



GOVERNMENT OF GUAM

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



LOURDES A. LEON GUERRERO
GOVERNOR, MAGAYTAGU

JOSHUA F. TENORIO
LT. GOVERNOR, SIGUNDO MAGALAN

ARTHUR U. SAN AGUSTIN, MHR
ACTING DIRECTOR

LAURENT SF OUENAS, MPH, BSN
DEPUTY DIRECTOR

JOSEPHINE T. O'MALLAN
DEPUTY DIRECTOR

Date: 7/14/20

LUCKY 700

Name of Establishment

As a result of this inspection your establishment received a:

☐ LETTER OF WARNING

(Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. If we do not receive a written re-inspection request from you, we will conduct a follow-up inspection after ten (10) calendar days from the official receipt of this notice to ensure that corrective measures have been taken.

Failure to correct violations may result in the closure of your establishment pursuant to section 21109(b) of 10GCA, Chapter 21.

☒ NOTICE OF CLOSURE

NO CERTIFIED MANAGER

(Demerit/Grade Points)

Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. Unlike an establishment who has received a letter of warning, an establishment shall remain closed unless a written request for re-inspection is made. Under 10 GCA Ch. 21 §21109(b), suspension without prior hearing may be imposed until the violation is corrected. You may also request a hearing to the Division of Environmental Health within five (5) calendar days of the date of this notice. When a hearing is requested following a suspension without prior hearing, it shall be discretionary with the Director as to whether the suspension shall be continued pending the hearing.

We look forward to working closely with you as partners in promoting health and sanitary practices on Guam. If you need further assistance, you can reach us at 300-9579 or (fax) 300-9577. Si Yu'us Ma'ase.

Sincerely,

ARTHUR U. SAN AGUSTIN, MHR
FOR: Acting Director

Issued By: J. CAUZ / R. RABAGO
Name of EPHO

Received By: TRANG NGUYEN
Establishment Representative

Department of Public Health & Social Services ITC Building Ste 219
590 S. Marine Corps Drive, Tamuning, Guam 96913-3532
www.dphss.guam.gov

Revised 07/14/2020

Department of Public Health and Social Services
Division of Environmental Health

Food Establishment Inspection Report

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ESTABLISHMENT NAME LUCKY TOO		LOCATION (Address) LUT 2024-1 NEW 4 BLDG. #525 Y160
INSPECTION DATE 7/14/20	SANITARY PERMIT NO. 200760518	PERMIT HOLDER TUYVE M. ALKINS CORPORATION
ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	
	CORRECT BY/DATE	

Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

	§4415 of the Health Certificate Regulations states, "...every eating and drinking establishment and food establishment...shall have a designated manager or supervisor who shall be certified under the provisions of these rules and regulations...(and) is a requirement in addition to, and not in lieu of, a Health Certificate."	
	10 GCA Ch. 21 Section 21109(a) (Suspension and Revocation of Permit) states, "A permit may be suspended by the Director pursuant to §21107(2)(d) or upon the violation by the holder or by a person in his employ or under his supervision or control of any of the provisions of this Part.	
	10 GCA Ch. 21 Section 21109(b) states, "Suspension of a permit may be imposed without prior hearing in the discretion of the Director by giving written notice thereof to the holder, in which case, the holder shall have five (5) days within which to request a hearing. Suspension without prior hearing may be imposed for such time until the violation is corrected, or may be imposed as a penalty for repeated violations, in which case, it shall not exceed five (5) days, or may be imposed pending a hearing under Subsections (c) or (d) of this Section. When a hearing is requested following a suspension without prior hearing, it shall be discretionary with the Director as to whether the suspension shall be continued pending the hearing." Hearings shall be conducted according to the Administrative Adjudication Law.	
	An establishment without a manager with a valid certificate of Management Certification shall result in the suspension of its permit. This is a written notice that your permit is hereby suspended.	
	Provided the Person-in-Charge (PIC) with the following:	
	Press Release No. 2018-070 Certificate of Manager's Certification requirement for all retail food facilities dated August 6, 2018.	
	Posted "Notice of Closure" placard	
	Discussed inspection report with the PIC	
	Issued "Notice of Closure" letter	
	Issued Follow-up inspection request form	
	A re-instatement fee of \$100.00 shall be paid to the Department of Public Health and Social Services upon successful completion of a Follow-up inspection.	

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign) TRUNG NGUYEN	Date: 07-14-2020
DEH Inspector (Print and Sign) J. CRUZ EPHO I / R. RABALA	Date: 7/14/20

**Department of Public Health and Social Services
Division of Environmental Health
Food Establishment Inspection Report**

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INSPECTION	RSN	TYPE	GRADE	INSPECTION DATE	ESTABLISHMENT NAME
Regular	<input checked="" type="checkbox"/>		<u>7/12</u>	<u>7.14.20</u>	<u>LUCILEY TOO</u>
Follow-up				TIME IN	TIME OUT
Complaint			RATING	<u>8:00pm</u>	<u>8:30pm</u>
Investigation			<u>7/12</u>	SANITARY PERMIT NO.	PERMIT HOLDER
Other:				<u>200700514</u>	<u>TUVEY M. ALKINS CORPORATION</u>
ESTABLISHMENT TYPE				AREA	TELEPHONE
<u>BAR</u>				<u>1</u>	<u>653-3771</u>
				No. of Risk Factor/Intervention Violations	RISK CATEGORY
				<u>1</u>	<u>2</u>
				No. of Repeat Risk Factor/Intervention Violations	
				<u>N/A</u>	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status				COS	R	PTS
Supervision						
1	IN	OUT	Person in charge present, demonstrates knowledge, and performs duties			6
Employee Health						
2	IN	OUT	Management awareness; policy present			6
3	IN	OUT	Proper use of reporting, restriction & exclusion			6
Good Hygienic Practices						
4	IN	OUT	N/A	N/O	Proper eating, tasting, drinking, betelnut, or tobacco use	6
5	IN	OUT	N/A	N/O	No discharge from eyes, nose, and mouth	6
Preventing Contamination by Hands						
6	IN	OUT	N/A	N/O	Hands clean and properly washed	6
7	IN	OUT	N/A	N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed	6
8	IN	OUT			Adequate handwashing facilities supplied & accessible	6
Approved Source						
9	IN	OUT			Food obtained from approved source	6
10	IN	OUT	N/A	N/O	Food received at proper temperature	6
11	IN	OUT			Food in good condition, safe, and unadulterated	6
12	IN	OUT	N/A	N/O	Required records available: shellstock tags, parasite destruction	6
Protection from Contamination						
13	IN	OUT	N/A		Food separated and protected	6
14	IN	OUT	N/A		Food contact surfaces: cleaned & sanitized	6
15	IN	OUT			Proper disposition of returned, previously served, reconditioned, and unsafe food	6
Potentially Hazardous Food (TCS Food)						
16	IN	OUT	N/A	N/O	Proper cooking time and temperatures	6
17	IN	OUT	N/A	N/O	Proper reheating procedures for hot holding	6
18	IN	OUT	N/A	N/O	Proper cooling time and temperatures	6
19	IN	OUT	N/A	N/O	Proper hot holding temperatures	6
20	IN	OUT	N/A		Proper cold holding temperatures	6
21	IN	OUT	N/A	N/O	Proper date marking and disposition	6
Consumer Advisory						
22	IN	OUT	N/A		Consumer Advisory provided for raw or undercooked foods	6
Highly Susceptible Populations						
23	IN	OUT	N/A		Pasteurized foods used; prohibited foods not offered	6
Chemical						
24	IN	OUT	N/A		Food additives: approved and properly used	6
25	IN	OUT			Toxic substances properly identified, stored, used	6
Conformance with Approved Procedures						
26	IN	OUT	N/A		Compliance with variance, specialized process, and HACCP plan	6

Risk factors are improper 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.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box: If numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status				COS	R	PTS
Safe Food and Water						
27			Pasteurized eggs used where required			1
28			Water and Ice from approved source			2
29			Variance obtained for specialized processing methods			1
Food Temperature Control						
30			Proper cooling methods used; adequate equipment for temperature control			1
31			Plant food properly cooked for hot holding			1
32			Approved thawing methods used			1
33			Thermometer provided and accurate			1
Food Identification						
34			Food properly labeled; original container			1
Prevention of Food Contamination						
35			Insects, rodents, and animals not present			2
36			Contamination prevented during food preparation, storage & display			1
37			Personal cleanliness			1
38			Wiping cloths: properly used and stored			1
39			Washing fruits and vegetables			1
Proper Use of Utensils						
40			In-use utensils: properly stored			1
41			Utensils, equipment and linens: properly stored, dried, handled			1
42			Single-use/single-service articles: properly stored, used			1
43			Gloves used properly			1
Utensils, Equipment and Vending						
44			Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			1
45			Warewashing facilities: installed, maintained, used; test strips			1
46			Nonfood-contact surfaces clean			1
Physical Facilities						
47			Hot & cold water available, adequate pressure			2
48			Plumbing installed; proper backflow devices			2
49			Sewage and wastewater properly disposed			2
50			Toilet facilities: properly constructed, supplied, & cleaned			2
51			Garbage/refuse properly disposed; facilities maintained			2
52			Physical facilities installed, maintained, and clean			1
53			Adequate ventilation and lighting: designated areas use			1
Documents and Placards						
54			Sanitary Permit, Health Certificates valid and posted			2

I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.	Date: <u>07.14.2020</u>
Person in Charge (Print and Sign) <u>TRUNG NGUYEN</u>	Follow-up (Circle one): <u>YES</u> NO
DEH Inspector (Print and Sign) <u>J. CRUZ / R. RABALD ECHO ADMIN</u>	Follow-up Date: <u>7/21/20</u>



DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIVISION OF ENVIRONMENTAL HEALTH
**PUBLIC AND PRIVATE PREMISES
INSPECTION REPORT**

DBA. Lucky Too

NAME: (OWNER, LESSEE, OCCUPANT, ETC.)

Tuyet M. Atkins Corp.

ADDRESS: Lot #, street name, house/apt. #, building name:

Lot 7024-1 New 4 Bldg # 525

INSPECTION/INVESTIGATION DATE:

07/14/2020

COMPLAINT #:

190

MUNICIPALITY/VILLAGE; SUBDIVISION:

Yigo

THE FOLLOWING CHECKED ITEMS REPRESENT VIOLATIONS OF THE CORRESPONDING SECTIONS OF TITLE 10, GUAM CODE ANNOTATED

SECTION #	REMARKS		
	An assessment of the above-mentioned facility was conducted on this day to determine compliance with DPHSS Guidance Memorandum 2020-25 (June 22, 2020) during the COVID-19 emergency.		
	The following violations were observed and deemed a public nuisance:		
		Corrected on the Spot (COS)	Repeat
<input type="checkbox"/>	1. Failed to require and enforce mandatory use of face masks with employees/customers.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	2. Failed to enforce social distancing of a minimum of 6 feet between individuals in the interior and exterior premises of the property of the business.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	3. Failed to post appropriate signage for face masks and social distancing.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	4. Failed to have a policy in place for the frequent cleaning of all surfaces.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	5. Failed to have and present an organization-specific guidance plan in place.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	6. Failed to properly maintain the required occupant load of <u>25</u> .	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	7. Failed to adhere to the authorized number for social gatherings on business premises.	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	8. Failed to adhere to the requirements outlined in DPHSS Guidance Memorandum	<input type="checkbox"/>	<input type="checkbox"/>
	<u>2020-23</u>		
	Section 20106 (Title 10 Guam Code Annotated, Chapter 20) authorizes Department of Public Health & Social Services to conduct inspections of all public and private grounds, buildings, & other places to enforce & order the immediate abatement of the public nuisance. Businesses that fail to comply with applicable & current Executive Orders and/or Public Health Guidances shall be deemed a public nuisance under Chapter 20, Title 10, of the Guam Code Annotated which are misdemeanors, if found guilty.		
	Observations/Findings: <input type="checkbox"/> N/A		

YOU ARE HEREBY GIVEN _____ DAYS _____ HOURS TO CORRECT THE ABOVE CITED PROBLEMS.

YOUR PROPERTY WILL BE REINSPECTED ON OR ABOUT _____

(DATE)

RECEIVED BY (Print & Sign):

TRUNG NGUYEN

DEH INSPECTOR (Print & Sign):

Rosanna RubenJAMES CRUZEPHO AdminEPHO I R




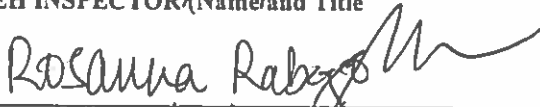
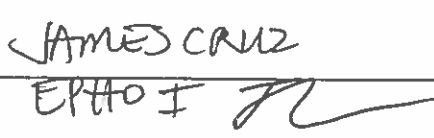
GOVERNMENT OF GUAM

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIATLOURDES A. LEON GUERRERO
GOVERNOR, MAGALAHAIJOSHUA F. TENORIO
LT. GOVERNOR, SIGUNDO MAGALAHAILAURENT SF DUENAS, MPH, BSN, RN
ACTING DIRECTORJOSEPHINE T. O'MALLAN
DEPUTY DIRECTORCOMPLIANCE CHECKLIST FOR BARS AND TAVERNS
BASED ON EXECUTIVE ORDER 2020-20, 2020-16, 2020-14,
DPHSS GUIDANCE MEMO 2020-07, 2020-12, and 2020-23

Name of Establishment: Lucky Too Company Name: Tuyet M. Alkins Corp.
 Location: Lot 7024 - 1 New 4 Bldg. #525 Yigo

Item No.	Criteria	Comments	In Compliance with Executive Order and Industry Guidance	
General Requirements				
1	Has a written policy and procedures for COVID-19 prevention and control measures prior to re-opening, which address the following:		Yes	No
	a. Employee health, to include having a plan in place if someone is or becomes sick		Yes	No
	b. Cleaning/sanitizing procedures		Yes	No
	c. Social distancing and other protective measures		Yes	No
2	Operates at no more than the authorized occupancy rate	25 PAX	Yes	No
3	Suspends organized events such as fundraising event, tournament, etc.		Yes	No
4	Prohibits the use of game equipment such as game machines, pool tables, dart boards and other areas where people may congregate that have high-touch surfaces	All game eqpt covered	Yes	No
5	Prohibits the use of dance floor	N/A	Yes	No
6	Follows the requirement of the Guam Food Code that also applies to COVID-19 mitigation:		Yes	No
	a. Prohibiting sick employees in the workplace		Yes	No
	b. Strict handwashing practices, to include when and how		Yes	No
	c. Strong procedures and practices to clean and sanitize surfaces		Yes	No
	d. PIC is on site and is a certified food manager		Yes	No
Employee Health				
7	Screens employees and patrons before entering the facility		Yes	No
8	Possesses adequate supplies to support healthy hygienic behaviors		Yes	No
9	Posted signage for employees and patrons on good hygiene and sanitation practices		Yes	No
Cleaning and Disinfection				
10	Has a cleaning and disinfection procedures and schedule in place for common areas, highly touch surfaces, and the entire establishment		Yes	No
11	Regularly disinfects liquor bottles, pour stations, taps, ice coops, etc.		Yes	No
12	Clean silverware, dishes, and glasses are protected or placed in a covered area.		Yes	No

13	Toilet facilities and handwashing sinks are thoroughly and regularly cleaned and disinfected.		Yes	No
14	Possesses adequate cleaning and disinfection products for both employees and patrons		Yes	No
15	Follows CDC's cleaning and disinfecting guidelines		Yes	No
	Ventilation			
16	Maximizes fresh air through use of existing ventilation system		Yes	No
17	Minimizes air from fans blowing from one person directly at another individual		Yes	No
	Social Distancing and Other Protective Measures			
18	Implements social distancing of at least 6 feet and posting of appropriate signage		Yes	No
19	Limits the number of customers in the bar at one time		Yes	No
20	Posted signage at entrance stating that no one with COVID-19 symptoms is permitted inside		Yes	No
21	For live music, ensures there is ample distance (6-foot min.) between musicians and customers	n/a	Yes	No
22	Appropriate physical barriers are in place for booth seating	n/a	Yes	No
	For congregations or social gatherings:		Yes	No
23	a. Total number of people, including employees, do not exceed the capacity permitted in the most recent E.O. (including private rooms)		Yes	No
	b. Total number of people in each party do not exceed the number allowed for congregations or social gatherings in most recent E.O.		Yes	No
24	Mandating the wearing of face mask		Yes	No
25	Provides hand sanitizers for guests to use at entrances and other designated locations		Yes	No

RECEIVED BY (Name and Title)		DATE
 TRANG NGUYEN		07-14-2020
DEH INSPECTOR (Name and Title)		DATE
 ROSANNA RABY DEH Administrator		07/14/2020
 JAMES CRUZ EPHO I		

Business License # 30-000912321-001
 SRL # 2029179; Exp. 9/30/2020.