

City of Portland Health Inspection Report

Establishment Name Local Porthole		No. of Risk Factor/Intervention Violations		Date July 29-08
		No. of Repeat Risk Factor/Intervention Violations		Time In _____
License/Est. ID# 881		Address 16 Costa Way	City/State PAC	Zip Code
License Posted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Owner Name Oliver Reilly	Purpose of Inspection Inspection	Risk Category

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (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

Compliance Status		COS	R	Compliance Status		COS	R
Supervision							
51	IN OUT			PIC present, demonstrates knowledge, and performs duties			
Employee Health							
52	IN OUT			Management awareness; policy present			
53	IN OUT			Proper use of reporting, restriction & Exclusion			
Good Hygienic Practices							
54	IN OUT			Proper eating, tasting, drinking, or tobacco use			
55	IN OUT			No discharge from eyes, nose, and mouth			
Preventing Contamination by Hands							
56	IN OUT			Hands clean & properly washed			
27	IN OUT/N/A			No bare hand contact with RTE foods or approved alternate method properly followed			
58	IN OUT			Adequate handwashing facilities supplied & accessible			
Approved Source							
59	IN OUT			Food obtained from approved source			
510	IN OUT/N/A			Food received at proper temperature			
511	IN OUT			Food in good condition, safe, & unadulterated			
112	IN OUT/N/A			Required records available: shellstock tags, parasite destruction			
Protection from Contamination							
213	IN OUT			N/A Food separated & protected			
214	IN OUT			N/A Food-contact surfaces: cleaned & sanitized			
515	IN OUT			Proper disposition of returned, previously served, reconditioned, & unsafe food			
Potentially Hazardous Food Time/Temperature							
516	IN OUT/N/A			N/O Proper cooking time & temperatures			
517	IN OUT/N/A			N/O Proper reheating procedures for hot holding			
518	IN OUT/N/A			N/O Proper cooling time & temperature			
519	IN OUT/N/A			N/O Proper hot holding temperatures			
520	IN OUT			N/A Proper cold holding temperatures			
521	IN OUT/N/A			N/O Proper date marking & disposition			
522	IN OUT/N/A			N/O Time as a public health control: procedures & record			
Consumer Advisory							
523	IN OUT			N/A Consumer advisory provided for raw or undercooked foods			
Highly Susceptible Populations							
524	IN OUT			N/A Pasteurized foods used; prohibited foods not offered			
Chemical							
525	IN OUT			N/A Food additives: approved & properly used			
526	IN OUT			Toxic substances properly identified, stored, & used			
Conformance with Approved Procedures							
527	IN OUT			N/A Compliance with variance, specialized process, & HACCP plan			

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 addition of pathogens, chemicals, and physical objects into foods.
 Mark "X" in box if numbered item is **not** in compliance Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation

Safe Food and Water		COS	R	Proper Use of Utensils		COS	R
528	Pasteurized eggs used where required			241	In-use utensils; properly stored		
529	Water & ice from approved source			242	Utensils, equipment & linens: properly stored, dried & handled		
30	Variance obtained for specialized processing			243	Single-use & single-service articles: properly stored & used		
Food Temperature Control							
531	Proper cooling methods used; adequate equipment for temperature control			244	Gloves used properly		
532	Plant food properly cooked for hot holding			Utensil, Equipment and Vending			
533	Approved thawing methods used			245	X Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
134	Thermometers provided & accurate			146	Warewashing facilities: installed, maintained, & used; test strips		
Food Identification							
135	Food properly labeled; original container			147	Non-food contact surfaces clean		
Prevention of Food Contamination							
436	Insects, rodents, & animals not present			Physical Facilities			
237	Contamination prevented during food preparation, storage & display			448	Hot & cold water available; adequate pressure		
538	Personal cleanliness			549	X Plumbing installed; proper backflow devices		
139	Wiping cloths: properly used & stored			550	X Sewage & waste water properly disposed		
140	Washing fruits & vegetables			251	Toilet facilities: properly constructed, supplied, & cleaned		
				252	X Garbage & refuse properly disposed; facilities maintained		
				153	X Physical facilities installed, maintained, & clean		
				154	Adequate ventilation & lighting; designated areas used		

Person in Charge (Signature) Heather LaRau

Date: 7-29-08

Health Inspector (Signature)

Sig Hunt

Plumaine P. S. Sue
 Follow-up: YES NO (circle one) Follow-up Date: _____

City of Portland Health Inspection Report

Establishment Name <u>Poultice</u>		As Authorized by 22 MRSA § 2496		Date <u>7-29-08</u>	
License/EST. ID # <u>SS 1</u>	Address <u>16 Cass Ave</u>	City/State <u>PTC</u>	Zip Code	Telephone	

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
	<u>40°</u>			<u>Mayo -</u>	<u>40</u>
	<u>40°</u>	<u>Dish ok</u>		<u>Corn Ref WASH</u>	<u>48</u>

OBSERVATIONS AND CORRECTIVE ACTIONS	
Item Number	Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code.
<u>2</u> 52	<u>clean up AROUND Dumpster + grease -</u>
<u>2</u> 45	<u>paint surface OUT side Bar</u>
<u>5</u> 49	<u>install plumbing per regulation outside Bar</u> <u>- Hand sink, Hot Sink, Ice Sink,</u> <u>- Soda Sink</u>
<u>49</u>	<u>Condensation issue on Walk in</u>
<u>53</u>	<u>Floors need to easily cleanable</u>
<u>53</u>	<u>General cleaning of shelves, walls +</u>
<u>53</u>	<u>Surfaces needed on going</u>
	<u>(3 person enrolled in Food Service Course per Health)</u>

Person in Charge (Signature)	Date
Health Inspector (Signature)	Date
<u>[Signature]</u>	<u>7-29-08</u>