Colorado Department of Public Health and Environment

COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
4300 CHERRY CREEK DRIVE SOUTH
DENVER, CO 80246-1530
PHONE: (303) 692-3645 FAX (303) 753-6809

License # _____

ESTABLISHMENT Oscars at Breckenridge	OWNER NAME	
ADDRESS		ZIP CODE

COUNTY	FIRM ID	INSPECTOR ID	DATE MONTH	DAY	YEAR	TRAVEL TIME (MINUTES)	INSP TIME (MINUTES)	TYPE
59		638	07	22	16	20	50	spring

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

Categories in "**red**" indicate "**Critical Items**" which are provisions of the rules and regulations that, if in noncompliance, are more likely than other violations to contribute to food contamination or illness. Violations categories further indicated with highlighting are Foodborne Illness Risk Factors (FBI) which are violations directly related to causing foodborne illness.

In	Out	NA	NO	CRITCAL ITEMS	R
01 FOOD SOURCE					
				a. Approved source FBI	
				b. Wholesome, free of spoilage	
				c. Cross-contamination FBI	
				d. HACCP plan	
				e. Date marking	
				f. Consumer Advisory	
02 PERSONNEL					
				a. Personnel w/ infections restricted FBI	
				b. Wounds properly covered	
				c. Hands washed as needed FBI	
				d. Hygienic Practices FBI	
				e. Smoking, eating, drinking	
				f. Demonstration of knowledge	
				g. Preventing food contamination from bare hands FBI	
03 FOOD TEMPERATURE CONTROL					
				a. Rapidly cool foods to 41°F or less FBI	
				b. Rapidly reheat to 165°F or greater FBI	
				c. Hot hold at 135°F or greater FBI	
				d. Required cooking temperature FBI	
				e. Cold hold at 41°F or less FBI	
				f. Food thermometer (probe-type)	
				g. Adequate equipment to maintain food temperatures FBI	
04 SANITATION				Temp / Con / Exp / Type	
				a. Manual	
				b. Mechanical	
				c. In-Place	
05 WATER, SEWAGE, PLUMBING SYSTEMS					
				a. Safe water source	
				b. Hot & cold water under pressure	
				c. Backflow, backsiphonage	
				d. Sewage disposal	
06 HANDWASHING FACILITIES					
				a. Adequate number, location FBI	
				b. Accessible FBI	
				c. Soap & drying devices available FBI	
07 PEST CONTROL					
				a. Evidence of insects or rodents	
				b. Pesticide application	
				c. Animals prohibited	
08 POISONOUS OR TOXIC ITEMS					
				a. Properly stored	
				b. Properly labeled	
				c. Properly Used	

Out	NON CRITICAL ITEMS	R
09 FOOD LABELING, FOOD PROTECTION		
	a. Original container, properly labeled	
	b. Food protected from contamination	
10 EQUIPMENT DESIGN, CONSTRUCTION		
	a. Food-contact surfaces	
	b. Non-food contact surfaces	
	c. Dishwashing facilities	
11 TESTING DEVICES		
	a. Refrigeration units provided with accurate, conspicuous thermometer	
	b. Dishmachine provided with accurate thermometer & gauge cock	
	c. Chemical test kits provided, accessible	
12 CLEANING OF EQUIPMENT & UTENSILS		
	a. Food-contact surfaces	
	b. Non-food contact surfaces	
	c. Dishwashing facilities	
	d. Wiping cloths	
13 UTENSILS, SINGLE-SERVICE ARTICLES		
	a. Utensils provided, used, stored	
	b. Single service articles stored, used	
	c. No re-use of single-service articles	
14 PHYSICAL FACILITIES		
	a. Plumbing: installed, maintained	
	b. Garbage and refuse	
	c. Floors, walls, ceilings	
	d. Lighting	
	e. Ventilation	
	f. Locker rooms	
	g. Premises maintained	
	h. Separation of living, laundry	
	i. Restroom facilities	
15 OTHER OPERATIONS		
	a. Personnel: clean clothes, hair restraints, authorized	
	b. Linen properly stored	

KEY:

In	Item in compliance w/regulations at the time of inspection
Out	Item out of compliance w/regulations at the time of inspection
NA	(Not Applicable) – This section(s) of the regulation is not performed by the establishment
NO	(Not Observed) – This section(s) of the regulation was not being performed by the establishment at the time of the inspection
R	Repeat violation

† Compliance Verification Method:
CIVCS: Yes No
On-Site Follow Up: Yes No

DEHS Form RF001-1_revk.1_HC

ENVIRONMENTAL HEALTH SPECIALIST:

RECEIVED BY:

COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

RETAIL FOOD INSPECTION REPORT

Items described below identify violations to be corrected as indicated by the regulatory authority. Failure to comply may result in further action by the regulatory authority.

ESTABLISHMENT	FIRM ID	DATE
Oscar's of Breckenridge		7/22/16

ITEM #	REMARKS	Method of/for Correction	CORRECT BY (MM/DD/YY)
-	This inspection was conducted as an opening inspection requested by the owner. At this time due to limited staff, this establishment is approved for bar service and limited food service.		
-	The following staff members have been cleared to work at this time.		
-	[redacted]		
-			
-			
-			
-			
-			
-			

ENVIRONMENTAL HEALTH SPECIALIST:	RECEIVED BY:

Method of/for Correction

Corrected On site (COS) ☐ **CIVCS** ☐ **Follow-up (F/U)** ☐ **Compliance Agreement (CA)** ☐

This is a Follow-up to the Inspection conducted on: _____