



# South Carolina Department of Agriculture

Hugh E. Weathers, Commissioner

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803-896-0640 | agriculture.sc.gov

## Retail Food Establishment Inspection Report

**Insp Date:** 2/23/2026      **Business ID:** zz002742  
**Business:** Fancy That! Bistro & Catering LLC  
 1825 St Julian Place

**Inspection:** B3000934  
**Permit #:** 32-206-08756  
**Phone:** 803 779-6110

Columbia, SC 29204  
**Points:** 76

**Reason:** 01. Routine  
**Results:** C

### Establishment Information

Permit # 32-206-08756 Risk Level Yes Owner \_\_\_\_\_ Virtual

### Foodborne Illness Risk Factors & Interventions

IN = In Compliance; OUT = Out of Compliance; NA = Not Applicable; NO = Not Observed; CV = Consecutive Violation

#### Supervision

1. PIC present, demonstration, certification, performance      IN   OUT   NA   NO   CV  
           

- |                   |              |   |
|-------------------|--------------|---|
| <i>Fail Notes</i> | 2-102.11     | <i>Priority Foundation; Demonstration<br/>Additional reference - 2-103.11(A-N) - Responsibilities of the PIC.<br/>[Priority violations noted at time of inspection. Not Corrected -<br/>Verification Required.]</i> |
|                   | 2-102.12 (B) | <i>Core; Food Handler (FH)<br/>[PIC does not possess a CFH certification/CFH certification not<br/>verified.]</i>   |
|                   | 2-102.12(A)  | <i>Core; Certified Food Protection Manager (CFPM)<br/>[PIC does not possess a CFPM certification/CFPM certification not<br/>verified.]</i>  |

#### Employee Health

2. Management; employee knowledge; responsibilities and reporting      IN   OUT   NA   NO   CV  
           

3. Proper use of reporting, restriction, and exclusion      IN   OUT   NA   NO   CV  
           

#### Employee Good Hygienic Practices

4. Proper eating, tasting, drinking, or tobacco use      IN   OUT   NA   NO   CV  
           

5. No discharge from eyes, nose, or mouth      IN   OUT   NA   NO   CV  
           

#### Preventing Contamination by Hands

6. Hands clean and properly washed      IN   OUT   NA   NO   CV  
           

7. No bare-hand contact with RTE foods      IN   OUT   NA   NO   CV  
           

8. Handwashing sinks supplied and accessible      IN   OUT   NA   NO   CV  
           

- |                   |          |  |
|-------------------|----------|--|
| <i>Fail Notes</i> | 6-301.11 | <i>Priority Foundation; Handwashing Cleanser - Availability<br/>[No handwashing cleanser at kitchen hand sink. Corrected - Verification<br/>Required.]</i> |
|-------------------|----------|--|

#### Approved Source

9. Food obtained from approved source      IN   OUT   NA   NO   CV

## Retail Food Establishment Inspection Report

### Approved Source

- |   | IN                    | OUT                              | NA | NO                               | CV                       |
|---|-----------------------|----------------------------------|----|----------------------------------|--------------------------|
| 10. Food received at proper temperature             | <input type="radio"/> | <input type="radio"/>            |    | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 11. Food in good condition, safe, and unadulterated | <input type="radio"/> | <input checked="" type="radio"/> |    |                                  | <input type="checkbox"/> |

**This item has Media/Attachments. See Footnote 1 at end of questionnaire.**

*Fail Notes* | 3-101.11 *Priority; Safe, Unadulterated and Honestly Presented*  
*[Observed fuzzy growth on limes, cooked beans, and cream of chicken stored with in-use inventory in walk-in cooler. Observed meat chubs in bloated packaging. Not Corrected - Verification Required.]*

- |  |                       |                       |                                  |                       |                          |
|--|-----------------------|-----------------------|----------------------------------|-----------------------|--------------------------|
| 12. Required records available: shell stock tags, parasite destruction | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> |
|--|-----------------------|-----------------------|----------------------------------|-----------------------|--------------------------|

### Protection from Contamination

- |  |                                  |                                  |                       |                       |                          |
|--|----------------------------------|----------------------------------|-----------------------|-----------------------|--------------------------|
| 13. Food separated and protected                 | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> |
| 14. Food-contact surfaces: cleaned and sanitized | <input type="radio"/>            | <input checked="" type="radio"/> |                       |                       | <input type="checkbox"/> |

**This item has Media/Attachments. See Footnote 2 at end of questionnaire.**

*Fail Notes* | 4-601.11(A) *Priority Foundation; Equipment, Food Contact Surfaces, and Utensils - Shall be clean to sight and touch*  
*[Observed food debris on utensils stored as clean. Not Corrected - Verification Required.]*

- |   |                                  |                       |  |  |                          |
|---|----------------------------------|-----------------------|--|--|--------------------------|
| 15. Proper disposition of returned, previously served, reconditioned, and unsafe food | <input checked="" type="radio"/> | <input type="radio"/> |  |  | <input type="checkbox"/> |
|---|----------------------------------|-----------------------|--|--|--------------------------|

### Time/Temperature Control for Safety (TCS Food)

- |   |                                  |                       |                       |                                  |                          |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|
| 16. Proper cooking time and temperature         | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 17. Proper reheating procedures for hot holding | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 18. Proper cooling time and temperatures        | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 19. Proper hot holding temperature              | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> |

**This item has Notes. See Footnote 3 at end of questionnaire.**

- |                                     |                       |                                  |                       |                       |                          |
|-------------------------------------|-----------------------|----------------------------------|-----------------------|-----------------------|--------------------------|
| 20. Proper cold holding temperature | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> |
|-------------------------------------|-----------------------|----------------------------------|-----------------------|-----------------------|--------------------------|

*Fail Notes* | 3-501.16(A)(2) *Priority; Time/Temperature Control for Safety Food - Cold Holding*  
*[Walk-in cooler/shelving rack directly adjacent to door/egg salad 45 F, sliced cheese 45 F, ham 46 F, raw chicken 46 F. Not Corrected - Verification Required.]*

- |   |                       |                                  |                       |                       |                          |
|---|-----------------------|----------------------------------|-----------------------|-----------------------|--------------------------|
| 21. Proper date marking and disposition | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> |
|---|-----------------------|----------------------------------|-----------------------|-----------------------|--------------------------|

*Fail Notes* | 3-501.18 *Priority; Ready-To-Eat Time/Temperature Control for Safety Food - Disposition*  
*[Observed inconsistent implementation of date marking system. Items not date marked include: fruit dip, open cocktail sausages, pinwheel mix containing cream cheese, house made chicken salad. Observed items held in excess of 7 days after marked date. Items held past marked date include salsa and cream of chicken. Not Corrected - Verification Required.]*

- |   |                       |                       |                                  |                       |                          |
|---|-----------------------|-----------------------|----------------------------------|-----------------------|--------------------------|
| 22. Time as a Public Health Control: procedures and records | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> |
|---|-----------------------|-----------------------|----------------------------------|-----------------------|--------------------------|

### Consumer Advisory

- |   |                       |                       |                                  |                       |                          |
|---|-----------------------|-----------------------|----------------------------------|-----------------------|--------------------------|
| 23. Consumer advisory provided for raw or undercooked foods | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> |
|---|-----------------------|-----------------------|----------------------------------|-----------------------|--------------------------|

### Highly Susceptible Populations

- |  |                       |                       |                                  |                       |                          |
|--|-----------------------|-----------------------|----------------------------------|-----------------------|--------------------------|
| 24. Pasteurized foods used; prohibited foods not offered | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> |
|--|-----------------------|-----------------------|----------------------------------|-----------------------|--------------------------|

### Chemical

- |  |                                  |                       |                                  |                       |                          |
|--|----------------------------------|-----------------------|----------------------------------|-----------------------|--------------------------|
| 25. Food additives: approved and properly used             | <input type="radio"/>            | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> |
| 26. Toxic substances properly identified, stored, and used | <input checked="" type="radio"/> | <input type="radio"/> |                                  |                       | <input type="checkbox"/> |

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### Conformance with Approved Procedures

|   | IN                    | OUT                   | NA                               | NO | CV                       |
|---|-----------------------|-----------------------|----------------------------------|----|--------------------------|
| 27. Compliance with variance, specialized process, reduced oxygen packaging criteria, or HACCP plan | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |    | <input type="checkbox"/> |

### Good Retail Practices

IN = In Compliance; OUT = Out of Compliance; NA = Not Applicable; NO = Not Observed; CV = Consecutive Violation

### Safe Food & Water

|  | IN                               | OUT                   | NA                               | NO | CV                       |
|--|----------------------------------|-----------------------|----------------------------------|----|--------------------------|
| 28. Pasteurized eggs used where required                 | <input type="radio"/>            | <input type="radio"/> | <input checked="" type="radio"/> |    | <input type="checkbox"/> |
| 29. Water and ice from approved source                   | <input checked="" type="radio"/> | <input type="radio"/> |                                  |    | <input type="checkbox"/> |
| 30. Variance obtained for specialized processing methods | <input type="radio"/>            | <input type="radio"/> | <input checked="" type="radio"/> |    | <input type="checkbox"/> |

### Food Temperature Control

|   | IN                               | OUT                   | NA                    | NO                               | CV                       |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|
| 31. Proper cooling methods used, adequate equipment for temperature control | <input checked="" type="radio"/> | <input type="radio"/> |                       |                                  | <input type="checkbox"/> |
| 32. Plant food properly cooked for hot holding                              | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 33. Approved thawing methods used   | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> |
| 34. Thermometers provided and accurate                                      | <input checked="" type="radio"/> | <input type="radio"/> |                       |                                  | <input type="checkbox"/> |

### Food Identification

|   | IN                               | OUT                   | NA | NO | CV                       |
|---|----------------------------------|-----------------------|----|----|--------------------------|
| 35. Food properly labeled: original container | <input checked="" type="radio"/> | <input type="radio"/> |    |    | <input type="checkbox"/> |

### Prevention of Food Contamination

|  | IN                    | OUT                              | NA | NO | CV                       |
|--|-----------------------|----------------------------------|----|----|--------------------------|
| 36. Insects and rodents not present; no unauthorized animals | <input type="radio"/> | <input checked="" type="radio"/> |    |    | <input type="checkbox"/> |

***This item has Media/Attachments. See Footnote 4 at end of questionnaire.***

*Fail Notes* | 6-501.111 Priority Foundation; Controlling Pests  
[Observed droppings in dry storage areas and utility closet. Not Corrected - Verification Required.]

|   |                                  |                       |  |  |                          |
|---|----------------------------------|-----------------------|--|--|--------------------------|
| 37. Contamination prevented during food preparation, storage, and display | <input checked="" type="radio"/> | <input type="radio"/> |  |  | <input type="checkbox"/> |
| 38. Personal cleanliness  | <input checked="" type="radio"/> | <input type="radio"/> |  |  | <input type="checkbox"/> |
| 39. Wiping cloths: properly used and stored                               | <input checked="" type="radio"/> | <input type="radio"/> |  |  | <input type="checkbox"/> |
| 40. Washing fruits and vegetables   | <input checked="" type="radio"/> | <input type="radio"/> |  |  | <input type="checkbox"/> |

### Proper Use of Utensils

|  | IN                               | OUT                              | NA | NO | CV                       |
|--|----------------------------------|----------------------------------|----|----|--------------------------|
| 41. In-use utensils: properly stored                                     | <input checked="" type="radio"/> | <input type="radio"/>            |    |    | <input type="checkbox"/> |
| 42. Utensils, equipment, and linens: properly stored, dried, and handled | <input type="radio"/>            | <input checked="" type="radio"/> |    |    | <input type="checkbox"/> |

*Fail Notes* | 4-903.11(A)&(B) Core; Equipment, Utensils, and Linens - Storing  
[Clean pans and equipment are not stored covered or in an inverted position.]

|  |                       |                                  |  |  |                          |
|--|-----------------------|----------------------------------|--|--|--------------------------|
| 43. Single-use and single-service articles: properly stored and used | <input type="radio"/> | <input checked="" type="radio"/> |  |  | <input type="checkbox"/> |
|--|-----------------------|----------------------------------|--|--|--------------------------|

*Fail Notes* | 4-903.11(A),(C)&(D) Core; Single-Service and Single-Use Articles - Storing  
- Observed stored in a manner where there is a potential for contamination.  
- Exposed to splash, dust, or other contamination.  
- Less than 6 inches off the floor.

|                          |                                  |                       |  |  |                          |
|--------------------------|----------------------------------|-----------------------|--|--|--------------------------|
| 44. Gloves used properly | <input checked="" type="radio"/> | <input type="radio"/> |  |  | <input type="checkbox"/> |
|--------------------------|----------------------------------|-----------------------|--|--|--------------------------|

## Retail Food Establishment Inspection Report

| Utensils & Equipment | IN | OUT | NA | NO | CV |
|----------------------|----|-----|----|----|----|
|----------------------|----|-----|----|----|----|

45. Equipment, food, and non-food contact surfaces approved, cleanable, properly designed, constructed, and used

**This item has Media/Attachments. See Footnote 5 at end of questionnaire.**

|            |          |  |
|------------|----------|--|
| Fail Notes | 4-501.11 | Core; Good Repair and Proper Adjustment - Equipment<br>[Observed damaged gasket on two door reach-in freezer.] |
|            | 4-501.12 | Core; Cutting Surfaces<br>[Observed heavy black buildup and grooves in cutting boards.]                        |

46. Warewashing facilities: installed, maintained, and used; test strips

47. Non-food contact surfaces clean

**This item has Media/Attachments. See Footnote 6 at end of questionnaire.**

|            |                 |   |
|------------|-----------------|---|
| Fail Notes | 4-601.11(B),(C) | Core; Equipment, Food Contact Surfaces, Nonfood-Contact Surfaces - Clean, and Utensils<br>[Observed soiled nonfood-contact surfaces throughout facility.] |
|------------|-----------------|---|

| Physical Facilities | IN | OUT | NA | NO | CV |
|---------------------|----|-----|----|----|----|
|---------------------|----|-----|----|----|----|

48. Hot and cold water available; adequate pressure

49. Plumbing installed; proper backflow devices

50. Sewage and wastewater properly disposed

51. Toilet facilities: properly constructed, supplied, and cleaned

52. Garbage and refuse properly disposed; facilities maintained

53. Physical facilities installed, maintained, and clean

**This item has Media/Attachments. See Footnote 7 at end of questionnaire.**

|            |          |   |
|------------|----------|---|
| Fail Notes | 6-501.12 | Core; Cleaning, Frequency and Restrictions<br>[Observed grease, food, and other debris on floors beneath equipment throughout. Observed food splash on walls throughout.] |
|------------|----------|---|

54. Meets ventilation and lighting requirements; designated areas used

|            |          |  |
|------------|----------|--|
| Fail Notes | 6-303.11 | Core; Intensity - Lighting<br>[Center of walk-in cooler measured at 3.1 foot-candles of light as measured with Department provided light meter. A minimum of 10 foot-candles at 30 inches from the floor is required.] |
|------------|----------|--|

| Chapter 8 & 9 Violations | IN | OUT | NA | NO | CV |
|--------------------------|----|-----|----|----|----|
|--------------------------|----|-----|----|----|----|

55. Chapter 8: Compliance and Enforcement

56. Chapter 9: Standards for Additional Operations

| Comments |
|----------|
|----------|

Inspection conducted in response to complaint #85562

| Inspection Information |
|------------------------|
|------------------------|

Is a Follow-Up Required? Yes                      Is a Routine required within 60 days? Yes

Follow up Inspection will be performed within: 10 Days     72 hours     24 hours     Specified Date

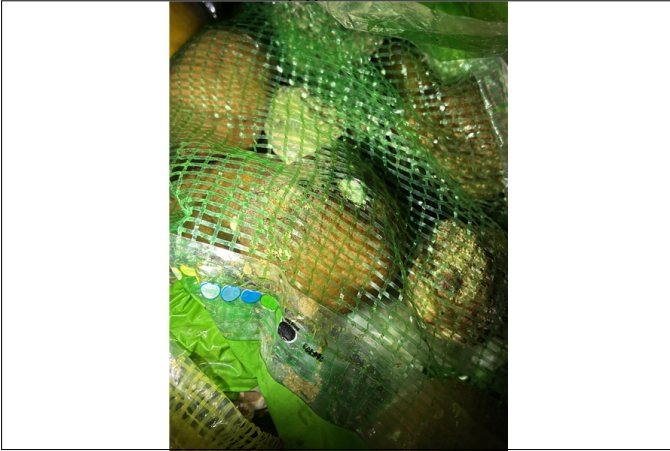
| Notification |
|--------------|
|--------------|

Violations may be subject to enforcement action including but not limited to a monetary penalty of \$1,000.00 per violation for each day of non-compliance per S.C. Code Ann. Section 44-1-150 and S.C. Regulation 61-25. If the retail food establishment obscures, covers, defaces, relocates, or removes the posted grade decal, this is a violation of S.C. Regulation 61-25 and may result in enforcement action. Information collected on this form is open to public scrutiny or release in accordance with the Freedom of Information Act.

# Retail Food Establishment Inspection Report

## Footnote 1

Fuzzy growth on limes.



Fuzzy growth on beans.

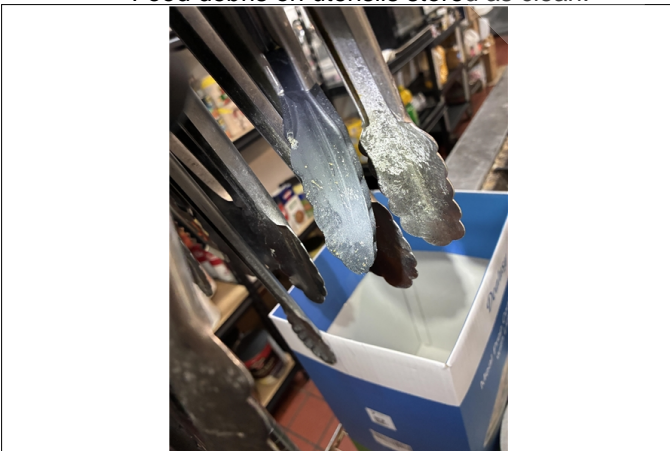


Meat in bloated packaging.

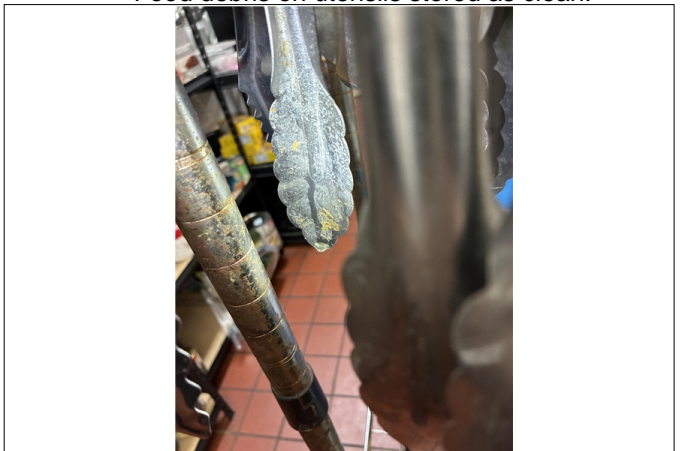


## Footnote 2

Food debris on utensils stored as clean.



Food debris on utensils stored as clean.



# Retail Food Establishment Inspection Report

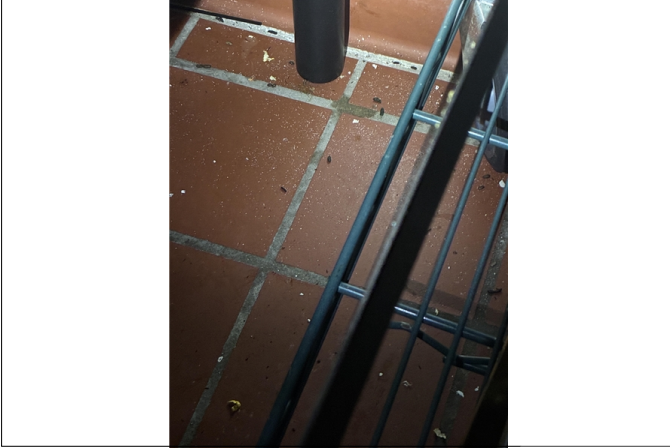
## **Footnote 3**

### **Notes:**

All observed hot holding temperatures are 135°F or higher.

## **Footnote 4**

Droppings in dry storage area.



Droppings in utility closet.



Droppings in dry storage area.



## **Footnote 5**

Retail Food Establishment Inspection Report

**Footnote 5 (Continued)**

Black buildup on cutting boards.



Damaged gasket on reach-in freezer.



**Footnote 6**

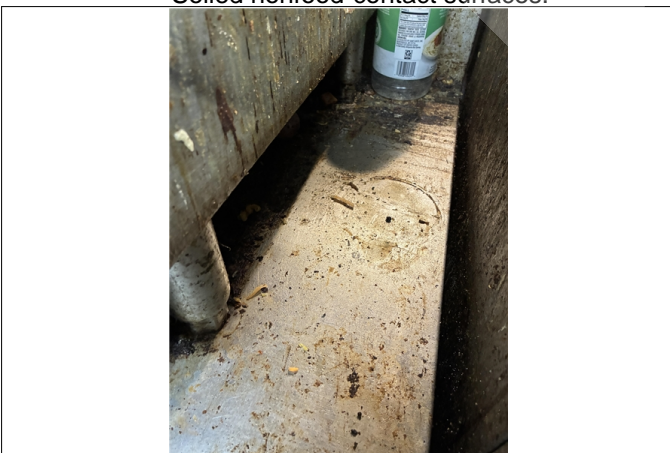
Soiled nonfood-contact surfaces.



Soiled nonfood-contact surfaces.



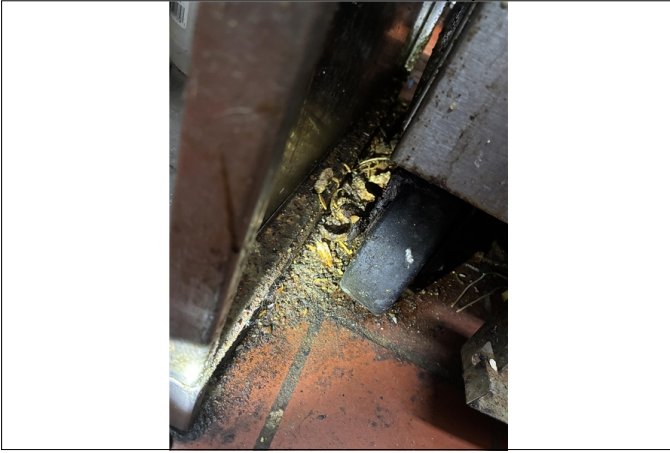
Soiled nonfood-contact surfaces.



# Retail Food Establishment Inspection Report

## Footnote 7

Soiled floors beneath equipment.



Soiled floors beneath equipment.



Soiled floors in walk-in cooler.

