City of Portland Health Inspection Report

Establishment Name	As Authorized by 22 MRSA § 2496	Date
PM. Stave		12/09/08

License/EST. ID #	Address	City/State	Zip Code	Telephone
	Forest Ave			

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
cooler -	40°				

OBSERVATIONS AND CORRECTIVE ACTIONS

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.

Item Number	
34	thermometer required in refrigerator

Person in Charge (Signature) — Date 12/9/08

Health Inspector (Signature) — Date

White Copy - State • Yellow Copy - Inspector • Pink Copy - Licensee