



SANITARY INSPECTION REPORT

IDENTIFICATION			
OWNER INFORMATION <i>(Complete this section only if different from establishment information)</i>		ESTABLISHMENT INFORMATION	
NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT <i>PIC - Angela</i>		ESTABLISHMENT TRADING NAME <i>Home Depot</i>	
NUMBER AND STREET		NUMBER AND STREET <i>1575 Us 22</i>	
COUNTY		MUNICIPALITY <i>Watchung</i>	ZIP CODE <i>07069</i>
MUNICIPALITY	STATE	COUNTY <i>Somerset</i>	TELEPHONE NO. <i>908-222-</i>
ZIP CODE	CO/MUN. CODE	ESTABLISHMENT STATE LICENSE NO. <i>(If Appl.)</i>	CO/MUN CODE <i>7700</i>

INSPECTION			
TYPE OF ESTABLISHMENT 1 <input checked="" type="checkbox"/> RETAIL 2 <input type="checkbox"/> OTHER <i>(Specify):</i> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	ESTABLISHMENT CODE	1 <input checked="" type="checkbox"/> INITIAL INSPECTION 2 <input type="checkbox"/> REINSPECTION <i>(other than initial inspection)</i>	
		GOODS 1 <input type="checkbox"/> DESTROYED 2 <input type="checkbox"/> EMBARGOED	TIME - (2400 HOURS)
	DATE <i>10/15/21</i>		BEGIN <i>1:10pm</i>

EVALUATION		
<input checked="" type="checkbox"/> SATISFACTORY	<input type="checkbox"/> CONDITIONALLY SATISFACTORY	<input type="checkbox"/> UNSATISFACTORY

OFFICIAL(S)		
LOCAL BOARD OF HEALTH		INSPECTING OFFICIAL
NAME, ADDRESS AND <i>(print)</i>		NAME OF INSPECTOR <i>Shahira Morell</i>
		TITLE <i>REHS</i>
TELEPHONE NUMBER <i>732-968-5151</i>		INSPECTOR'S SIGNATURE <i>Shahira Morell</i>
NAME OF HEALTH OFFICER <i>Kevin Sumner</i>	INSPECTOR'S PERM. REG. NO. <i>B-164238</i>	DATE <i>10/15/21</i>

CONTINUATION SHEET
(for Inspections, Surveys, Audits, etc.)

NAME (Individual, Facility, Establishment, etc.)	Home Depot	DATE	10/15/21
MUNICIPALITY	Watchung	TEL., CODE or ID NO.	

ITEM NO.	REMARKS
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	No Food prep is done at this location Pre-packed items: candies, chips, chocolates, drinks PIC - Angela
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	Rodent Droppings found in candy boxes on display at register area
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| | <p>* Focus Extermination in Candy Areas</p> <ul style="list-style-type: none">- Remove any candy that is damaged- Clean + disinfect candy and display shelves- Remove droppings and monitor areas more frequently for evidence of pests |
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~~Issued
Satisfactory~~

SIGNATURE OF INDIVIDUAL COMPLETING FORM

SIGNATURE OF OWNER OF FACILITY, ESTABLISHMENT, ETC., IF REQUIRED