State of Ohio Food Inspection Report Provided Control of the Provided Control

_	Authority: Chapters 3/17 and 3/15 Ohio Revised Code												
	me of fa	acility VAY FARMS E	Check one FSO RFE				License Number 2025327			Date 10/12/2025			
Address City/State/2 2211 CISCO ROAD SIDNEY													
License holder Inspection COURTNEY DILTZ 45						Travel Time Category/Descriptive							
Ту	pe of in	spection (checl	k all that apply)	-				Follow-up	date (if requi	ired)	Water sample date/result		
図	Standa	rd Critical C	Control Point (FSO) Process Review (RFE) Variance	Reviev	v F ollow	/ Up			(if required)			
	Foodbo	me 🔲 30 Day					·	11			11		
_													
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					Cor	npliance Sta	atus			
			Supervision		Time/Temperature Controlled for Safety Food (TCS food)								
1	⊠ IN	OUT N/A	OUT N/A Person in charge present, demonstrates knowledge, and performs duties				23 N OUT Proper date marking and disposition						
2	□IN	□OUT 区N/A	Certified Food Protection Manager			□ IN □							
	TYL		Employee Health	- 70 34	24	⊠N/A □	: procedures & records						
3	EIN	□OUT □N/A	Management, food employees and conditiona knowledge, responsibilities and reporting	l employees;	Consumer Advisory								
4	ZIN			25	DIN DOUT					or raw or undercooked foods			
4 🗷 IN OUT N/A Proper use of restriction and exclusion 5 🗷 IN OUT N/A Procedures for responding to vomiting and diarrheal events						(25). 477.	H	liahly Sus	ceptible Po	oulatio	ons		
			Good Hygienic Practices			□ IN □		T					
6 ☑IN ☐OUT ☐N/O Proper eating, tasting, drinking, or tobacco use						Pasteurized foods used; prohibited foods not offe					pited foods not offered		
7			No discharge from eyes, nose, and mouth		Chemical								
Preventing Contamination by Hands						□ IN □] OUT	Food add	litives: approve	hae he	properly used		
8 N OUT N/O Hands clean and properly washed					27	⊠ N/A		1 ood add	личез. арргоче	- and	properly used		
9	⊠IN	OUT	No bare hand contact with ready-to-eat foods	or approved	28	⊠ IN □ □N/A] OUT	Toxic sub	ntified, stored, used				
-	□N/A □N/O alternate method properly followed							Conformance with Approved Procedures					
10	☑IN ☐OUT ☐N/A Adequate handwashing facilities supplied & accessible						OUT				gen Packaging, other		
44	TERLINI	Tour.	Approved Source			⋉ N/A		specialize	ed processes, a	AH bne	CCP plan		
11	_	OUT	Food obtained from approved source		30			Special R	lequirements: F	Fresh J	luice Production		
12	_	□OUT N/O	Food received at proper temperature		■ N/A N/O			Control Description of the Unit 7					
13	⊠ IN	OUT	Food in good condition, safe, and unadulterat	ed	31	31 × N/A		Special R	Requirements: Heat Treatment Dispension		reatment Dispensing Freezers		
14	_	□OUT □N/O	Required records available: shellstock tags, p destruction	arasite	32 ☐ IN ☐ OUT ☑ N/A ☐ N/O			Special Requirements: Custom Processing					
			tection from Contamination	- X X			10UT						
15		□OUT □ N/O	Food separated and protected		33	₩N/A] N/O	-			ater Machine Criteria		
16		□OUT □ N/O	Food-contact surfaces: cleaned and sanitized		34	□ IN □ ▼N/A □		Criteria	Requirements: /	Acidifie	d White Rice Preparation		
17		□о∪т	Proper disposition of returned, previously service reconditioned, and unsafe food	/ed,	35	□ IN □ ■ N/A]OUT	Critical C	ontrol Point Ins	spection	n		
	Tin	ne/Temperatu	re Controlled for Safety Food (TCS foo	d)	36	□ IN □	OUT	Process F	Review				
18		OUT N/O	Proper cooking time and temperatures		37	IN □	OUT	-					
19	□IN	□OUT □N/O	Proper reheating procedures for hot holding		31	⊠ N/A		Variance					
20	□IN	OUT N/O	Proper cooling time and temperatures		Risk Factors are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness.								
21		□OUT □N/O	Proper hot holding temperatures		F	ublic hea	alth in		ns are contro	ol mea:	sures to prevent		
22	⊠IN	□OUT □N/A	Proper cold holding temperatures										

State of Ohio Food Inspection Report Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility CROSSWAY FARMS BBQ TRAILER								nspection	Date 10/12/2025			
CROSSWAY FARMS BBQ TRAILER sta									10/12/2025			
	7/1			GOOD RETA								
ı	∕lark de	Good Retail Pracesignated compliance	tices are prev status (IN, OUT	rentative measures to control the intro , N/O, N/A) for each numbered item: IN =	ductic	on of pathoge mpliance OUT	ns, cher = not in c	micals, and physica compliance N/O = not	al objects into foods. t observed N/A = not ap	plicable	,	
			Safe Food	and Water	Utensils, Equipment and Vending							
38	_	OUT N/A		d eggs used where required ice from approved source	54 ☑IN □OUT			Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used				
				ture Control			- 5	Warewashing facilities: installed, maintained,				
40 MIN COUT CAMA CAMA Proper				ling methods used; adequate equipment	55			used; test strips Nonfood-contact surfaces clean				
41	ПІМ	□OUT 図N/A □N	O Plant food	properly cooked for hot holding				Physical Facilities				
42	_			hawing methods used	57	IN □OU	T 🔲 N/A	Hot and cold water	available; adequate pres	sure		
43		□OUT □N/A	_	ters provided and accurate	58	ZIN OU	IT		proper backflow devices		_	
Food Identification								, rannon ig iniciamou,	propor outsider devices			
44	⊠ IN	OUT		erly labeled; original container								
	14.6	Preventi		Contamination	59							
45	S IN OUT		Insects, roo openings p	Insects, rodents, and animals not present/outer openings protected		■IN □OU.		1 1 3				
46		Попт	Contamina storage & d	tion prevented during food preparation, display	61	62 XIN DOUT		Physical facilities installed, maintained, and clean; dogs in outdoor dining areas				
47		OUT N/A	Personal c									
48	⊠ IN	OUT N/A N	O Wiping clot	hs: properly used and stored	63	IN □On.	r	Adequate ventilation	n and lighting; designate	d areas	usec	
49 IN OUT N/A N/O Washing fruits and vegetables Proper Use of Utensils						□IN □OU	T 🗷 N/A	Existing Equipment	and Facilities			
<u> </u>					Administrative							
50				nsils: properly stored					.IVE	-1112		
51	⊠ IN	OUT N/A	dried, hand	lled	65	□и □оп.	T ∭ N/A	901:3-4 OAC				
52		OUT N/A	stored, use	Single-use/single-service articles: properly stored, used		⊠IN □OU	T □N/A	3701-21 OAC				
53	¥IN	OUT N/A N	O Slash-resis	tant, cloth, and latex glove use	_							
			Mark "X" in	Observations and Cappropriate box for COS and R: COS = co				ion R = repeat viola	ation			
Ite	m No.	Code Section	Priority Level	Comment			V			cos	R	
		Comment/ Obs	-	All hot food = 135 F+ Good! All coolers = <41 F (food) Good!								
		Comment/ Obs		Temperature records are being kept for glass door display			oler.					
		Comment/ Obs		Please ensure magnetic door screens are properly installed to help minimize the numer of funit.					ies inside the	盲	峝	
		Comment/ Obs		Otherwise, satisfactory at time of inspect	ion.						\vdash	

Person in Charge	Date 10/12/2025			
RUSTY SCHWEPE, REHS RS/SIT# 2993	Licensor: Sidney-Shelby County Health De			

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