



12 South Center Street
Bensenville, IL 60106

Office: 630.350.3404
Fax: 630.350.3438
www.bensenville.il.us

VILLAGE BOARD

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Nancy Quinn

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February 15, 2022

Mr. Franco Ruelas
751 Easy Street
Glendale Heights, Illinois 60139

Re: February 12, 2022 FOIA Request

Dear Mr. Ruelas:

I am pleased to help you with your February 12, 2022 Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on February 14, 2022. You requested copies of the items indicated below:

"Food Safety Compliance inspection Report, Building Code Enforcement inspection Report, County/Sanitarian inspection Report, and any other relevant documents."

After a search of Village files, the following information was found responsive to your request:

- 1) DuPage County Health Department Risk Category Assessment Inspection Report (2 pgs.)
- 2) DuPage County Health Department Food Establishment Inspection Report. (3 pgs.)
- 3) Village of Bensenville Correction Notice for Inspection No. 90117. (2 pgs.)


These are all the records found responsive to your request.

Section 7(1)(b) of FOIA provided that "private information" is exempt from disclosure. "Private information" is defined in FOIA as, "unique identifiers, including a person's social security number, driver's license number, employee identification number, biometric identifiers, personal financial information, passwords, or other access codes, medical records, home or personal telephone numbers, and personal email addresses. Private information also includes home address and personal license plates, except as otherwise provided by law or when compiled without possibility of attribution to any person." 5ILCS 140/2(c-5). Consequently, certain identifiers have been redacted from the records being provided.

Pursuant to Section 9 of the FOIA, 5 ILCS 140/9, I am required to advise you that I, the undersigned Freedom of Information Officer, reviewed and made the foregoing determination to deny a portion of your FOIA Request as indicated. Should you believe that this Response constitutes an improper denial of your request, you may appeal such by filing a request for review within sixty (60) days of the date of this letter with the Public Access Counselor of the Illinois Attorney General's Office, Public Access Bureau, 500 South Second Street, Springfield, Illinois 62706; telephone 1-887-299-FOIA; e-mail: publicaccess@atg.state.il.us. You may also have a right of judicial review of the denial under Section 11 of the FOIA, 5 ILCS 140/11.

Do not hesitate to contact me if you have any questions or concerns in connection with this response.

Very truly yours,


Corey Williamsen
Freedom of Information Officer
Village of Bensenville

NAME OF ESTABLISHMENT
FRANCESCO'S BROS PIZZERIA INC.
LICENSE HOLDER
VALENTIN RAYO

ADDRESS
1207 W IRVING PARK RD

CITY
BENSENVILLE

PURPOSE OF INSPECTION
CFPM/RISK CATEGORY ASSESSMENT

LICENSE NO.
PT0000451

RISK CATEGORY
Category I

ESTABLISHMENT #
PR0000451

STATUS
Risk Category I

A Risk Factor Inspection is scheduled to occur once yearly to determine which risk category a food establishment falls into. There are 3 categories that an establishment could fall into. If an establishment has any of the category 1 qualifications it will fall into a category 1 no matter how many qualifications it has for the other two categories.

CATEGORY I FOOD ACTIVITIES

- 1 ☒ Cooling of potentially hazardous foods
Facility is cooling sauces and soups.
- 2 ☐ Preparing and holding (hot or cold) far in advance
- 3 ☐ Extensive handling of raw ingredients
- 4 ☒ Reheating potentially hazardous foods
Facility is reheating TCS foods such as sauces and soups.
- 5 ☐ Preparing food for off-site service
- 6 ☐ Vacuum packaging
- 7 ☐ Serving of immunocompromised individuals

CATEGORY II FOOD ACTIVITIES

- 8 ☐ Preparing foods for service from raw ingredients
- 9 ☐ Hot or cold holding is restricted to same day
- 10 ☐ Foods requiring complex preparation are obtained

CATEGORY III FOOD ACTIVITIES

- 11 ☐ Only pre-packaged foods are available or served
- 12 ☐ Potentially hazardous foods are pre-packaged
- 13 ☐ Only beverages are served

Education and Field Visit Comments

Person in Charge
(Signature)

Guillermina Rayo

Guillermina Rayo

Time of inspection: 12:05 pm to 12:20 pm

Inspector
(Signature)

Rickeita Wiley

Rickeita Wiley

Follow up date:

Date of inspection 01/21/2022

NAME OF ESTABLISHMENT

FRANCESCO'S BROS PIZZERIA INC.

WATER SUPPLY

PUBLIC

WASTEWATER SYSTEM

PUBLIC

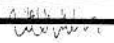

ESTABLISHMENT #

PR0000451

Certified Food Protection Manager (CFPM) present at the time of risk assessment. Risk type assessed at the time of inspection. No changes required. Facility will remain a high risk.

CFPM: Guillermina Rayo
Certificate Number: #17866120
Exp: 5/15/2024

| Certifications | | |
|------------------|-----------------|------------------|
| Name | Expiration Date | Certification ID |
| GUILLERMINA RAYO | 07/10/2018 | 01439397 |

| | | | |
|---------------------------------|---|------------------|---|
| Person in Charge (Signature) |  | Guillermina Rayo | Time of inspection: 12:05 pm to 12:20 pm |
| Inspector (Signature) |  | Rickeita Wiley | Follow up date: Date of inspection 01/21/2022 |



DUPAGE COUNTY HEALTH DEPARTMENT

En route. Everywhere. Everyday.

FOOD ESTABLISHMENT INSPECTION REPORT

NAME OF ESTABLISHMENT

FRANCESCO'S BROS PIZZERIA INC.

ADDRESS

1207 W IRVING PARK RD

CITY

BENSENVILLE

LICENSE HOLDER

VALENTIN RAYO

PURPOSE OF
INSPECTION

AUDIT

LICENSE NO.

PT0000451

RISK CATEGORY

Category I

ESTABLISHMENT #

PR0000451

STATUS

PASS

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury. Risk factors require immediate correction.

IN = In Compliance OUT = Not In Compliance N/O = Not Observed N/A = Not Applicable

Mark an "X" in appropriate box for COS and/or R. COS = Corrected on-site during an inspection R = Repeat Violation

| # | Compliance Status | | COS | R | # | Compliance Status | | COS | R |
|--|-------------------|--|-----|---|--|-------------------|--|-----|---|
| Supervision | | | | | Protection from Contamination | | | | |
| 1 | IN | Person in charge present, demonstrates knowledge, and performs duties | | | 15 | IN | Food separated and protected | | |
| 2 | IN | Certified Food Service Sanitation Manager | | | 16 | IN | Food-contact surfaces; cleaned and sanitized | | |
| Employee Health | | | | | Time/Temperature Control for Safety | | | | |
| 3 | IN | Management, food employee and conditional employee; knowledge, responsibilities, and reporting | | | 17 | IN | Proper disposition of returned, previously served, reconditioned and unsafe food | | |
| 4 | IN | Proper use of restriction and reporting | | | 18 | N/O | Proper cooking time and temperatures | | |
| 5 | IN | Procedures for responding to vomiting and diarrheal events | | | 19 | N/O | Proper reheating procedures for hot holding | | |
| Good Hygienic Practices | | | | | Consumer Advisory | | | | |
| 6 | N/O | Proper eating, tasting, drinking, or tobacco use | | | 20 | N/O | Proper cooling time and temperatures | | |
| 7 | IN | No discharge from eyes, nose, and mouth | | | 21 | IN | Proper hot holding temperatures | | |
| Preventing Contamination by Hands | | | | | Highly Susceptible Populations | | | | |
| 8 | IN | Hands clean and properly washed | | | 22 | IN | Proper cold holding temperatures | | |
| 9 | IN | No bare hand contact with RTE food or a pre-approved alternative procedure allowed | | | 23 | IN | Proper date marking and disposition | | |
| 10 | OUT | Adequate handwashing sinks properly supplied and accessible | | X | 24 | N/A | Time as a Public Health Control; procedures and records | | |
| Approved Source | | | | | Food/Color Additives and Toxic Substances | | | | |
| 11 | IN | Food obtained from approved source | | | 25 | IN | Consumer advisory provided for raw/under cooked food | | |
| 12 | N/O | Food received at proper temperature | | | Conformance with Approved Procedures | | | | |
| 13 | IN | Food in good condition, safe, and unadulterated | | | 26 | N/A | Pasteurized foods used; prohibited foods not offered | | |
| 14 | N/A | Required records available: shell stock tag, parasite destruction | | | 27 | N/A | Food additives: approved and properly used | | |
| | | | | | 28 | IN | Toxic substances properly identified, stored, and used | | |
| | | | | | 29 | N/A | Compliance with variance/specialized process/HACCP | | |

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the additions of pathogens, chemicals, and physical objects found in food.

Mark an "X" in appropriate box for COS and/or R. COS = corrected on-site during inspection, R = repeat violation

| # | Compliance Status | | COS | R | # | Compliance Status | | COS | R |
|---|-------------------|---|-----|---|--|-------------------|--|-----|---|
| Safe Food and Water | | | | | Proper Use of Utensils | | | | |
| 30 | N/A | Pasteurized eggs used where required | | | 43 | IN | In-use utensils: properly stored | | |
| 31 | IN | Water and ice from approved source | | | 44 | IN | Utensils, equipment, & linens properly stored, dried, and handled | | |
| 32 | N/A | Variance obtained for specialized processing methods | | | 45 | IN | Single-use/single-service articles: properly stored and used | | |
| Food Temperature Control | | | | | Utensils, Equipment and Vending | | | | |
| 33 | N/O | Proper cooling methods used; adequate equipment for temperature control | | | 46 | IN | Gloves used properly | | |
| 34 | N/O | Plant food properly cooked for hot holding | | | 47 | IN | Food and non-food contact surfaces cleanable, properly designed, constructed, and used | | |
| 35 | N/O | Approved thawing methods used | | | 48 | IN | Ware washing facilities: installed, maintained, and used; test strips | | |
| 36 | OUT | Thermometers provided and accurate | | X | 49 | IN | Non-food contact surfaces clean | | |
| Food Identification | | | | | Physical Facilities | | | | |
| 37 | IN | Food properly labeled; original container | | | 50 | IN | Hot and cold water available; adequate pressure | | |
| Prevention of Food Contamination | | | | | Employee Training | | | | |
| 38 | IN | Insects, rodents, and animals not present | | | 51 | IN | Plumbing installed; proper back flow devices | | |
| 39 | IN | Contamination prevented during food preparation, storage, and display | | | 52 | IN | Sewage and waste water properly disposed | | |
| 40 | IN | Personal cleanliness | | | 53 | N/O | Toilet facilities: properly constructed, supplied, and cleaned | | |
| 41 | OUT | Wiping cloths: properly used and stored | | X | 54 | N/O | Garbage and refuse properly disposed; facilities maintained | | |
| 42 | N/O | Washing fruits and vegetables | | | 55 | OUT | Physical facilities installed, maintained, and clean | | |
| | | | | | 56 | OUT | Adequate ventilation and lighting; designated areas used | | |
| | | | | | 57 | OUT | All food employees have food handler training | | |

Based on an inspection this day, the items marked identify violations of the DuPage County Food Safety Code. Failure to correct these violations within the time specified may result in legal action under the Enforcement provisions of the code.

Person in Charge

(Signature)

Guillermina Rayo

Time of inspection: 10:45 am to 12:05 pm

Inspector
(Signature)

Rickeita Wiley

Follow up date:

Date of inspection 01/21/2022

NAME OF ESTABLISHMENT
FRANCESCO'S BROS PIZZERIA INC.

WATER SUPPLY
PUBLIC

WASTEWATER SYSTEM
PUBLIC

ESTABLISHMENT #
PR0000451

| Measured Observations | | |
|------------------------------------|--------------------|----------|
| Item/Location | Measurement | Comments |
| Grilled Chicken/Walk-In Cooler | 41.00° Fahrenheit | |
| Raw Sausage/Pizza Prep Cooler | 39.00° Fahrenheit | |
| Pizza Sauce/Pizza Prep Cooler | 36.00° Fahrenheit | |
| Sausage Pizza/Hot Holding | 171.00° Fahrenheit | |
| Cut Tomatoes/Prep Cooler | 40.00° Fahrenheit | |
| Meatballs/Hot Holding | 156.00° Fahrenheit | |
| Marinara/Hot Holding | 147.00° Fahrenheit | |
| Chlorine/Three Comp Sink | 50.00 PPM | |
| Ambient Air/Two Door Freezer | -10.00° Fahrenheit | |
| Education and Field Visit Comments | | |

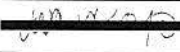
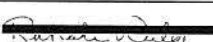
Certified Food Protection Manager (CFPM) present at the time of inspection.

CFPM: Guillermina Rayo
Certificate Number: 17866120
Exp: 5/15/2024

Allergen Training Non Compliant (A CFPM must complete an ANSI approved allergen training by 4/21/2022 or send proof of certification to rickeita.wiley@dupagehealth.org when obtained).

Facility is financially compliant.

| Observations and Corrective Actions | | |
|-------------------------------------|---|------------|
| Item Number | Unless otherwise noted: Priority (P) violations to be corrected within 72 hours, or corrected on site (COS). Priority Foundation (Pf) violations to be corrected within 10 days, or corrected on site (COS). All Core (C) violations to be corrected by next routine inspection (NRI). | Correct By |

| | | |
|---|------------------|---|
| Person in Charge (Signature)  | Guillermina Rayo | Time of inspection: 10:45 am to 12:05 pm |
| Inspector (Signature)  | Rickeita Wiley | Follow up date: Date of inspection 01/21/2022 |

NAME OF ESTABLISHMENT

FRANCESCO'S BROS PIZZERIA INC.

WATER SUPPLY

PUBLIC

WASTEWATER SYSTEM

PUBLIC

ESTABLISHMENT #

PR0000451

OUT 10 Adequate handwashing sinks, properly supplied and accessible

(Pf) Disposable paper towels are not provided at the hand washing sink in the dish washing area. Provide disposable paper towels at hand washing sinks. Reference 6-301.12. PIC provided paper towels. COS.

OUT 36 Thermometers provided and accurate

(C) A thermometer is not provided in the pizza prep cooler. Cold/Hot holding equipment used for Time/Temperature Control for Safety food shall have at least one thermometer in an easily viewed location. Reference 4-204-112.

OUT 41 Wiping cloths; properly used and stored

(C) Wet in-use wiping cloths are not stored properly in the kitchen area. Cloths used for wiping spills shall be maintained dry. Cloths used to wipe surfaces and equipment shall be held in proper sanitizer solution. Cloths in-use for wiping surfaces in contact with raw animal foods shall be kept separate from cloths used for other purposes. In-use cloths must be laundered daily. Reference 3-304.14.

OUT 55 Physical facilities installed, maintained, and clean

(C) Mop was found stored incorrectly in-between use. Mops shall be placed in a position that allows them to air-dry without soiling walls, equipment, or supplies. Reference 6-501.16.

OUT 56 Adequate ventilation and lighting; designated areas used

(C) Lighting in the walk-in cooler area was found to be insufficient. Light intensity shall be sufficient so that the area, all utensils, equipment, and food items are easily visible. Reference 6-303.11 (A, B, C).

OUT 57 All food employees have food handler training

Food allergen awareness training

58 (C) Facility is not in compliance with the food allergen awareness training requirement. Certified food protection managers (CFPMs) working in a Category 1 (High Risk) restaurant must complete additional allergen training using an approved allergen awareness training program that is accredited by the American National Standards Institute (ANSI). Certificate of course completion must be kept at the establishment and made available to the health inspector upon request. Reference 410 ILCS 625

CFPM Verification

| Name | Expiration Date | Certification ID |
|--------------------|-----------------|------------------|
| GUILLERMINA RAYO | 07/10/2018 | 01439397 |
| HACCP Topic | | |

No HACCP Topic Reviewed

| | | Repeat Violations | | |
|-----------------------|-----|----------------------|----------------------|------|
| Count of Violation(s) | | 0-5 | 6-10 | 11+ |
| FBI Risk Factors | 0-3 | Pass | Pass with Conditions | Fail |
| | 4-5 | Pass with Conditions | Pass with Conditions | Fail |
| | 6+ | Fail | Fail | Fail |

| | | | |
|---|----------------------|------|------------|
| Number of Risk Factor/Intervention Violations | | 1 | |
| Number of Repeat Violations | | 2 | |
| Choose one below | | | |
| <input checked="" type="radio"/> Pass | Pass with Conditions | Fail | Circle One |

Person in Charge
(Signature)

Guillermina Rayo

Guillermina Rayo

Time of inspection: 10:45 am to 12:05 pm

Inspector
(Signature)

Rickeita Wiley

Rickeita Wiley

Follow up date:

Date of inspection 01/21/2022



VILLAGE OF BENSENVILLE
INSPECTIONAL SERVICES
 12 South Center
 Bensenville, IL 60106
 630-350-3413 fax:630-350-3449

Type of Inspection: NON-RESIDENTIAL INSPECTION

CORRECTION NOTICE

Address: 1207 IRVING PARK

Unit:

Business name:: FRANCESCO'S BROS., INC.

Phone: [REDACTED]

Business Owner: VALENTIN RAYO

Address: 1207 WEST IRVING PARK ROAD BENSENVILLE, IL

Inspection Date: 1/21/2022

Inspector: DON TESSLER

| <u>Checklist #</u> | <u>Violation</u> | <u>Violation comment</u> |
|--------------------|---------------------------------|---|
| 060C | MEANS OF EGRESS BLOCKED | |
| 060F | IMPROPER HOLD OPEN DEVICES | Back Exit door block by storage and screen door. |
| 090A | CLEAN AND SANITIZE AREA | Need some general cleaning and sanitize the unit. |
| 090D | REPLACE CEILING TILES | Ceiling tiles need replace, and clean all grease from ceiling grid. |
| 090G | CLEAN HOOD SUPPRESSION/DUCTWORK | The hood and duct system needs cleaning. |
| 120G | NEED ACCESS TO ELECTRIC PANEL | Need access to electrical panel, keep 36" clear space around panel. |
| 160M | EXTINGUISHERS INACCESSIBLE | |
| 165M | REPLACE HEAT DETECTOR | Replace grease covered heat detector on the ceiling. |

Additional Remarks/Comments:

Re-inspection 02/23/2022

Reinspection 90118 created on 01/21/2022 by 6523dtes

THOSE ITEMS LISTED ABOVE ARE VIOLATIONS OF BENSENVILLE'S ADOPTED VILLAGE CODE AND/OR PROPERTY MAINTENANCE CODE. THIS IS YOUR WRITTEN "CORRECTION NOTICE". FAILURE TO CORRECT THE ABOVE LISTED VIOLATIONS WITHIN THE PRESCRIBED TIME CAN RESULT IN A FINE OF UP TO \$750 PER VIOLATION, PER DAY.

You are hereby notified to remedy the conditions as stated above within 30 days.

Neither this inspection nor any Certificate of Occupancy issued by the Village of Bensenville shall be considered a complete list of Code or Municipal Ordinances. Our inspection can be substantially limited by access available and stored items or furniture. Some occupancies may require inspections to be completed on individual systems such as heating appliances, roofing, structure or fire protection systems. If you have questions about this inspection, please call 630-350-3413.

DISCLAIMER: The Village of Bensenville does not warrant the condition of any property inspected and disclaims all liability for any claims arising out of the property or condition thereof.



VILLAGE OF BENSENVILLE
INSPECTIONAL SERVICES
12 South Center
Bensenville, IL 60106
630-350-3413 fax:630-350-3449

Type of Inspection: NON-RESIDENTIAL INSPECTION

CORRECTION NOTICE

Address: 1207 IRVING PARK

Unit:

Business name:: FRANCESCO'S BROS., INC.

Phone:

Business Owner: VALENTIN RAYO

Address: 1207 WEST IRVING PARK ROAD BENSENVILLE, IL

Inspection Date: 1/21/2022

Inspector: DON TESSLER

E-mailed 01/21/2022

Copy of this report received by/mailed to:

Inspector: Donald Tessler

Date: 01/21/2022