



Village of  
**Elmwood Park**

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Gina Pesko  
Village Clerk  
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Anthony Del Santo  
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Jonathan L. Zivojnovic

Ms. Ashley Grear  
5325 W. Ferdinand St.  
Chicago, Il 60644  
greaashl@my.dom.edu

March 30, 2017

RE: Freedom of Information Act Request

Dear Mrs. Grear,

The Village of Elmwood Park is in receipt of your March 29, 2017, Freedom of Information Act (5 ILCS 140/1 et seq.) ("FOIA") for the following records:

**"Johnnies Beef (Health Record) 7500 W. North Ave, Elmwood Park, Il 60707"**

Enclosed are copies of the records you requested. However, please be advised that certain information in the records being provided has been determined to be exempt from disclosure under FOIA, and that information has been redacted from the records being provided.

Section 7 (1)(b) of FOIA provides 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 id number, biometric identifiers, personal financial information, passwords or other access codes, medical records, home or personal telephone numbers, and personal email addresses." Section 7(1)(c) of FOIA provides that, "personal information contained within public records, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy is exempt from disclosure. Consequently, birthdates and other personal information, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy, such as the victim's name and identifying information, have been redacted from the records being provided.

In accordance with Section 9(a) of FOIA, you are hereby notified that you have the right to file a Request for Review regarding the decision made by the Village of Elmwood Park Freedom of Information Officer with the Public Access Counselor at the Illinois Attorney General's Office.

You can file your Request for Review with the Public Access Counselor by writing to:

Sarah Pratt  
Public Access Counselor  
Office of the Attorney General  
500 South 2nd Street  
Springfield, Illinois 62706  
Fax: 217-782-1396  
E-mail: [publicaccess@atg.state.il.us](mailto:publicaccess@atg.state.il.us)

If you choose to file a Request for Review with the Public Access Counselor, you must do so within 60 calendar days of the date of this letter. Please note that you must include a copy of your original FOIA request and this letter when filing a Request for Review with the Public Access Counselor. You are also notified that you have the right to judicial review regarding the decision made by the Village of Elmwood Park Freedom of Information Officer pursuant to Section II of FOIA.

Should you have any questions, please do not hesitate to contact my office.

Gina Pesko



Village Clerk  
Freedom of Information Officer  
708-452-3948

# VILLAGE OF ELMWOOD PARK

Type of Establishment  
 Food Service Establishment  
 Retail Food Store  
 Temporary  
 Mobile

Sanitary Inspection Report  
 Food Service Establishment  
 630-863-4078

Reason for Inspection  
 Routine  Recheck  
 Complaint  License

Name of Establishment Johnnie's Beef Address 7500 W. North Ave  
 Owner or Operator Scott Malorny Phone 708-452-6000

Based on an inspection this day, the items marked below identify the violation in operation or facilities which must be corrected by the next routine inspection or such shorter period of time as may be specified in writing by the health authority. Failure to comply with this notice may result in immediate suspension of your permit.

\* = Indicates Critical Items Requiring Immediate Correction.

ITEM	X	WT	DESCRIPTION	ITEM	X	WT	DESCRIPTION	ITEM	X	WT	DESCRIPTION
<b>FOOD</b>											
*1		5	Source, Wholesome, No Spoilage	*20		4	Sanitization rinse: clean, temperature, concentration.				<b>FLOORS, WALLS AND CEILINGS.</b>
2		1	Original Container, Properly Labeled	(21)		1	Wiping cloths: clean, use restricted	36		1	Floors: constructed, drained, clean, good repair, covering installation, dustless cleaning methods
<b>FOOD PROTECTION</b>											
*3		5	Potentially hazardous food, meets, temperature requirements during storage preparation, display, service and transportation	22		2	Food-contact surfaces of equipment/utensils clean, free of abrasives and detergents	37		1	Walls, ceiling, attached equipment: constructed, good repair, clean surfaces, dustless cleaning methods
*4		4	Facilities to maintain product temperature	23		1	Non-food contact surfaces of equipment and utensils clean	<b>LIGHTING</b>			
5		1	Thermometers provided and conspicuous	24		1	Storage, handling of clean equipment/utensils	38		1	Lighting provided as required, fixtures shielded
6		2	Potentially hazardous food properly thawed	25		1	Single-service articles, storage, dispensing	<b>VENTILATION</b>			
*7		4	Unwrapped and potentially hazardous food not reserved CROSS CONTAMINATION	26		2	No re-use of single-service articles	39		1	Rooms and equipment - vented as required
8		2	Food protection during storage, preparation, display, service and transportation	<b>WATER</b>				<b>DRESSING ROOMS</b>			
9		2	Handling of food (ice) minimized, methods	*27		5	Water source, safe: hot and cold under pressure	40		1	Rooms clean, lockers provided, facilities clean
10		1	Food (ice) dispensing utensils properly stored	<b>SEWAGE</b>				<b>OTHER OPERATIONS</b>			
<b>PERSONNEL</b>											
*11		5	Personnel with infections restricted	*28		4	Sewage and waste water disposal	*41		5	Toxic items properly stored, labeled and used
*12		5	Hands washed and clean, good hygienic practices	<b>PLUMBING</b>				42		1	Premises: maintained, free of litter, unnecessary articles, cleaning/maintenance equipment properly stored, authorized personnel
13		1	Clean clothes, hair restraints	29		1	Installed, maintained	43		1	Complete separation from living/sleeping quarters, laundry
<b>FOOD EQUIPMENT AND UTENSILS</b>											
14		2	Food (ice) contact surfaces: designed, constructed, maintained, installed, located	*30		5	Cross-connection, back siphonage, back flow	44		1	Clean, soiled linen properly stored
15		1	Non-Food contact surfaces: designed, constructed, maintained, installed, located	<b>TOILET AND HAND-WASHING FACILITIES</b>				45			Management personnel certified Yes <u>X</u> No <u>      </u>
16		2	Dishwashing facilities: designed, constructed, maintained, installed, located, operated	*31		4	Number, convenient, accessible, designed, installed	46			Public restroom clean and sanitary Yes <u>N/A</u> No <u>      </u>
17		1	Accurate Thermometers, chemical test kits provided, gauge clock	32		2	Toilet rooms enclosed, self-closing doors, fixtures, good repair, clean: Hand cleanser sanitary towels/hand drying devices provided, proper waste receptacles, issue	47			Dumpster/grease barrel properly enclosed Yes <u>X</u> No <u>      </u>
18		1	Pre-flushed, scraped, soaked	<b>GARBAGE AND REFUSE DISPOSAL</b>				48			No smoking section in dining room provided Yes <u>N/A</u> No <u>      </u>
19		2	Wash, rinse water: clean, proper temperature	*33		2	Containers or receptacles covered: adequate number, insect/rodent proof, frequency, clean	49			Bartenders properly licensed Yes <u>N/A</u> No <u>      </u>
<b>INSECT, RODENT, ANIMAL CONTROL</b>											
				*35		4	Presence of insects/rodents, outer openings protected, no birds, turtles, other animals				

Temperatures: Temp/PPM Chemical 3-Compartment 100ppm Reqs 50ppm Hot Foods 156 Sausage Cold Foods 32 Soft Drinks 41F  
 Manager Certification No.: 03/25/19 01141364 161 Popcorn 162 Candy 170 Beef Back 2 Room Candy 40F

ITEM	Remarks and Recommendations For Corrections	CORRECTED BY
(8)	Store all food at least 6" above the floor to protect from contamination	
(21)	Failure to store wiping cloths in sanitizing solution between uses.	
(32)	Absence of hand cleaner and sanitary towel/hand drying device in restroom	

Report and Instructions Received By (Signature) (Signature of Owner or Representative)  
 Date 9/7/16 Time 1110 A.M. 1140 P.M. Sanitation Score 95% (100 Minus Demerits)

(Report must be posed on premises.)  
 Page 1 of 1 By \_\_\_\_\_ (Inspector)