## Retail Food Report

**Facility:** KONOMI RESTAURANT **Facility ID:** 18625
**Owner:** KONOMI, INC.
**Street:** 843 QUARRY RD
**City/State:** CORALVILLE, Iowa
**Zip:** 52241 **County:** Johnson
**Phone:** (319) 721-3279
**Organization:** Johnson County Public Health
855 S Dubuque Street, Suite 113, Iowa City, IA, 52240

**Program:** 45874 - Food Service Establishment License
**Insp. ID:** 105660
**Insp. Start Date:** 11/6/2026 8:15 AM CST
**Insp. End Date:** 11/6/2026 8:18 AM CST
**Insp. Reason:** Follow Up

## FOODBORNE ILLNESS RISK FACTORS

**IN = In compliance, OUT = Not in compliance, N/O = Not observed, N/A = Not applicable, (*) = Critical, COS = Corrected On Site**

| Number | Line Item | Response | Number | Line Item | Response |
|---|---|---|---|---|---|
| 1 | Person in charge present, demonstrates knowledge, and performs duties | N/O | 16 | Food contact surfaces: cleaned and sanitized | N/O |
| 2 | Certified Food Protection Manager | N/O | 17 | Proper disposition of returned, previously served, reconditioned, and unsafe food | N/O |
| 3 | Management, food employee and conditional employee knowledge, responsibilities and reporting | N/O | 18 | Proper cooking time and temperatures | N/O |
| 4 | Proper use of exclusions and restrictions | N/O | 19 | Proper reheating procedures of hot holding | N/O |
| 5 | Procedures for responding to vomiting and diarrheal events | N/O | 20 | Proper cooling time and temperatures | N/O |
| 6 | Proper eating, tasting, drinking, or tobacco use | N/O | 21 | Proper hot holding temperatures | N/O |
| 7 | No discharge from eyes, nose, and mouth | N/O | 22 | Proper cold holding temperatures | N/O |
| 8 | Hands clean and properly washed | N/O | 23 | Proper date marking and disposition | N/O |
| 9 | No bare hand contact with ready to eat foods | N/O | 24 | Time as a public health control: procedures and records | N/O |
| 10 | Hand washing sinks properly supplied and accessible | N/O | 25 | Consumer advisory provided for raw or undercooked foods | N/O |
| 11 | Foods obtained from an approved source | N/O | 26 | Pasteurized foods used; prohibited foods not offered | N/O |
| 12 | Foods received at proper temperatures | N/O | 27 | Food additives: approved, properly stored, and used | N/O |
| 13 | Food in good condition, safe, and unadulterated | N/O | 28 | Toxic substances properly identified, stored and used | N/O |
| 14 | Required records available; shellstock tags, parasite destruction | N/O | 29 | Compliance with variance, specialized process, reduced oxygen packaging criteria, and HACCP plan | N/O |
| 15 | Food separated and protected (Cross Contamination and Environmental) | N/O | | | |

## GOOD RETAIL PRACTICES

| Number | Line Item | Response |
|---|---|---|
| 30 | Pasteurized eggs used where required | N/O |
| 31 | Water and ice from approved source | N/O |
| 32 | Variance obtained for specialized processing methods | N/O |
| 33 | Proper cooling methods used; adequate equipment for temperature control | N/O |
| 34 | Plant food properly cooked for hot holding | N/O |
| 35 | Approved thawing methods | N/O |
| 36 | Thermometers provided and accurate | N/O |
| 37 | Food properly labeled; original container | N/O |
| 38 | Insects, rodents, and animals not present/outer openings protected | N/O |
| 39 | Contamination prevented during food preparation, storage and display | N/O |
| 40 | Personal cleanliness | N/O |
| 41 | Wiping cloths: properly used and stored | N/O |
| 42 | Washing fruits and vegetables | N/O |
| 43 | In use utensils: properly stored | N/O |
| 44 | Utensils, equipment, and linens: properly stored dried and handled | N/O |
| 45 | Single-use/single service articles: properly stored and used | N/O |
| 46 | Slash-resistant and cloth glove use | N/O |
| 47 | Food and non-food contact surfaces are cleanable, properly designed, constructed, and used | N/O |
| 48 | Warewashing facilities: installed, maintained, and used; test strips | N/O |
| 49 | Non-food contact surfaces clean | N/O |
| 50 | Hot and Cold water available; adequate pressure | N/O |
| 51 | Plumbing installed; proper backflow devices | N/O |
| 52 | Sewage and waste water properly disposed | N/O |
| 53 | Toilet facilities; properly constructed, supplied, and cleaned | N/O |
| 54 | Garbage and refuse properly disposed; facilities maintained | N/O |
| 55 | Physical facilities installed, maintained, and clean | N/O |
| 56 | Adequate ventilation and lighting; designated areas used | N/O |
| 57 | Licensing; posting licenses and reports; smoking | N/O |

## OBSERVATIONS AND CORRECTIVE ACTIONS

No comments exist for this report

## PUBLISHED COMMENTS

Follow up inspection was completed on report ID# 105663.

## SIGNATURE PAGE

| Name | Title | Signature | Date |
|---|---|---|---|
| Laura Schutte | Environmental Health Specialist |  | 11/6/2026 |

**Person In Charge Declined to Sign**