

Food Establishment Inspection Report

Suffolk County Department of Health Services
 360 Yaphank Avenue Suite 2A
 Yaphank, NY 11980
 631-852-5999
 www.suffolkcountyny.gov/health



Date: 10/28/2021

Establishment Name WEST HOLLOW MIDDLE	Establishment Address 250 OLD EAST NECK RD	City/State MELVILLE, NY	Zip Code 11747	Telephone
Facility ID # FA0001762	Permit Holder HALF HOLLOW HILLS CSD	Purpose of Inspection Premise/Facility Inspection	Result of Inspection Follow-up Action Required	
Owner HALF HOLLOW HILLS CSD	Owner Address 525 HALF HOLLOW RD, HUNTINGTON STATION NY 11746	Permit Restrictions S	Capacity 0 seats	

IN = In Compliance OUT = Out of Compliance N/A = Not Applicable N/O = Not Observed COS = Corrected On Site R = Repeat Violation NOC = Number of Occurrences

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

SUPERVISION		COMPLY BY DATE
1	01 - PERSON IN CHARGE PRESENT, EMPLOYEES TRAINED, DEMONSTRATES KNOWLEDGE <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
EMPLOYEE HEALTH		COMPLY BY DATE
2	02 - MANAGEMENT, RESPONSIBILITY, REPORTING <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
3	03 - PROPER USE OF EXCLUSION AND RESTRICTION OF ILL FOOD WORKERS <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
GOOD HYGIENIC PRACTICES		COMPLY BY DATE
4	04 - PROPER EATING, DRINKING, TASTING, TOBACCO USE <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
PREVENTING CONTAMINATION BY HANDS		COMPLY BY DATE
5	05 - NO BARE HAND CONTACT WITH READY-TO-EAT FOODS <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
6	06 - PROPER HANDWASHING <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> COS <input type="checkbox"/> R <input checked="" type="checkbox"/> NOC 1	10/28/2021
Violation Comments:		
760-1354.1 - Adequate hand washing facilities must be provided in or immediately adjacent to toilet rooms and in food preparation areas and food service areas, used only for hand washing, and located as to permit convenient and expeditious use. These must be kept clean and equipped with hot and cold running water dispensed with a mixing faucet at a temperature of at least 100oF (38oC), hand cleansing liquid or powdered soap in suitable dispensers, and approved sanitary towels or other approved hand drying devices.		
1) THERE WAS NO PAPER TOWELS AT THE MAIN SERVICE LINE HAND WASH SINK. CORRECTIVE ACTION: PROVIDED.		
APPROVED SOURCE		COMPLY BY DATE
7	07 - FOOD OBTAINED FROM APPROVED SOURCE <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
8	08 - FOOD RECEIVED AT PROPER TEMPERATURES <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
9	09 - FOOD IN GOOD CONDITION, SAFE, UNADULTERATED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
10	10 - REQUIRED RECORDS AVAILABLE - SHELLFISH TAGS, PARASITE DESTRUCTION <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
PROTECTION FROM CONTAMINATION		COMPLY BY DATE
11	11 - FOOD SEPARATED AND PROTECTED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
12	12 - FOOD CONTACT SURFACES - CLEANED AND SANITIZED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
13	13 - PROPER DISPOSITION OF RETURNED, PREVIOUSLY SERVED AND UNSAFE FOOD <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC	
TCS FOOD TEMPERATURE/TIME		COMPLY BY DATE

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FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

TCS FOOD TEMPERATURE/TIME

COMPLY BY DATE

14	14 - PROPER COOKING TIME AND TEMPERATURES, STEM THERMOMETER AVAILABLE AND USED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
15	15 - PROPER REHEATING PROCEDURES FOR HOT HOLDING <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
16	16 - PROPER COOLING TIME AND TEMPERATURES <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
17	17 - PROPER HOT AND COLD HOLDING TEMPERATURES <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
18	18 - PROPER DATE MARKING PROCEDURES USED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
19	19 - TIME AS A PUBLIC HEALTH CONTROL - PROCEDURES AND RECORDS <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC

CONSUMER ADVISORY

COMPLY BY DATE

20	20 - CONSUMER ADVISORY PROVIDED FOR RAW AND UNDERCOOKED FOODS <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
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HIGHLY SUSCEPTIBLE POPULATIONS

COMPLY BY DATE

21	21 - PASTEURIZED FOODS USED, PROHIBITED FOODS NOT OFFERED <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
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CHEMICAL

COMPLY BY DATE

22	22 - FOOD ADDITIVES - APPROVED AND PROPERLY USED <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
23	23 - CHEMICALS AND TOXIC MATERIALS STORED AND USED PROPERLY <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
24	24 - PERSONAL MEDICATIONS PROPERLY STORED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC

CONFORMANCE WITH APPROVED PROCEDURES

COMPLY BY DATE

25	25 - COMPLIANCE WITH VARIANCE PROCEDURES <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
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ADDITIONAL IMMEDIATE HEALTH HAZARDS THAT MAY CONTRIBUTE TO FOODBORNE ILLNESS

COMPLY BY DATE

26	26 - RUNNING WATER PROVIDED WHERE REQUIRED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
27	27 - SEWAGE AND WASTEWATER PROPERLY DISPOSED <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC

SAFE FOOD, WATER AND ICE

COMPLY BY DATE

28	28 - WATER AND ICE FROM APPROVED SOURCES <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input type="checkbox"/> NOC
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GOOD RETAIL PRACTICES

FOOD PROTECTED, CONTAMINATION PREVENTED

COMPLY BY DATE

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GOOD RETAIL PRACTICES

FOOD PROTECTED, CONTAMINATION PREVENTED

COMPLY BY DATE

36	36 - CONTAMINATION PREVENTED <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input checked="" type="checkbox"/> COS <input type="checkbox"/> R <input checked="" type="checkbox"/> NOC 1	11/11/2021
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Violation Comments:

760-1315.c - No food or drink shall be manufactured, prepared, stored, transported, distributed, sold or given away in any package or container showing evidence of leaking, swelling, pronounced dents, corrosion or otherwise of such condition as may render the product unwholesome or exposed to adulteration or potential contaminants. Upon receipt, temperature-controlled for safety (TCS) food shall be free of evidence of previous temperature abuse. (1) Products that are held by the permit holder for credit, redemption, or return to the distributor, such as damaged, spoiled, or recalled products, shall be segregated and held in designated areas that are separated from food, equipment, utensils, linens, and single-service and single-use articles.

1) ONE # 10 CAN OF PINTO CANS WAS/WERE FOUND ON CANNED STORAGE SHELVING IN THE STORAGE ROOM WITH A DENTED LID.

CORRECTIVE ACTION: MOVED TO AREA FOR CANS TO BE RETURNED TO VENDOR FOR CREDIT.

UTENSILS, EQUIPMENT, WAREWASHING

COMPLY BY DATE

42	42 - SINGLE USE, SINGLE SERVICE ARTICLES <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input checked="" type="checkbox"/> NOC 1	11/11/2021
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Violation Comments:

760-1346.14.k.1 - Single service articles shall be stored above the floor on clean shelves or racks and in closed containers or cartons and shall be protected from contamination.

1) SINGLE-SERVICE TO-GO CONTAINERS WERE STORED AT THE SERVICE LINE FACE UP AND WERE SUBJECT TO CONTAMINATION.

43	43 - NON-FOOD CONTACT SURFACES CLEAN, MAINTAINED, IN GOOD REPAIR <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input checked="" type="checkbox"/> NOC 1	11/11/2021
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Violation Comments:

760-1345.1 - Equipment and utensils shall be so designed and of such material and workmanship as to be smooth, easily cleanable, and durable, and shall be in good repair or shall be discarded; and the food contact surfaces of such equipment and utensils shall, in addition, be easily accessible for cleaning, nontoxic, corrosion resistant, relatively nonabsorbent and shall conform to approved design and construction standards.

1) THE ONE DOOR TRAUlsen REACH IN REFRIGERATOR NEAREST THE DRY STORAGE ROOM WAS NOTED NOT WORKING AT THE TIME OF INSPECTION.

PHYSICAL FACILITIES

COMPLY BY DATE

48	48 - GARBAGE AND REFUSE PROPERLY DISPOSED, FACILITIES MAINTAINED <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O <input type="checkbox"/> COS <input type="checkbox"/> R <input checked="" type="checkbox"/> NOC 1	11/11/2021
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Violation Comments:

760-1355.1 - All garbage and refuse containing food wastes shall, prior to disposal, be kept in durable, leakproof, nonabsorbent containers or compactors which shall be kept covered with tight fitting lids when filled or stored, or not in continuous use. Drains in receptacles and waste handling units for garbage and refuse shall have drain plugs in place. Rooms, enclosures, areas and containers, including dumpsters and other commercial containers shall be properly constructed and adequate in size for the storage of all food waste, refuse, recyclables and returnables accumulating on the premises, and shall be located separately from food, equipment, utensils, linens, and single service and single-use articles, and so that a public health hazard or nuisance is not created..

1) THE GARBAGE DUMPSTER WAS OPEN AND UNCOVERED, AND WAS NOT IN CONTINUOUS USE AT THE TIME OF INSPECTION.

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Overall Inspection Comments:

THERMOMETER/THERMOCOUPLE ID #840
 HELMY BADR, SAN ID# 840 AND
 SARA KURTZ, SAN ID# 825
 Suffolk County Department of Health Services
 Food Control Unit
 360 Yaphank Avenue, Suite 2A
 Yaphank, NY 11980
 Phone: (631) 852-5848
 Fax: (631) 852-5871

Inspection results are available online at <http://eco.suffolkcountyny.gov/#/pa1/search>

Risk Factors cited in consecutive inspections may result in enforcement action, including a possible hearing and fine.

THE FOOD MANAGER'S COURSE IS AVAILABLE ONLINE IN ENGLISH, SPANISH AND CHINESE!

To register for the Food Manager's course, please visit <https://apps2.suffolkcountyny.gov/Health/FdOnline/default.aspx>. Suffolk County FMC App for mobile devices is also available from Google Play and in the Apple Store.

Suffolk County Local Law 29-2009 amended Chapter 437 (now Chapter 754) of the Suffolk County Code to prohibit "heating or ignition of an e-cigarette which creates a vapor" in all public places. The use of "E-CIGARETTES" IN ALL ESTABLISHMENTS WITH A SUFFOLK COUNTY FOOD PERMIT IS PROHIBITED, SUBJECT TO ALL PROVISIONS OF THE NY STATE CLEAN INDOOR AIR ACT AND SUFFOLK COUNTY LOCAL LAW.

EMPLOYEE SICK POLICY WAS DISCUSSED DURING THE INSPECTION:

- Person in charge was reminded that all sick employees MUST be excluded from food service. No sick employee is permitted to return to work until they have been symptom-free for at least 24 hours. Certain illnesses require that employees are tested prior to returning to work, even if symptom-free. Contact the Bureau of Public Health Protection for details. A log must be kept on-site documenting the exclusion of ill employees.

Schools:

TODAYS INSPECTION WAS LIMITED TO THE KITCHEN, SERVING LINES, STORAGE AREAS, WAREWASHING AREA, AND CAFETERIA. FOOD SERVICE BEYOND THESE AREAS WERE NOT INSPECTED AND ARE NOT "COVERED" UNDER THE FOOD SERVICE PERMIT ISSUED BY THIS AGENCY. FOOD SERVICE SUCH AS BUT NOT LIMITED TO OUTDOOR BBQS, SPORT FIELD CONCESSIONS, CLUBS LIKE DECA OR SWIM CLUBS, SCHOOL STORES AND FUND RAISING EVENTS THAT INVOLVE FOOD SERVICE MAY REQUIRE A SEPARATE PERMIT OR TEMPORARY EVENT PERMIT. CONTACT THIS DEPARTMENT OR VISIT THE COUNTY WEBSITE FOR APPLICATIONS/QUESTIONS. OPERATING WITHOUT A PERMIT IS SUBJECT TO LEGAL ACTION.

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Signatures

 Helmy Badr

Helmy.Badr@suffolkcountyny.gov

"The items noted above are violations of applicable laws, rules and regulations found during an inspection of the operation of the facilities in this establishment which must be corrected as indicated. Failure to comply may result in the initiation of legal action against this establishment as provided for in Articles 2 and 13 of the Suffolk County Sanitary Code including a hearing, possible suspension of your food operation, and/or the publication of the violation and fines."



STEVEN BELLONE
 SUFFOLK COUNTY EXECUTIVE

GREGSON H. PIGOTT, MD, MPH
 COMMISSIONER