



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 Hypocoreon By F.G. Lynch			ESTABLISHMENT TRADING NAME Five Guys Burgers + fries		
NUMBER AND STREET 552 Elm St			NUMBER AND STREET 1701 Blue Star Shopping Ctr. US Hwy 22		
COUNTY Union County			MUNICIPALITY Watchung		ZIP CODE
MUNICIPALITY Westfield		STATE NJ	COUNTY Somerset		TELEPHONE NO.
ZIP CODE 07090	CO/MUN. CODE		ESTABLISHMENT STATE LICENSE NO. (If Appl.)		CO/MUN CODE
INSPECTION					
TYPE OF ESTABLISHMENT 1 <input checked="" type="checkbox"/> RETAIL 2 <input type="checkbox"/> OTHER (Specify): 3 <input type="checkbox"/> 4 <input type="checkbox"/>		ESTABLISHMENT CODE		1 <input type="checkbox"/> INITIAL INSPECTION 2 <input type="checkbox"/> REINSPECTION (other than initial inspection)	
		GOODS 1 <input type="checkbox"/> DESTROYED 2 <input type="checkbox"/> EMBARGOED		TIME - (2400 HOURS)	
				DATE	END
				1/25/22	10:00 HRS - 10:30 HRS
EVALUATION					
<input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> CONDITIONALLY SATISFACTORY <input type="checkbox"/> UNSATISFACTORY <i>pre-opening - New Owner</i>					
OFFICIAL(S)					
LOCAL BOARD OF HEALTH			INSPECTING OFFICIAL		
NAME, ADDRESS AND (print) Middle-Brook Reg. Health Com 111 Green Brook Rd Green Brook NJ			NAME OF INSPECTOR Robyn Kay		
TELEPHONE NUMBER (732) 968-5151 x2			TITLE Sr. R.E.H.S.		
NAME OF HEALTH OFFICER K.G. Summer			INSPECTOR'S SIGNATURE <i>Robyn Kay</i>		DATE
			INSPECTOR'S PERM. REG. NO. B-1649		

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

NAME (Individual, Facility, Establishment, etc.) 5 Guys Burgers + Fries	DATE 1/25/22
MUNICIPALITY Waltham	TEL., CODE or ID NO.

ITEM NO.	REMARKS
SAT	Front Customer Counter Area. Refrigerator temperatures are satisfactory. - Hand sink area - satisfactory. - Service Area Clean - - Shake machine is disassembled and sanitized regularly.
Good	Walk in Refrigerators - satisfactory temp. Satisfactory condition + storage.
note	Back Hand Kitchen Area - Clean + Satisfactory.
note	Bathrooms are satisfactory.
note	Waltham Town Admin Board of Health - Damaris - (908) 756-0080 x211 213
Satisfactory	

SIGNATURE OF INDIVIDUAL COMPLETING FORM 	SIGNATURE OF OWNER OF FACILITY, ESTABLISHMENT, ETC., IF REQUIRED Philip Miranda
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