they avoid potential contamination.	<input type="checkbox"/>	<input type="checkbox"/>
54	3717-1-04(J)	NC	Single-service and single-use articles - characteristics. 3717-1-04.0.J: Single-service and single-use articles - characteristics. Materials that are used to make single-service and single-use articles: 3717-1-04.0.J.1: May not: 3717-1-04.0.J.1.a: Allow the migration of deleterious substances; or 3717-1-04.0.J.1.b: Impart colors, odors, or tastes to food; and 3717-1-04.0.J.2: Shall be: 3717-1-04.0.J.2.a: Safe; and 3717-1-04.0.J.2.b: Clean.  Several of the used pickle and mayonayse jars and buckets are worn and should be discarded.	<input type="checkbox"/>	<input type="checkbox"/>
54	3717-1-04.1(C)	C	Food-contact surfaces - cleanability 3717-1-04.1.C: Food-contact surfaces - cleanability. Multiuse food-contact surfaces are to be: 3717-1-04.1.C.1: Smooth; 3717-1-04.1.C.2: Free of breaks, open seams, cracks, chips, inclusions, pits, and similar imperfections; 3717-1-04.1.C.3: Free of sharp internal angles, corners, and crevices; Cutting board surface in the back of the catering kitchen needs replaced or resurfaced. In addition several cutting boards stored under the counter in the catering kitchen also need replaced. Surfaces are no longer smooth and cleanable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
55	3717-1-04.4(D)	NC	Warewashing equipment - cleaning frequency. 3717-1-04.4.D: Warewashing equipment - cleaning frequency. A warewashing machine; the compartments of sinks, basins, or other receptacles used for washing and rinsing equipment, utensils, or raw foods, or laundering wiping cloths; and drainboards or other equipment used to substitute for drainboards as specified under paragraph (C) of rule 3717-1-04.2 of the Administrative Code shall be cleaned: 3717-1-04.4.D.1: Before use; 3717-1-04.4.D.2: Throughout the day at a frequency necessary to prevent recontamination of equipment and utensils and to ensure that the equipment performs its intended function; and 3717-1-04.4.D.3: If used, at least every twenty-four hours.	<input type="checkbox"/>	<input type="checkbox"/>
56	3717-1-04.5(A)(3)	NC	Cleanliness of nonfood-contact surfaces of equipment. 3717-1-04.5.A.3: Nonfood-contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.	<input type="checkbox"/>	<input type="checkbox"/>
56	3717-1-04.5(D)	NC	Nonfood-contact surfaces - cleaning frequency. 3717-1-04.5.D: Nonfood-contact surfaces - cleaning frequency. Nonfood-contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.	<input type="checkbox"/>	<input type="checkbox"/>
62	3717-1-06.0(A)	NC	Indoor areas - surface characteristics 3717-1-06.0.A: Indoor areas - surface characteristics 3717-1-06.0.A.1: Except as specified in paragraph (A)(2) of this rule, materials for indoor floor, wall, and ceiling surfaces under conditions of normal use are to be: 3717-1-06.0.A.1.a: Smooth, durable, and easily cleanable for areas where food service operation or retail food establishment activities are conducted;  Damaged floor in front of walk-in freezer Damaged floor in Pie Kitchen, tiles need repaired and replaced.	<input type="checkbox"/>	<input type="checkbox"/>
62	3717-1-06.4(A)	NC	Repairing.	<input type="checkbox"/>	<input type="checkbox"/>
62	3717-1-06.4(B)	NC	Cleaning - frequency and restrictions. 3717-1-06.4.B: Cleaning - frequency and restrictions. 3717-1-06.4.B.1: The physical facilities shall be cleaned as often as necessary to keep them clean.	<input type="checkbox"/>	<input type="checkbox"/>
62	3717-1-06.4(C)	NC	Cleaning floors - dustless methods.	<input type="checkbox"/>	<input type="checkbox"/>
63	3717-1-06.2(f)(1)	NC	Lighting - intensity (10 FC)	<input type="checkbox"/>	<input type="checkbox"/>
<b>Person in Charge</b> DEBBIE				<b>Date</b> 02/29/2024	
<b>Environmental Health Specialist</b> BEN HICKERSON, REHS      RS/SIT# 4087			<b>Licensor:</b> Sidney-Shelby County Health Department		

PRIORITY LEVEL: C= CRITICAL NC = NON-CRITICAL  
 As per HEA 5351 The Baldwin Group, Inc. (11/19)  
 As per AGR 1268 The Baldwin Group, Inc. (11/19)

# State of Ohio Continuation Report

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<b>Name of Facility</b> THE SPOT OF SIDNEY		<b>Type of Inspection</b> sta ccp	<b>Date</b> 02/29/2024		
<b>Observations and Corrective Actions (continued)</b>					
Mark "X" in appropriate box for COS and R: <b>COS</b> = corrected on-site during inspection <b>R</b> = repeat violation					
Item No.	Code Section	Priority Level	Comment	COS	R
63	3717-1-06.2(l)(2)	NC	Lighting - intensity (20 FC)	<input type="checkbox"/>	<input type="checkbox"/>
63	3717-1-06.2(l)(3)	NC	Lighting - intensity (50 FC) 3717-1-06.2.1.3: At least fifty foot candles (five hundred forty lux) at a surface where a food employee is working with food or working with utensils or equipment such as knives, slicers, grinders, or saws where employee safety is a factor.  Several lights need replaced in the Pie Kitchen.	<input type="checkbox"/>	<input type="checkbox"/>

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