

Establishment Name THE FOOD SHOW (CONCESSION A)Address 801 MOUNT VERNON PL NWCity/State/Zip Code Washington, DC 20001Telephone (202) 249-3598 E-mail address dornbusch-jon@aramark.comDate of Inspection 07 / 22 / 2019 Time In 10 : 10 AM Time Out 11 : 45 AMLicense Holder Aramark Sports and Entertainment Services LL

License/Customer No. _____

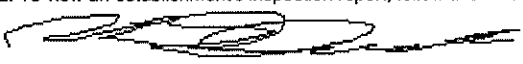
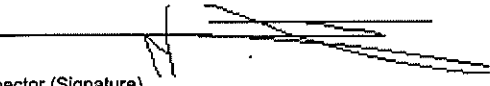
License Period / / - / / Type of Inspection Follow-upEstablishment Type: Delicatessen Risk Category 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5 ☐

Priority Violations	0	COS	0	R	0
Priority Foundation Violations	0	COS	0	R	0
Core Violations	0	COS	0	R	0
Certified Food Protection Manager (CFPM) JON DORNBUSCH					
CFPM #: <u>FS-78141</u>					
CFPM Expiration Date: <u>05/23/2020</u>					
D.C. licensed trash or solid waste contractor: <u>JLT</u>					
D.C. licensed sewage & liquid waste transport contractor: <u>Valley Proteins</u>					
D.C. licensed pesticide operator/contractor: <u>Innovative Pest Management</u>					
D.C. licensed ventilation hood system cleaning contractor: <u>Safety First Services</u>					

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS				
Compliance Status		COS		R
Supervision				
IN OUT	1. Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	2. Certified Food Protection Manager	<input type="checkbox"/>	<input type="checkbox"/>	
Employee Health				
IN OUT	3. Management, food employee, and conditional employee; knowledge, responsibilities, and reporting	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	4. Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	5. Procedures for responding to vomiting and diarrheal events	<input type="checkbox"/>	<input type="checkbox"/>	
Good Hygienic Practices				
IN OUT N/A	6. Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A	7. No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>	
Control of Hands as a Vehicle of Contamination				
IN OUT N/A	8. Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A N/A	9. No bare hand contact with RTE foods or a pre-approved alternate procedure properly allowed	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	10. Adequate handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>	
Approved Source				
IN OUT	11. Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A N/A	12. Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	13. Food in good condition, safe, and unadulterated	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A N/A	14. Required records available: shellstock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>	
Protection from Contamination				
IN OUT N/A	15. Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A	16. Food-contact surfaces: cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	17. Proper disposition of returned, previously served, reconditioned, and unsafe food	<input type="checkbox"/>	<input type="checkbox"/>	
Potentially Hazardous Food (Time/Temperature Control for Safety Food)				
IN OUT N/A N/A	18. Proper cooking time and temperatures	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A N/A	19. Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A N/A	20. Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A	21. Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A	22. Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A N/A	23. Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A N/A	24. Time as a public health control: procedures and records	<input type="checkbox"/>	<input type="checkbox"/>	
Consumer Advisory				
IN OUT N/A	25. Consumer advisory provided for raw or undercooked foods	<input type="checkbox"/>	<input type="checkbox"/>	
Highly Susceptible Populations				
IN OUT N/A	26. Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>	
Chemical				
IN OUT N/A	27. Food additives: approved and properly used	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A	28. Toxic substances properly identified, stored, and used	<input type="checkbox"/>	<input type="checkbox"/>	
Conformance with Approved Procedures				
IN OUT N/A	29. Compliance with variance, specialized process, and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>	

GOOD RETAIL PRACTICES				
Compliance Status		COS		R
Safe Food and Water				
IN OUT N/A	30. Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	31. Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A	32. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>	
Food Temperature Control				
IN OUT	33. Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A N/A	34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A N/A	35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	36. Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>	
Food Identification				
IN OUT	37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>	
Prevention of Food Contamination				
IN OUT	38. Insects, rodents, and animals not present	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	39. Contamination prevented during food preparation, storage, and display	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A	40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	41. Wiping cloths: properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A N/A	42. Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils				
IN OUT	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	44. Utensils, equipment and linens: properly stored, dried, and handled	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	45. Single-use/single-service articles: properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT N/A	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment, and Vending				
IN OUT	47. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	48. Warewashing facilities: installed, maintained, and used; test strips	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	49. Nonfood-contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities				
IN OUT	50. Hot and cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	52. Sewage and waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	53. Toilet facilities: properly constructed, supplied, and cleaned	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	54. Garbage and refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	55. Physical facilities installed, maintained, and clean	<input type="checkbox"/>	<input type="checkbox"/>	
IN OUT	56. Adequate ventilation and lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>	

IN = in compliance
N/A = not applicableOUT = not in compliance
COS = corrected on-siteN/O = not observed
R = repeat violation

OBSERVATIONS		25 DCMR	CORRECTIVE ACTIONS				
Temperatures							
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Hot Water (Handwashing Sink - kitchen)	122.0F	(Refrigerator - reach-in)	40.0F	(Refrigerator - reach-in)	36.0F	(Freezer - Reach-In)	0.0F
(Freezer - Reach-In)	10.0F	(Refrigerator - drawer)	34.0F	(Walk-in Refrigerator)	39.0F		
Inspector Comments: Violations (DCMR Title 25-A 1600.1, 1800.1) observed during the ownership-change inspection conducted on 06/06/2019 have been abated. APPROVED - no objection for the issuance Delicatessen business license. If you have question, please contact the area supervisory sanitarian Mr. Ronnie Taylor at food.safety@dc.gov . DC Health does not assign a grade, percentage, or rating for establishment inspection reports. We perform a pass-fail inspection. The amount of Priority, Priority Foundation, and Core violations are tallied at the top of each inspection report. DC Health also performs follow up inspections to ensure the violations which were cited on the initial report have been corrected. To view an establishment's inspection report, follow this link: https://dc.healthinspections.us .							
 Person-in-Charge (Signature)		Jon Dornbusch (Print)			07/22/2019 Date		
 Inspector (Signature)		Jemal Yasin (Print)			026 Badge #		07/22/2019 Date

Health Regulation and Licensing Administration • Food Safety & Hygiene Inspection Services Division • 899 North Capitol Street, NE • Washington, DC 20002

http://doh.dc.gov/service/food-safety email: food.safety@dc.gov

Establishment Name THE FOOD SHOW (CONCESSION B)

Address 801 MOUNT VERNON PL NW

City/State/Zip Code Washington, DC 20001

Telephone (202) 249-3598 E-mail address dornbusch-jon@aramark.com

Date of Inspection 07/22/2019 Time In 10:10 AM Time Out 11:45 AM

License Holder Aramark Sports and Entertainment Services LLC

License/Customer No. _____

License Period ___/___/___ - ___/___/___ Type of Inspection Follow-up

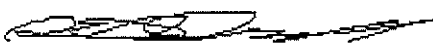
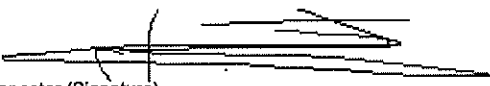
Establishment Type: Delicatessen Risk Category 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5 ☐

Priority Violations	0	COS	0	R	0
Priority Foundation Violations	0	COS	0	R	0
Core Violations	0	COS	0	R	0
Certified Food Protection Manager (CFPM) JON DORNBUSCH					
CFPM #: <u>FS-78141</u>					
CFPM Expiration Date: <u>05/23/2020</u>					
D.C. licensed trash or solid waste contractor: <u>ILT</u>					
D.C. licensed sewage & liquid waste transport contractor: <u>Valley Proteins</u>					
D.C. licensed pesticide operator/contractor: <u>Innovative Pest Management</u>					
D.C. licensed ventilation hood system cleaning contractor: <u>Safety First Services</u>					

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS			
Compliance Status		COS	R
Supervision			
IN OUT	1. Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	2. Certified Food Protection Manager	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health			
IN OUT	3. Management, food employee, and conditional employee; knowledge, responsibilities, and reporting	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	4. Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	5. Procedures for responding to vomiting and diarrheal events	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices			
IN OUT N/A	6. Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	7. No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>
Control of Hands as a Vehicle of Contamination			
IN OUT N/A	8. Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	9. No bare hand contact with RTE foods or a pre-approved alternate procedure properly allowed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	10. Adequate handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source			
IN OUT	11. Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	12. Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	13. Food in good condition, safe, and unadulterated	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	14. Required records available: shellstock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination			
IN OUT N/A	15. Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	16. Food-contact surfaces: cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	17. Proper disposition of returned, previously served, reconditioned, and unsafe food	<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food (Time/Temperature Control for Safety Food)			
IN OUT N/A N/O	18. Proper cooking time and temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	19. Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	20. Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	21. Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	22. Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	23. Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	24. Time as a public health control: procedures and records	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			
IN OUT N/A	25. Consumer advisory provided for raw or undercooked foods	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations			
IN OUT N/A	26. Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
Chemical			
IN OUT N/A	27. Food additives: approved and properly used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	28. Toxic substances properly identified, stored, and used	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures			
IN OUT N/A	29. Compliance with variance, specialized process, and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>

GOOD RETAIL PRACTICES			
Compliance Status		COS	R
Safe Food and Water			
IN OUT N/A	30. Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	31. Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	32. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control			
IN OUT	33. Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	36. Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification			
IN OUT	37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination			
IN OUT	38. Insects, rodents, and animals not present	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	39. Contamination prevented during food preparation, storage, and display	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	41. Wiping cloths: properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	42. Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils			
IN OUT	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	44. Utensils, equipment and linens: properly stored, dried, and handled	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	45. Single-use/single-service articles: properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment, and Vending			
IN OUT	47. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	48. Warewashing facilities: installed, maintained, and used; test strips	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	49. Nonfood-contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
Physical Facilities			
IN OUT	50. Hot and cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	52. Sewage and waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	53. Toilet facilities: properly constructed, supplied, and cleaned	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	54. Garbage and refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	55. Physical facilities installed, maintained, and clean	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	56. Adequate ventilation and lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>

IN = in compliance
N/A = not applicableOUT = not in compliance
COS = corrected on-siteN/O = not observed
R = repeat violation

OBSERVATIONS		25 DCMR	CORRECTIVE ACTIONS				
Temperatures							
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
(Reach-in Refrigerator)	40.0F	(Refrigerator - drawer)	36.0F	(Freezer - Reach-In)	20.0F	(Freezer - Reach-In)	25.0F
(Handwashing Sink - kitchen)	112.0F	(Walk-in Refrigerator)	40.0F				
Inspector Comments: Violations (DCMR Title 25-A 1600.1) observed during the ownership-change inspection conducted on 06/06/2019 have been abated. APPROVED - no objection for the issuance Delicatessen business license. If you have question, please contact the area supervisory sanitarian Mr. Ronnie Taylor at food.safety@dc.gov . DC Health does not assign a grade, percentage, or rating for establishment inspection reports. We perform a pass-fail inspection. The amount of Priority, Priority Foundation, and Core violations are tallied at the top of each inspection report. DC Health also performs follow up inspections to ensure the violations which were cited on the initial report have been corrected. To view an establishment's inspection report, follow this link: https://dc.healthinspections.us .							
 Person-in-Charge (Signature)		Jon Dornbusch (Print)			07/22/2019 Date		
 Inspector (Signature)		Jemal Yasin (Print)			026 Badge #		07/22/2019 Date

Establishment Name THE FOOD SHOW (CONCESSION E)

Address 801 MOUNT VERNON PL NW

City/State/Zip Code Washington, DC 20001

Telephone (202) 249-3598 E-mail address dornbusch-jon@aramark.com

Date of Inspection 07 / 22 / 2019 Time In 10 : 10 AM Time Out 11 : 45 AM

License Holder Aramark Sports and Entertainment Services LLC

License/Customer No. _____

License Period ___/___/___ - ___/___/___ Type of Inspection Follow-up


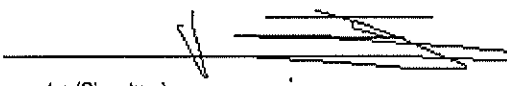
Establishment Type: Delicatessen Risk Category 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5 ☐

Priority Violations	0	COS	0	R	0
Priority Foundation Violations	0	COS	0	R	0
Core Violations	0	COS	0	R	0
Certified Food Protection Manager (CFPM) JON DORNBUSCH					
CFPM #: <u>FS-78141</u>					
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D.C. licensed ventilation hood system cleaning contractor: <u>Safety First Services</u>					

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS			
Compliance Status		COS	R
Supervision			
IN OUT	1. Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	2. Certified Food Protection Manager	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health			
IN OUT	3. Management, food employee, and conditional employee; knowledge, responsibilities, and reporting	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	4. Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	5. Procedures for responding to vomiting and diarrheal events	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices			
IN OUT N/A	6. Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	7. No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>
Control of Hands as a Vehicle of Contamination			
IN OUT N/A	8. Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	9. No bare hand contact with RTE foods or a pre-approved alternate procedure properly allowed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	10. Adequate handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source			
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IN OUT N/A N/O	12. Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>
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Protection from Contamination			
IN OUT N/A	15. Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
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IN OUT N/A N/O	20. Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	21. Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	22. Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	23. Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	24. Time as a public health control: procedures and records	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			
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Conformance with Approved Procedures			
IN OUT N/A	29. Compliance with variance, specialized process, and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>

GOOD RETAIL PRACTICES			
Compliance Status		COS	R
Safe Food and Water			
IN OUT N/A	30. Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	31. Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	32. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>
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IN OUT N/A N/O	34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	36. Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification			
IN OUT	37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination			
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IN OUT N/A	40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	41. Wiping cloths: properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	42. Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils			
IN OUT	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	44. Utensils, equipment and linens: properly stored, dried, and handled	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	45. Single-use/single-service articles: properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment, and Vending			
IN OUT	47. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	48. Warewashing facilities: installed, maintained, and used; test strips	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	49. Nonfood-contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
Physical Facilities			
IN OUT	50. Hot and cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	52. Sewage and waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	53. Toilet facilities: properly constructed, supplied, and cleaned	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	54. Garbage and refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	55. Physical facilities installed, maintained, and clean	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	56. Adequate ventilation and lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>

IN = in compliance
N/A = not applicableOUT = not in compliance
COS = corrected on-siteN/O = not observed
R = repeat violation

OBSERVATIONS		25 DCMR	CORRECTIVE ACTIONS				
Temperatures							
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Hot Water (3-compartment sink)	126.0F	(Walk-in Refrigerator)	37.0F	(Refrigerator - reach-in)	36.0F	(Refrigerator - reach-in)	36.0F
(Refrigerator - reach-in)	0.0F	Chicken (Refrigerator - reach-in) (Cold Holding)	0.0F				
Inspector Comments: Violations (DCMR Title 25-A 1600.1, 1800.1) observed during the ownership-change inspection conducted on 06/06/2019 have been abated. APPROVED - no objection for the issuance Delicatessen business license. If you have question, please contact the area supervisory sanitarian Mr. Ronnie Taylor at food.safety@dc.gov . DC Health does not assign a grade, percentage, or rating for establishment inspection reports. We perform a pass-fail inspection. The amount of Priority, Priority Foundation, and Core violations are tallied at the top of each inspection report. DC Health also performs follow up inspections to ensure the violations which were cited on the initial report have been corrected. To view an establishment's inspection report, follow this link: https://dc.healthinspections.us .							
 Person-in-Charge (Signature)		Jon Dornbusch (Print)		07/22/2019 Date			
 Inspector (Signature)		Jemal Yasin (Print)		026 Badge #		07/22/2019 Date	

Establishment Name THE FOOD SHOW (CONCESSION C)

Address 801 MOUNT VERNON PL NW

City/State/Zip Code Washington, DC 20001

Telephone (202) 249-3598 E-mail address dornbusch-jon@aramark.com

Date of Inspection 06 / 06 / 2019 Time In 11 :30 AM Time Out 01 :30 PM

License Holder Aramark Sports and Entertainment Services LLC

License/Customer No. _____

License Period ___/___/___ - ___/___/___ Type of Inspection Ownership change

Establishment Type: Delicatessen Risk Category 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5 ☐

Priority Violations	0	COS	0	R	0
Priority Foundation Violations	1	COS	1	R	0
Core Violations	2	COS	2	R	0
Certified Food Protection Manager (CFPM) JON DORNBUSCH					
CFPM #: <u>FS-78141</u>					
CFPM Expiration Date: <u>05/23/2020</u>					
D.C. licensed trash or solid waste contractor: <u>JLT</u>					
D.C. licensed sewage & liquid waste transport contractor: <u>Valley Protiens</u>					
D.C. licensed pesticide operator/contractor: <u>Innovative Pest Management</u>					
D.C. licensed ventilation hood system cleaning contractor: <u>Safety First Services</u>					

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS			
Compliance Status		COS	R
Supervision			
IN OUT	1. Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	2. Certified Food Protection Manager	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health			
IN OUT	3. Management, food employee, and conditional employee; knowledge, responsibilities, and reporting	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	4. Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	5. Procedures for responding to vomiting and diarrheal events	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices			
IN OUT N/O	6. Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/O	7. No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>
Control of Hands as a Vehicle of Contamination			
IN OUT N/O	8. Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	9. No bare hand contact with RTE foods or a pre-approved alternate procedure properly allowed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	10. Adequate handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source			
IN OUT	11. Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	12. Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	13. Food in good condition, safe, and unadulterated	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	14. Required records available: shellstock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination			
IN OUT N/A	15. Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	16. Food-contact surfaces: cleaned and sanitized	<input checked="" type="checkbox"/>	<input type="checkbox"/>
IN OUT	17. Proper disposition of returned, previously served, reconditioned, and unsafe food	<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food (Time/Temperature Control for Safety Food)			
IN OUT N/A N/O	18. Proper cooking time and temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	19. Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	20. Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	21. Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	22. Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	23. Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	24. Time as a public health control: procedures and records	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			
IN OUT N/A	25. Consumer advisory provided for raw or undercooked foods	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations			
IN OUT N/A	26. Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
Chemical			
IN OUT N/A	27. Food additives: approved and properly used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	28. Toxic substances properly identified, stored, and used	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures			
IN OUT N/A	29. Compliance with variance, specialized process, and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>

GOOD RETAIL PRACTICES			
Compliance Status		COS	R
Safe Food and Water			
IN OUT N/A	30. Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	31. Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	32. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control			
IN OUT	33. Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	36. Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification			
IN OUT	37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination			
IN OUT	38. Insects, rodents, and animals not present	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	39. Contamination prevented during food preparation, storage, and display	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	41. Wiping cloths: properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	42. Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils			
IN OUT	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	44. Utensils, equipment and linens: properly stored, dried, and handled	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	45. Single-use/single-service articles: properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment, and Vending			
IN OUT	47. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	48. Warewashing facilities: installed, maintained, and used; test strips	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	49. Nonfood-contact surfaces clean	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Physical Facilities			
IN OUT	50. Hot and cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	52. Sewage and waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	53. Toilet facilities: properly constructed, supplied, and cleaned	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	54. Garbage and refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	55. Physical facilities installed, maintained, and clean	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	56. Adequate ventilation and lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>

IN = in compliance
N/A = not applicable

OUT = not in compliance
COS = corrected on-site

N/O = not observed
R = repeat violation

OBSERVATIONS	25 DCMR	CORRECTIVE ACTIONS
16. - Light mold accumulation observed inside of the large ice machine. (PIC had an employee empty and clean the ice machine at the time of inspection.) (Corrected On Site)	1901.5	Except when dry cleaning methods are used as specified in Section 1904, surfaces of utensils and equipment in contact with food that is not potentially hazardous (time/temperature control for safety food) shall be cleaned: (a) At any time when contamination may have occurred; (b) At least every twenty-four (24) hours for iced tea dispensers and consumer self-service utensils such as tongs, scoops, or ladles; (c) Before restocking consumer self-service equipment and utensils such as condiment dispensers and display containers; and (d) In equipment such as ice bins and beverage dispensing nozzles and enclosed components of equipment such as ice makers, cooking oil storage tanks and distribution lines, beverage and syrup dispensing lines or tubes, coffee bean grinders, and water vending equipment: (1) At a frequency specified by the manufacturer; or (2) Absent manufacturer specifications, at a frequency necessary to preclude accumulation of soil or mold.
28. - Spray bottle containing a chemical cleaning solution was observed with no label containing the common name of the chemical stored inside. (PIC removed the bottle from the food preparation area at the time of inspection.) (Corrected On Site)	3302.1	Working containers used for storing poisonous or toxic materials, such as cleaners and sanitizers taken from bulk supplies shall be clearly and individually identified with the common name of the material. Pf
49. - Food debris observed on the counter near the front hand washing sink. (Employee cleaned the food debris from the counter at the time of inspection.) (Corrected On Site)	1900.3	Nonfood-contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.

Temperatures

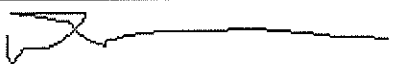
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Hot Water (Handwashing Sink)	126.0F	(Walk-in Refrigerator)	38.0F	Hot Water (3-compartment sink)	123.0F	(Under-counter Refrigerator)	34.0F
(Refrigerator - drawer)	40.0F	(Reach-in Refrigerator)	38.0F	(Reach-in Refrigerator)	38.0F		

Inspector Comments:

The DC Health Food Safety and Hygiene Inspection Services Division APPROVES this facility for the issuance of a new DELICATESSEN license at this time.

Please submit all questions/inquiries to the Area Supervisor at food.safety@dc.gov for efficient response.

DC Health does not assign a grade, percentage, or rating for establishment inspection reports. We perform a pass-fail inspection. The amount of Priority, Priority Foundation, and Core violations are tallied at the top of each inspection report. DC Health also performs follow up inspections to ensure the violations which were cited on the initial report have been corrected. To view an establishment's inspection report, follow this link: <https://dc.healthinspections.us>.

Person-in-Charge (Signature)	Jon Dornbusch (Print)	06/06/2019 Date
	Denise T. Lucas (Print)	603 Badge #
Inspector (Signature)		06/06/2019 Date

Health Regulation and Licensing Administration • Food Safety & Hygiene Inspection Services Division • 899 North Capitol Street, NE • Washington, DC 20002

http://doh.dc.gov/service/food-safety email: food.safety@dc.gov

Establishment Name CONVENTION CENTER 3RD FLOOR MAIN KITCHEN

Address 801 MOUNT VERNON PL NW

City/State/Zip Code WASHINGTON, DC 20001

Telephone (202) 249-3000 E-mail address dornbusch-jon@aramark.com

Date of Inspection 06 / 06 / 2019 Time In 11 : 30 AM Time Out 01 : 30 PM

License Holder Aramark Sports and Entertainment Services LLC

License/Customer No. _____

License Period ___/___/___ - ___/___/___ Type of Inspection Follow-up

Establishment Type: Delicatessen Risk Category 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5 ☐

Priority Violations	0	COS	0	R	0
Priority Foundation Violations	0	COS	0	R	0
Core Violations	0	COS	0	R	0
Certified Food Protection Manager (CFPM) JON DORNBUSCH					
CFPM #: <u>FS-78141</u>					
CFPM Expiration Date: <u>05/23/2020</u>					
D.C. licensed trash or solid waste contractor: JLT					
D.C. licensed sewage & liquid waste transport contractor: Valley Protiens					
D.C. licensed pesticide operator/contractor: Innovative Pest Management					
D.C. licensed ventilation hood system cleaning contractor: Safety First Services					

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS			
Compliance Status		COS	R
Supervision			
IN OUT	1. Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	2. Certified Food Protection Manager	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health			
IN OUT	3. Management, food employee, and conditional employee; knowledge, responsibilities, and reporting	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	4. Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	5. Procedures for responding to vomiting and diarrheal events	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices			
IN OUT N/O	6. Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/O	7. No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>
Control of Hands as a Vehicle of Contamination			
IN OUT N/O	8. Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	9. No bare hand contact with RTE foods or a pre-approved alternate procedure properly allowed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	10. Adequate handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source			
IN OUT	11. Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	12. Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	13. Food in good condition, safe, and unadulterated	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	14. Required records available: shellstock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination			
IN OUT N/A	15. Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	16. Food-contact surfaces: cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	17. Proper disposition of returned, previously served, reconditioned, and unsafe food	<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food (Time/Temperature Control for Safety Food)			
IN OUT N/A N/O	18. Proper cooking time and temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	19. Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	20. Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	21. Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	22. Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	23. Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	24. Time as a public health control: procedures and records	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			
IN OUT N/A	25. Consumer advisory provided for raw or undercooked foods	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations			
IN OUT N/A	26. Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
Chemical			
IN OUT N/A	27. Food additives: approved and properly used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	28. Toxic substances properly identified, stored, and used	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures			
IN OUT N/A	29. Compliance with variance, specialized process, and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>

GOOD RETAIL PRACTICES			
Compliance Status		COS	R
Safe Food and Water			
IN OUT N/A	30. Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	31. Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	32. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control			
IN OUT	33. Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	36. Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification			
IN OUT	37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination			
IN OUT	38. Insects, rodents, and animals not present	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	39. Contamination prevented during food preparation, storage, and display	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	41. Wiping cloths: properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	42. Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils			
IN OUT	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	44. Utensils, equipment and linens: properly stored, dried, and handled	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	45. Single-use/single-service articles: properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment, and Vending			
IN OUT	47. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	48. Warewashing facilities: installed, maintained, and used; test strips	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	49. Nonfood-contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
Physical Facilities			
IN OUT	50. Hot and cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	52. Sewage and waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	53. Toilet facilities: properly constructed, supplied, and cleaned	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	54. Garbage and refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	55. Physical facilities installed, maintained, and clean	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	56. Adequate ventilation and lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>

IN = in compliance
N/A = not applicableOUT = not in compliance
COS = corrected on-siteN/O = not observed
R = repeat violation

OBSERVATIONS		25 DCMR		CORRECTIVE ACTIONS			
Temperatures							
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Hot Water (3-compartment sink)	117.0F	Hot Water (Handwashing Sink)	110.0F	(Walk-in Refrigerator)	38.0F	(Walk-in Refrigerator)	37.0F
Inspector Comments: The DC Health Food Safety and Hygiene Inspection Services Division APPROVES this facility for the issuance of a new DELICATESSEN license at this time. All items abated from the previous inspection conducted on 5/31/19. (25 DCMR 3201.1, 2707.1, 2418.1, 1809.1, 1804.1, 1525.1, 3210.1) Please submit all questions/inquiries to the Area Supervisor at food.safety@dc.gov for efficient response. <small>DC Health does not assign a grade, percentage, or rating for establishment inspection reports. We perform a pass-fail inspection. The amount of Priority, Priority Foundation, and Core violations are tallied at the top of each inspection report. DC Health also performs follow up inspections to ensure the violations which were cited on the initial report have been corrected. To view an establishment's inspection report, follow this link: https://dc.healthinspections.us.</small>							
Person-in-Charge (Signature)		Jon Dornbusch (Print)			06/06/2019 Date		
Inspector (Signature)		Denise T. Lucas (Print)			603 Badge #		06/06/2019 Date

Health Regulation and Licensing Administration • Food Safety & Hygiene Inspection Services Division • 899 North Capitol Street, NE • Washington, DC 20002

http://doh.dc.gov/service/food-safety email: food.safety@dc.gov

Establishment Name THE FOOD SHOW (CONCESSION D)

Address 801 MOUNT VERNON PL NW

City/State/Zip Code Washington, DC 20001

Telephone (202) 249-3598 E-mail address dornbusch-jon@aramark.com

Date of Inspection 06 / 06 / 2019 Time In 11 : 30 AM Time Out 01 : 30 PM

License Holder Aramark Sports and Entertainment Services LLC

License/Customer No. _____

License Period ___/___/___ - ___/___/___ Type of Inspection Ownership change

Establishment Type: Delicatessen Risk Category 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5 ☐

Priority Violations	1	COS	1	R	0
Priority Foundation Violations	0	COS	0	R	0
Core Violations	1	COS	1	R	0
Certified Food Protection Manager (CFPM) JON DORNBUSCH					
CFPM #: <u>FS-78141</u>					
CFPM Expiration Date: <u>05/23/2020</u>					
D.C. licensed trash or solid waste contractor: <u>JLT</u>					
D.C. licensed sewage & liquid waste transport contractor: <u>Valley Protiens</u>					
D.C. licensed pesticide operator/contractor: <u>Innovative Pest Management</u>					
D.C. licensed ventilation hood system cleaning contractor: <u>Safety First Services</u>					

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS			
Compliance Status		COS	R
Supervision			
<u>IN</u> <u>OUT</u>	1. Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	2. Certified Food Protection Manager	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health			
<u>IN</u> <u>OUT</u>	3. Management, food employee, and conditional employee; knowledge, responsibilities, and reporting	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	4. Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	5. Procedures for responding to vomiting and diarrheal events	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices			
<u>IN</u> <u>OUT</u> <u>N/A</u>	6. Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u>	7. No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>
Control of Hands as a Vehicle of Contamination			
<u>IN</u> <u>OUT</u> <u>N/A</u>	8. Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	9. No bare hand contact with RTE foods or a pre-approved alternate procedure properly allowed	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	10. Adequate handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source			
<u>IN</u> <u>OUT</u>	11. Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	12. Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	13. Food in good condition, safe, and unadulterated	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	14. Required records available: shellstock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination			
<u>IN</u> <u>OUT</u> <u>N/A</u>	15. Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u>	16. Food-contact surfaces: cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	17. Proper disposition of returned, previously served, reconditioned, and unsafe food	<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food (Time/Temperature Control for Safety Food)			
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	18. Proper cooking time and temperatures	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	19. Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	20. Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	21. Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u>	22. Proper cold holding temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	23. Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	24. Time as a public health control: procedures and records	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			
<u>IN</u> <u>OUT</u> <u>N/A</u>	25. Consumer advisory provided for raw or undercooked foods	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations			
<u>IN</u> <u>OUT</u> <u>N/A</u>	26. Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
Chemical			
<u>IN</u> <u>OUT</u> <u>N/A</u>	27. Food additives: approved and properly used	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u>	28. Toxic substances properly identified, stored, and used	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures			
<u>IN</u> <u>OUT</u> <u>N/A</u>	29. Compliance with variance, specialized process, and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>

GOOD RETAIL PRACTICES			
Compliance Status		COS	R
Safe Food and Water			
<u>IN</u> <u>OUT</u> <u>N/A</u>	30. Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	31. Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u>	32. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control			
<u>IN</u> <u>OUT</u>	33. Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	36. Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification			
<u>IN</u> <u>OUT</u>	37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination			
<u>IN</u> <u>OUT</u>	38. Insects, rodents, and animals not present	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	39. Contamination prevented during food preparation, storage, and display	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u>	40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	41. Wiping cloths: properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u> <u>N/O</u>	42. Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils			
<u>IN</u> <u>OUT</u>	43. In-use utensils: properly stored	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	44. Utensils, equipment and linens: properly stored, dried, and handled	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	45. Single-use/single-service articles: properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u> <u>N/A</u>	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment, and Vending			
<u>IN</u> <u>OUT</u>	47. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	48. Warewashing facilities: installed, maintained, and used; test strips	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	49. Nonfood-contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
Physical Facilities			
<u>IN</u> <u>OUT</u>	50. Hot and cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	52. Sewage and waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	53. Toilet facilities: properly constructed, supplied, and cleaned	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	54. Garbage and refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	55. Physical facilities installed, maintained, and clean	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u> <u>OUT</u>	56. Adequate ventilation and lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>

IN = in compliance
N/A = not applicableOUT = not in compliance
COS = corrected on-siteN/O = not observed
R = repeat violation

OBSERVATIONS	25 DCMR	CORRECTIVE ACTIONS
22. - Cold food items are held at improper temperatures (raw sliced onions). (Food employee discarded the onions observed at improper cold holding temperatures at the time of inspection.) (Corrected On Site)	1005.1	Except during preparation, cooking, or cooling, or when time is used as the public health control as specified in Section 1009, potentially hazardous food (time/temperature control for safety food) shall be maintained: (b) At five degrees Celsius (5 degrees C) (forty-one degrees Fahrenheit (41 degrees F)) or less. P
43. - Ice scoop observed stored with the handle inside of the ice machine/bin. (PIC removed the ice scoop from inside of the ice machine during the inspection.) (Corrected On Site)	810.1	During pauses in food preparation or dispensing, food preparation and dispensing utensils shall be stored: (a) Except as specified in Section 810.1(b), in the food with their handles above the top of the food and the container; (b) In food that is not potentially hazardous (time/temperature control for safety food) with their handles above the top of the food within containers or equipment that can be closed, such as bins of sugar, flour, or cinnamon; (c) On a clean portion of the food preparation table or cooking equipment only if the in-use utensil and the food contact surface of the food preparation table or cooking equipment are cleaned and sanitized at a frequency specified in Sections 1901 and 2001; (d) In running water of sufficient velocity to flush particulates to the drain, if used with moist food such as ice cream or mashed potatoes; (e) In a clean, protected location if the utensils, such as ice scoops, are used only with a food that is not potentially hazardous (time/temperature control for safety food); or (f) In a container of water if the water is maintained at a temperature of at least fifty-seven degrees Celsius (57 degrees C) (one hundred thirty-five degrees Fahrenheit (135 degrees F)) and the container is cleaned at a frequency specified in Section 1901.3.

Temperatures

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Hot Water (3-compartment sink)	113.0F	(Walk-in Refrigerator)	37.0F	Hot Water (Handwashing Sink)	112.0F	(Reach-in Refrigerator)	34.0F
(Reach-in Refrigerator)	32.0F	Onions raw (Cold Bar) (Cold Holding)	55.0F	Hamburger cooked (Griddle) (Hot Holding)	190.0F	Onions cooked (Griddle) (Hot Holding)	195.0F
Veggie Burger (Hot Holding Cabinet) (Hot Holding)	152.0F	(Refrigerator - display)	40.0F				

Inspector Comments:

The DC Health Food Safety and Hygiene Inspection Services Division APPROVES this facility for the issuance of a new DELICATESSEN license at this time.

Please submit all questions/inquiries to the Area Supervisor at food.safety@dc.gov for efficient response.

DC Health does not assign a grade, percentage, or rating for establishment inspection reports. We perform a pass-fail inspection. The amount of Priority, Priority Foundation, and Core violations are tallied at the top of each inspection report. DC Health also performs follow up inspections to ensure the violations which were cited on the initial report have been corrected. To view an establishment's inspection report, follow this link: <https://dc.healthinspections.us>.

Person-in-Charge (Signature) Jon Dornbusch
(Print) 06/06/2019
Date

Inspector (Signature) Denise Lucas
(Print) 603
Badge # 06/06/2019
Date

Health Regulation and Licensing Administration • Food Safety & Hygiene Inspection Services Division • 899 North Capitol Street, NE • Washington, DC 20002

http://doh.dc.gov/service/food-safety email: food.safety@dc.gov

Establishment Name L2 KITCHEN & DOWNTOWN FOOD DISTRICT

Address 801 MOUNT VERNON PL NW

City/State/Zip Code WASHINGTON, DC 20002

Telephone (202) 249-3598 E-mail address dornbusch-jon@aramark.com

Date of Inspection 05 / 31 / 2019 Time In 10 : 15 AM Time Out 01 : 30 PM

License Holder Aramark Sports And Entertainment Services LLC

License/Customer No. _____

License Period ___/___/___ - ___/___/___ Type of Inspection Initial

Establishment Type: Restaurant Total Risk Category 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5 ☐

Priority Violations	0	COS	0	R	0
Priority Foundation Violations	0	COS	0	R	0
Core Violations	4	COS	2	R	0
Certified Food Protection Manager (CFPM) JON DORNBUSCH					
CFPM #: <u>FS-78141</u>					
CFPM Expiration Date: <u>05/23/2020</u>					
D.C. licensed trash or solid waste contractor: <u>JLT</u>					
D.C. licensed sewage & liquid waste transport contractor: <u>Valley Protiens</u>					
D.C. licensed pesticide operator/contractor: <u>Innovative Pest Management</u>					
D.C. licensed ventilation hood system cleaning contractor: <u>Safety First Services</u>					

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS			
Compliance Status		COS	R
Supervision			
IN OUT	1. Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	2. Certified Food Protection Manager	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health			
IN OUT	3. Management, food employee, and conditional employee; knowledge, responsibilities, and reporting	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	4. Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	5. Procedures for responding to vomiting and diarrheal events	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices			
IN OUT N/O	6. Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/O	7. No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>
Control of Hands as a Vehicle of Contamination			
IN OUT N/O	8. Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	9. No bare hand contact with RTE foods or a pre-approved alternate procedure properly allowed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	10. Adequate handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source			
IN OUT	11. Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	12. Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	13. Food in good condition, safe, and unadulterated	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	14. Required records available: shellstock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination			
IN OUT N/A	15. Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	16. Food-contact surfaces: cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	17. Proper disposition of returned, previously served, reconditioned, and unsafe food	<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food (Time/Temperature Control for Safety Food)			
IN OUT N/A N/O	18. Proper cooking time and temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	19. Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	20. Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	21. Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	22. Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	23. Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	24. Time as a public health control: procedures and records	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			
IN OUT N/A	25. Consumer advisory provided for raw or undercooked foods	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations			
IN OUT N/A	26. Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
Chemical			
IN OUT N/A	27. Food additives: approved and properly used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	28. Toxic substances properly identified, stored, and used	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures			
IN OUT N/A	29. Compliance with variance, specialized process, and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>

GOOD RETAIL PRACTICES			
Compliance Status		COS	R
Safe Food and Water			
IN OUT N/A	30. Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	31. Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	32. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control			
IN OUT	33. Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	36. Thermometers provided and accurate	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Food Identification			
IN OUT	37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination			
IN OUT	38. Insects, rodents, and animals not present	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	39. Contamination prevented during food preparation, storage, and display	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	41. Wiping cloths: properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	42. Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils			
IN OUT	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	44. Utensils, equipment and linens: properly stored, dried, and handled	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	45. Single-use/single-service articles: properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment, and Vending			
IN OUT	47. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	48. Warewashing facilities: installed, maintained, and used; test strips	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	49. Nonfood-contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
Physical Facilities			
IN OUT	50. Hot and cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	52. Sewage and waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	53. Toilet facilities: properly constructed, supplied, and cleaned	<input checked="" type="checkbox"/>	<input type="checkbox"/>
IN OUT	54. Garbage and refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	55. Physical facilities installed, maintained, and clean	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	56. Adequate ventilation and lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>

IN = in compliance
N/A = not applicableOUT = not in compliance
COS = corrected on-siteN/O = not observed
R = repeat violation

OBSERVATIONS	25 DCMR	CORRECTIVE ACTIONS
36. - Various refrigeration units observed without visible/working thermometers inside (Downtown Food Dist.). (Employee placed thermometers inside of ref. units at the time of inspection.) (Corrected On Site)	1524.2	Cold or hot holding equipment used for potentially hazardous food (time/temperature control for safety food) shall be designed to include and shall be equipped with at least one (1) integral or permanently affixed temperature measuring device that is located to allow easy viewing of the device's temperature display, except as specified in Section 1524.3.
49. - Various hand washing sinks and outsides of some cooking equipment observed unclean (Downtown Food Dist.)(CORRECT VIOLATION WITHIN 14 CALENDAR DAYS)	1903.1	Nonfood-contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.
53. - The toilet room door in the dry storage area is propped open when not in use. (Employee closed the toilet room door during the inspection.) (Corrected On Site)	3208.1	Toilet room doors as specified in Section 2911 shall be kept closed except during cleaning and maintenance operations.
56. - In various sections of the food preparation area/kitchen and dry storage areas, several of the light bulbs are not shielded or not otherwise shatter resistant. (CORRECT VIOLATION WITHIN 14 CALENDAR DAYS)	2908.1	Except as specified in Section 2908.2, light bulbs shall be shielded, coated, or otherwise shatter-resistant in areas where there is exposed food, clean equipment, utensils, linens, or unwrapped single-service and single-use articles.

Temperatures							
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
(Walk-in Refrigerator)	42.0F	(Walk-in Freezer)	-15.0F	Hot Water (3-compartment sink)	117.0F	Hot Water (Handwashing Sink)	105.0F
(Walk-in Refrigerator)	40.0F	Hot Water (Handwashing Sink)	105.0F	(Walk-in Refrigerator)	40.0F	Hot Water (Handwashing Sink)	115.0F
Hot Water (Handwashing Sink)	110.0F	(Walk-in Refrigerator)	38.0F	(Walk-in Refrigerator)	32.0F	Hot Water (Handwashing Sink)	114.0F
(Reach-in Refrigerator)	40.0F	(Reach-in Refrigerator)	32.0F				

Inspector Comments:

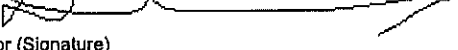
The DC Health Food Safety and Hygiene Inspection Services Division APPROVES this facility for the issuance of a new RESTAURANT license at this time.

Correct items cited within 14 days as listed within the observations section of this report.

Please submit all questions/inquires to the Area Supervisor at food.safety@dc.gov for efficient response.

DC Health does not assign a grade, percentage, or rating for establishment inspection reports. We perform a pass-fail inspection. The amount of Priority, Priority Foundation, and Core violations are tallied at the top of each inspection report. DC Health also performs follow up inspections to ensure the violations which were cited on the initial report have been corrected. To view an establishment's inspection report, follow this link: <https://dc.healthinspections.us>.

Person-in-Charge (Signature)  Jon Dornbusch
(Print) Date 05/31/2019

Inspector (Signature)  Denise T. Lucas
(Print) Badge # 603 Date 05/31/2019

Health Regulation and Licensing Administration • Food Safety & Hygiene Inspection Services Division • 899 North Capitol Street, NE • Washington, DC 20002

http://doh.dc.gov/service/food-safety email: food.safety@dc.gov

Establishment Name UPTOWN FOOD DISTRICT

Address 801 MOUNT VERNON PL NW

City/State/Zip Code WASHINGTON, DC 20002

Telephone (202) 249-3598 E-mail address dornbusch-jon@aramark.com

Date of Inspection 06 / 06 / 2019 Time In 11 : 30 AM Time Out 01 : 30 PM

License Holder Aramark Sports and Entertainment Services LLC

License/Customer No. _____

License Period / / - / / Type of Inspection Follow-up

Establishment Type: Restaurant Total Risk Category 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5 ☐

Priority Violations	0	COS	0	R	0
Priority Foundation Violations	0	COS	0	R	0
Core Violations	0	COS	0	R	0
Certified Food Protection Manager (CFPM) JON DORNBUSCH					
CFPM #: <u>FS-78141</u>					
CFPM Expiration Date: <u>05/23/2020</u>					
D.C. licensed trash or solid waste contractor: <u>JLT</u>					
D.C. licensed sewage & liquid waste transport contractor: <u>Valley Protiens</u>					
D.C. licensed pesticide operator/contractor: <u>Innovative Pest Management</u>					
D.C. licensed ventilation hood system cleaning contractor: <u>Safety First Services</u>					

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS			
Compliance Status		COS	R
Supervision			
IN OUT	1. Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	2. Certified Food Protection Manager	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health			
IN OUT	3. Management, food employee, and conditional employee; knowledge, responsibilities, and reporting	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	4. Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	5. Procedures for responding to vomiting and diarrheal events	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices			
IN OUT N/O	6. Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/O	7. No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>
Control of Hands as a Vehicle of Contamination			
IN OUT N/O	8. Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	9. No bare hand contact with RTE foods or a pre-approved alternate procedure properly allowed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	10. Adequate handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source			
IN OUT	11. Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	12. Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	13. Food in good condition, safe, and unadulterated	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	14. Required records available: shellstock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination			
IN OUT N/A	15. Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	16. Food-contact surfaces: cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	17. Proper disposition of returned, previously served, reconditioned, and unsafe food	<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food (Time/Temperature Control for Safety Food)			
IN OUT N/A N/O	18. Proper cooking time and temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	19. Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	20. Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	21. Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	22. Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	23. Proper date marking and disposition	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	24. Time as a public health control: procedures and records	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			
IN OUT N/A	25. Consumer advisory provided for raw or undercooked foods	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations			
IN OUT N/A	26. Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
Chemical			
IN OUT N/A	27. Food additives: approved and properly used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	28. Toxic substances properly identified, stored, and used	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures			
IN OUT N/A	29. Compliance with variance, specialized process, and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>

GOOD RETAIL PRACTICES			
Compliance Status		COS	R
Safe Food and Water			
IN OUT N/A	30. Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	31. Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	32. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control			
IN OUT	33. Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	36. Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification			
IN OUT	37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination			
IN OUT	38. Insects, rodents, and animals not present	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	39. Contamination prevented during food preparation, storage, and display	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	41. Wiping cloths: properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A N/O	42. Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils			
IN OUT	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	44. Utensils, equipment and linens: properly stored, dried, and handled	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	45. Single-use/single-service articles: properly stored and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT N/A	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment, and Vending			
IN OUT	47. Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	48. Warewashing facilities: installed, maintained, and used; test strips	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	49. Nonfood-contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
Physical Facilities			
IN OUT	50. Hot and cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	52. Sewage and waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	53. Toilet facilities: properly constructed, supplied, and cleaned	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	54. Garbage and refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	55. Physical facilities installed, maintained, and clean	<input type="checkbox"/>	<input type="checkbox"/>
IN OUT	56. Adequate ventilation and lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>

IN = in compliance
N/A = not applicableOUT = not in compliance
COS = corrected on-siteN/O = not observed
R = repeat violation

OBSERVATIONS		25 DCMR		CORRECTIVE ACTIONS			
Temperatures							
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Hot Water (3-compartment sink)	111.0F	Hot Water (Handwashing Sink)	107.0F	Hot Water (Handwashing Sink)	114.0F		
Inspector Comments: The DC Health Food Safety and Hygiene Inspection Services Division APPROVES this facility for the issuance of a new RESTAURANT license at this time. All items abated from the previous inspection conducted on 5/31/19. (25 DCMR 2418.1, 816.1, 3210.1, 1524.2, 1901.5, 2402.1) Please submit all questions/inquiries to the Area Supervisor at food.safety@dc.gov for efficient response. DC Health does not assign a grade, percentage, or rating for establishment inspection reports. We perform a pass-fail inspection. The amount of Priority, Priority Foundation, and Core violations are tallied at the top of each inspection report. DC Health also performs follow up inspections to ensure the violations which were cited on the initial report have been corrected. To view an establishment's inspection report, follow this link: https://dc.healthinspections.us .							
Person-in-Charge (Signature)		Jon Dornbusch (Print)			06/06/2019 Date		
Inspector (Signature)		Denise T. Lucas (Print)			603 Badge #		06/06/2019 Date