263 A A 00 City of Portland Health Inspection Report Page **Establishment Name** No. of Risk Factor/Intervention Violations Date No. of Repeat Risk Factor/Intervention Violations Time In Score (optional) Time Out License/Est. ID# Zip Code Telephone License Posted Purpose of Inspection Risk Category Est. Type []Yes [X]No 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 COSR Compliance Status COSR Supervision Potentially Hazardous Food Time/Temperature ้อบ PIC present, demonstrates knowledge, and IN OUTN/A N/O | Proper cooking time & temperatures performs duties OUTN/A N/O Proper reheating procedures for hot holding 5 18 IN OUT N/A N/O Proper cooling time & temperature
5 19 IN OUT N/A N/O Proper hot holding temperatures
5 20 IN OUT N/A Proper cold holding temperatures
5 21 IN OUTN/A N/O Proper date marking & disposition **Employee Health** Management awareness; policy present TUO NI IN OUT Proper use of reporting, restriction & Exclusion Good Hygienic Practices TUO (AL 5 22 Proper eating, tasting, drinking, or tobacco use (IN)OUTN/A N/O Time as a public health control: procedures (IN)OUT N/O No discharge from eyes, nose, and mouth & record **Preventing Contamination by Hands** Consumer Advisory TUOVAL N/O | Hands clean & properly washed 5 23 IN OUT N/A Consumer advisory provided for raw or IN) OUT N/A N/O No bare hand contact with RTE foods or undercooked foods approved alternate method properly followed ighly Susceptible Populations Adequate handwashing facilities supplied & 5 24 IN OUT Pasteurized foods used; prohibited foods not accessible offered **Approved Source** Chemical (II) OUT Food obtained form approved source 5 25 IN OU Food additives: approved & properly used 10 IN OUT N/A N/O 5 26 IN (OUT) Food received at proper temperature Toxic substances properly identified, stored. Food in good condition, safe, & unadulterated & used Required records available: shellstock Conformance with Approved Procedures tags, parasite destruction IN OUT Compliance with variance, specialized Protection from Contamination process, & HACCP plan 2 13 UN OUT 2 14 UN OUT N/A | Food separated & protected Risk factors are improper practices or procedures identified as the most Food-contact surfaces: cleaned & sanitized prevalent contributing factors of foodborne illness or injury. Public Health 5 15 TUO(NI) Proper disposition of returned, previously Interventions are control measures to prevent foodborne illness or injury. served, reconditioned, & unsafe food **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 COS R COSR Safe Food and Water **Proper Use of Utensils** 5 28 Pasteurized eggs used where required 2 41 X In-use utensils: properly stored 5 29 Water & ice from approved source 2 42 2 43 Utensils, equipment & linens: properly stored, dried & handled 30 Variance obtained for specialized processing Single-use & single-service articles: properly stored & used **Food Temperature Control** 2 44 Gloves used properly 5 31 Proper cooling methods used; adequate equipment for Utensil, Equipment and Vending temperature control 2 45 Food & non-food contact surfaces cleanable, properly 32 Plant food properly cooked for hot holding designed, constructed, & used 5 33 Approved thawing methods used 1 46 Warewashing facilities: installed, maintained, & used; test strips 34 Thermometers provided & accurate 1 47 Non-food contact surfaces clean Food Identification **Physical Facilities** 1 35 Food properly labeled; original container Hot & cold water available; adequate pressure 48 5)49 **y Prevention of Food Contamination** Plumbing installed; proper backflow devices Insects, rodents, & animals not present 36 Sewage & waste water properly disposed 50 2 37 Contamination prevented during food preparation, storage & display Toilet facilities: properly constructed, supplied, & cleaned 5 38 Personal cleanliness Garbage & refuse properly disposed; facilities maintained 39 Wiping cloths: properly used & stored Physical facilities installed, maintained, & clean 1 40 Washing fruits & vegetables Adequate ventilation & lighting; designated areas used Person in Charge (Signature

Health Inspector (Signature)

Follow-up:

YES

Follow-up Date:

(circle one)

263A A 001 City of Portland Health Inspection Report As Authorized by 22 MRSA § 2496 ple bee's Zip Code Telephone Item/Location Temp porkealad Salad dressing Grilled Chx Ice both for spuds of 1400 Soup **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 Toxic Spray bottle-Industrial at Bar (COS) of Ile schop stored in Bin (COS) Holder is available. 26 Indirect drain Lines (copper) at Bar In receptacle drain Treezer Elight cover Gaslat torn at Ploor water problem when cleaning facility. Person in Charge (Signature) Health Inspector (Signature)

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Establishment Name				ctor/Intervention		Date 27	Jano
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performs duties	- '		5 17	IN OUTN/A N/O	Proper reheating prod	cedures for hot holding	
Employee F 5 2 IN OUT Management awar	dealth reness; policy present		5 18	IN OUT N/A N/O	Proper cooling time & Proper hot holding te	temperature	
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Good Hygienic			5 21	IN OUTN/A N/O	Proper date marking	& disposition	
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Preventing Contamin					Consumer Advi	isorv	
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	act with RTE foods or method properly followed			Н	undercooked foods ighly Susceptible P	onulations	
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Protection from Co				107	process, & HACCP pl		
2 13 IN OUT N/A Food separated & 2 14 IN OUT N/A Food-contact surfa	protected ces: cleaned & sanitized		Risk	factors are imp	roper practices or pro	cedures identified as th	o most
	of returned, previously		prev	alent contributing	factors of foodborne il	lness or injury. Public H	ealth
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Good Retail Practices are Mark "X" in box if numbered item is not in	preventative measures to cor compliance Mark "X" in appr	ntrol the ropriate l	e addition of box for CC	of pathogens, cher S and/or R COS :	nicals, and physical ob =corrected on-site durin	ects into foods.	iolation
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icense/EST. ID #	Address	City/State		Zip Code	Telephone	U
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Person in Charge (Signature)	ZKI.				Date	
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Establishment Name	•		No	. of F	₹isk	Fa	ctor/	Interventio	n Vio	ations		Date 3-25-0	Q	
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License/Est. ID#		Address	1		Ci	ity/S	tate			Zip Code		Telephone		-
Aq. 1-1	331	1100 Brighton C	wil	٤,				L, Me.		50140		761-407	R	
License Posted		Owner Name			_1			of Inspection		Est. Type		Risk Category		_
X Yes [] No		Owner Name Mandaria & ac	3				مما					3 ,		
	nated compliance	PRNE ILLNESS RISK FA e status (IN, OUT, N/O, N/A) f npliance N/O=not observed	OT or e	ORS ach n	uml	ND I bere blical	PUB d iter ble	COS=c	correct	Mark "X" in ap	propri	ate box for COS and pection R=repeat v	iolatio	on
Compliance Status	Superv		cos	н		Com	nplia	nce Status Potentia		azardous Food	Time	e/Temperature	cos	R
5 1 IN OUT		monstrates knowledge, and	2007065			16		OUTN/A N/C	Pro	per cooking time	& ten	nperatures		
	performs duties Employee	Health				17 18		OUTN/A N/O OUT N/A N/O		per reheating pro per cooling time		res for hot holding		
5 2 IN OUT		vareness; policy present			5	19		OUTN/A N/O		per cooling time per hot holding t			-	╁
5 3 IN OUT		porting, restriction & Exclusion				20 21		OUT N/	A Pro	per cold holding	tempe	eratures		
5 4 IN OUT N/O	Good Hygien Proper eating, to	asting, drinking, or tobacco use				22		OUTN/A N/O		per date marking e as a public he		position ontrol: procedures	-	╀
5 5 IN OUT N/O	No discharge fro	om eyes, nose, and mouth								ecord				
	venting Contam Hands clean &	ination by Hands			5	23	IN (OUT N/	A I Cor	Consumer Advansumer advisory p				
2 7 IN OUTN/A N/O		ontact with RTE foods or			١	23	111	001 14//		lercooked foods	JIOVIG	ed for faw of		
		ate method properly followed						OUE	Highl	y Susceptible I	Popul	ations		
5 8 IN OUT	accessible	vashing facilities supplied &			5	24	IN (OUI N//		ered		prohibited foods not		
519 IN OUT	Approved	Source orm approved source			5	25	INI i	OUT N//	A I For	Chemical od additives: appr		2 properly used		E
		it proper temperature				26		OUT				identified, stored,	-	+-
5 11 IN OUT	Food in good co	ondition, safe, & unadulterated							8 L	sed		, ,		
1 12 IN OUTN/A N/O	Required record tags, parasite d	s available: shellstock			-	i 27	INI			nce with Appro				L
P	rotection from				١	1-1	",	001 14//		cess, & HACCP ;		specialized		
2 13 IN OUT N/A	Food separated				F	Ris	k fac	tors are in	prope	r practices or pr	ncedi	res identified as the	mos	+
2 14 IN OUT N/A 5 15 IN OUT	Proper disposition	rfaces: cleaned & sanitized on of returned, previously				pre	valen	nt contributir	ng fact	ors of foodborne	illnes	s or injury. Public He oodborne illness or	alth	
	served, recondit	ioned, & unsafe food))	-						nododros to pre	VOIII I		ii ijui y	
Good	Retail Practices a	GOOI are preventative measures to co							emical	s. and physical c	biects	into foods		
Mark "X" in box if num	nbered item is no	t in compliance Mark "X" in app	oropr	iate b	ox fo	or CO	OS ar	nd/or R CC	S=cori	ected on-site duri	ng ins	pection R=repeat vic		
	Safe Food	and Water	CO	SR						Proper Use of L	Jtens	lls	cos	R
	gs used where r			2010000		2 41			ls: pro	perly stored			00 200300	
	m approved sour ned for specialize		-	+	2	42	ال					red, dried & handled rly stored & used		\perp
Tananes estan	Food Tempera				2			Gloves used			proper	ny stored & used	+	+
5 31 Proper cooling temperature co		adequate equipment for				4.				il, Equipment a				
	perly cooked for h	not holding		+		45				ontact surfaces of ted, & used	ieana	bie, properly		
5 33 Approved thaw	ing methods use				1		v	Varewashing	facilit	ies: installed, ma	intaine	ed, & used; test strips	3	\perp
1 34 Thermometers	provided & accur Food Iden		8 8.50	\mathbf{H}	1	47		Non-food co	ntact s	urfaces clean Physical Faci	litiae			
1 35 Food properly I	abeled; original			\Box		48	F	ot & cold w	vater a	vailable; adequat	e pres	ssure		180
		d Contamination			5					proper backflow				
	s, & animals not prevented during fo	present ood preparation, storage & displa	<u>.</u>	+	2	5 50 2 51	E			ater properly disposerly constructed,				+
5 38 Personal clean	liness				2	52		Garbage & r	efuse	properly disposed	i; facil	ities maintained		+
1 39 Wiping cloths: p 1 40 Washing fruits	oroperly used & s	stored	-	+	1	53 54				stalled, maintaine n & lighting; des				1
		nikuf a. T.			l e		1 1					a aroac acca		
Person in Charge (Sign	nature) 🔀 🆊	ussey u		w	$\overline{}$			D	ate:	3-25-09				
Health Inspector (Sign	ature)	Crossyd ger			F	ollow	v-up:	YES (N	O (ci	(cle one) Fol	low-u _l	o Date:		
								3						

	City	or Portial		Inspection	Report	Page _	<u>2</u> of <u>2</u>
Establishment Nam	5		As Authorized	by 22 MRSA § 2496		Date	
	instra					3-52-	09
License/EST. ID #	331	Address 1100 Brigh	Lon are, P	estland, me	Zip Code . 04102	Telephon	1e 4678
Item/Loca	ation	Temp	INTERATURE O	BSERVATIONS Temp	Item/Lo	cation	1 (20) of Br. 15
				,	item/E	Cation	Temp
			***************************************	er e			
				:			
Skalasas (Alamas) (India) sa dagadh da dag		dan sara da sara da		onii in ini in oni on propinsi katalorii in oni oni oni oni oni oni oni oni on			elilijamusa <u>mam terent gerter.</u>

		OBSERV	ATIONS AND C	ORRECTIVE ACTI	IONS		
Item Violations	s cited in this rep	ort must be corrected	l within the time fram	es below, or as stated i	n sections 8-405.11	and 8-406.11 of	the Food Code
Number							
				• • • · · · · · · · · · · · · · · · · ·	· · · · · · · · -		
						er en	· · · · · · · · · · · · · · · · · · ·
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				The second second second			
					THE R. L. LEWIS CO., LANSING MICHIGAN		
	THE REAL PROPERTY AND ADDRESS					The state of the s	
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						*	
							
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- Company of the Comp							
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	·						
Person in Charge (S	ignature) 🗸 🖊	Mikal a	. Tulk	Le		Date 3-25	5-09
Health Inspector (Si		. 0				3.05	

3						3 A AO	04
	City of Portlar	nd Hea	<u>lth l</u>	nspectio	n Report	Pageof_	
Establishment Name		No. of	Risk Fa	ctor/Intervention	Violations	10 Date L	107/07
Quiznos	SIL	No. of	Repeat	Risk Factor/Inter	vention Violations	7 Time In	
			2.1.5.1		Score (optional)	3 Time Out _	
License/Est. ID#	Address	A	City/S	State	Zip Code	Telephone	
Linear Build	(030 Dissay)	on ALL	Po	Hond Ad		207.871	
License Posted	Owner Name RKR Ass	A. 10	Purpo	ose of Inspection	Est. Type	Risk Category	у
[]Yes []/No		Control of the Contro					
	OODBORNE ILLNESS RISK						
IN= in compliance OUT=r	ompliance status (IN, OUT, N/O, Nanot in compliance N/O=not observ	/A) for each r /ed N/A =not	numbere applical		Mark "X" in ap _l rrected on-site during	propriate box for CO	
Compliance Status		COSR		npliance Status	rrected on one daming	J moposition 11=1ept	COS R
	Supervision			Potential l	y Hazardous Food	Time/Temperature	1 000 11
	resent, demonstrates knowledge, and ms duties	1 /	5 1 7	IN OUTN/A N/O	Proper cooking time Proper reheating pro	& temperatures	na
	Employee Health		5 18	IN OUT N/A(N/O)	Proper cooling time	& temperature	Tig
	pement awareness; policy present use of reporting, restriction & Exclus	nion /	5 19	MOUTN/A N/O	Proper hot holding to Proper cold holding	emperatures	
Good	d Hygienic Practices	SIOII *	5 21	IN OUT N/A N/O	Proper date marking	& disposition	
5 4 4N OUT N/O Proper	eating, tasting, drinking, or tobacco	use	5 22	IN OUTAIA NO	Time as a public hea	alth control: procedure	es
	charge from eyes, nose, and mouth Contamination by Hands				& record	1	
5 6 LANOUT NO Hands	clean & properly washed		5 23	IN OUT MAI	Consumer Adv		
27 IN OUT N/N N/O No bar	re hand contact with RTE foods or			\cup	undercooked foods		
	red alternate method properly follower ate handwashing facilities supplied &		5 24	IN OUT (N/A)	ighly Susceptible F	opulations	
access		*	324	IN OUT INA	Pasteurized foods us offered	sea; pronibited toods	not
	pproved Source				Chemical		
5 9 (N OUT Food of 5 10 IN OUT N/A MO FOOD OUT N/	obtained form approved source		5 25	DOUT (N/A)	Food additives: appr		
5 11 OUT Food i	n good condition, safe, & unadultera	ated	320		& used	operly identified, store	;d,
1 12 IN OUTNANO Requir	ed records available: shellstock				mance with Appro		
	parasite destruction on from Contamination		5 27	IN OUT MA	Compliance with vari process, & HACCP p		
2 13 IN OUT N/A Food s	separated & protected						
	contact surfaces: cleaned & sanitized		Ris	k factors are impi	roper practices or profactors of foodborne	ocedures identified a	s the most
	disposition of returned, previously , reconditioned, & unsafe food		Inte	rventions are cont	trol measures to prev	rent foodborne illnes	s or injury.
T I - I - I - I - I - I - I - I - I - I		OD RETAI			•		, ,
Good Retail F	Practices are preventative measures t	to control the	addition	of pathogens, chen	nicals, and physical o	bjects into foods.	
Mark "X" in box if numbered in	tem is not in compliance Mark "X" in	appropriate b	ox for CO	OS and/or R COS=	corrected on-site during	ng inspection R=repe	
	e Food and Water				Proper Use of U	tensils	COSR
5 28 Pasteurized eggs used 5 29 Water & ice from appro			2 41	In-use utensils:	properly stored		
30 Variance obtained for			2 42	Single-use & si	ment & linens: properl ngle-service articles: p	y stored, dried & han properly stored & used	dled
	Temperature Control		2 44	Gloves used pr	roperly		
5 31 Proper cooling method temperature control	s used; adequate equipment for		2 45		tensil, Equipment a		
5 32 Plant food properly cod	oked for hot holding		2 45	designed, cons	od contact surfaces cl structed, & used	eanable, properly	
5 33 Approved thawing met			1 46	Warewashing fa	acilities: installed, mair	ntained, & used; test	strips
1 34 Thermometers provided	od Identification		1 47	Non-food conta	act surfaces clean	(Inter-	
1 35 Food properly labeled;			4 48	Hot & cold water	Physical Facil er available; adequate		
	n of Food Contamination		5 49	Plumbing instal	led; proper backflow of	devices	
rigorito, a am	mais not present d during food preparation, storage & di	enlay	5 50 2 51		te water properly disp properly constructed,		
5 38 Personal cleanliness	a daming lood proparation, storage a di	Spiay	2 52	Garbage & refu	use properly disposed;	facilities maintained	
Wiping cloths: properly			1 53	Physical facilitie	es installed, maintaine	d, & clean	
1 40 Washing fruits & veget	ables		1 54	Adequate venti	lation & lighting; design	gnated areas used	
	\sim 1 (7 . 1					
Person in Charge (Signature)	Small hall	() /		D. C.		1.7	
. 5.551 III Sharge (Signature)	July 1		T	Date	2 nort	, 0%	
					I non't	4	
Health Inspector (Signature)			Follow	-up: YES NO		ow-up Date:	
					(Oncolorie) FOR	Jwi-up Date.	

		ity of Po	rtianc	i Heal	ith insp	ection	Report	Pageof
stablishm	nent Name	£		As Author	rized by 22 MI	RSA § 2496		Date 11/07/09
	Quiznos	Sub						
icense/ES			Bach	tor Are	City/State	d, NE	Zip Code	Telephone
				PERATUR	RE OBSER	VATIONS	100	
3 -6	Item/Location	Temp COPPM	C.1	Item/Loca	tion	Temp	Chichen/Lo	ocation Temp
	3	301171	>61	y ar	COND	10	Chiency	Hurchecie 50°
						1		- agras areas see a contrapança Armen, anno a con-
		O.D.	CEDVAT	IONE AN	ID CORRE	CTIVE ACTI	ONE	haatin ja tenat uutselen tulminen hänika (hija aluutus minta tuni
Item	Violations cited in this							and 8-406.11 of the Food Co
Number								
8	H. J. dow			1 . H.	1 (6-3011	\
	L1345 431	e) picti-	ערטק נ	60 100	narosi	1767	C=1.1.1	3-304.12
20	(old bol	ding te	mp -	to (s	al bar	3 -	. 361.16	
38	Hair rest	roth ts	~91A	2.	- YOJ.11	and the same and t		
41	11-05C	tasil.	D (SO)	edy	stored	fin an	- director	3-304/12
			1-1'					·)
	1000 Maria (10 to 10 to					· <u>L</u>		
		THE RESERVE AND ADDRESS OF THE PARTY AND ADDRE						
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								A MANAGEMENT OF THE PROPERTY O
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Started Annual Con-			The second second second second second	<u> </u>				
						292 1 MINISTER II		
					/)	and the second s		
		Ω .	, 7	7.10	(and			11 7 . ~
erson in (Charge (Signature)	any	1-10	M	Z/!!			Date 11/07/017
ealth Insp	pector (Signature)	K	//		(Date 11/07/017

<i>i</i> *										A A	100 9		
	C	ity of Portland	H	ea	lt	h l	ln	spectio	n Repo	rt	Page <u>l</u> of <u></u>		
Establishment Nam								or/Intervention			Date		
Quiznos	s 5,6		No	o. of	Re	peat	Ris	sk Factor/Inter	vention Violat	ions	Time In		_
	3 309								Score (option	(al) 100	Time Out		
License/Est. ID#	r/ a	Address			0	City/s	Sta	te	Zip Coc	le	Telephone		_
186	Y 9	1030 Brighto. Owner Name RER Assoc	1			Por	Hi	and, ME			871.1002		
License Posted		Owner Name			F	urp	ose	of Inspection	Est. Typ	ре	Risk Category		
[]Yes []No						Re	٤ -	Inspl.					
Circle desia	FOODBC nated compliance	PRNE ILLNESS RISK FA e status (IN, OUT, N/O, N/A)	CT	ORS	A	ND	PU	JBLIC HEAL					
IN= in compliance	OUT=not in con	npliance N/O=not observed	N/A	\ =not	ap	plica	ble		rrected on-site	ın appropr durina insı	iate box for COS an pection R =repeat v	d/or l	-₹ on
Compliance Status			cos	R	Gara.	Con	npl	iance Status	- Harris - Peragrapa Martinella (1911)	nanatana sa kacamatana sa kacamatan		cos	т-
5 1 (M) OUT	Superv PIC present, der	ision monstrates knowledge, and				5116	Lin	Potentiall N OUTN/A N/O	y Hazardous I	ood Tim	e/Temperature		
	performs duties		/		ŀ	5 17	IN	O/N AVAILED (Proper reheating	a procedu	res for hot holding	+./	K
5 2 WK_OUT	Employee I Management aw	areness; policy present			da salah d	5 18	111	OUT N/A (170	Rroper cooling	time & tem	nerature		A sag
5 3 NOUT	Proper use of re	porting, restriction & Exclusion			- 1	5 20	1	UT _N/A	Proper cold hol	ding tempe	eratures	+-	+
5 4 (IN)OUT N/O	Good Hygieni Proper eating, ta	c Practices sting, drinking, or tobacco use				5 21 5 22	IN	OVINA ANO	Proper date ma	rking & dis	sposition ontrol: procedures		İ
5 5 NOUT NO	No discharge fro	m eyes, nose, and mouth					Ľ	. 557 (8)/1/5	& record	ic nealth c	ortiroi, procedures		
5 6 1/IN/OUT N/O	/enting Contam Hands clean & p	ination by Hands			ŀ	5 23	Lik	OUT (N/AT	Consumer advis	Advisory	V		
2 7 IN OUTN/A N/O	No bare hand co	ntact with RTE foods or							undercooked for	ods			
7 IN OUT	Adequate handw	te method properly followed rashing facilities supplied &			/	5 24	⊤Æ	HI DUT N/A	ghly Suscepti	ble Popul	ations prohibited foods not		
	accessible		/					N/A	offered	ius usea; p	pronibited foods not		
5 9 IN OUT	Approved LFood obtained to	Source orm approved source			1	5 25	LIK	OUT (N/A)	Chen				
5 10 IN OUT N/A N/O	Food received a	proper temperature				5 26		DOUT NA	Food additives: Toxic substance	approved es properly	& properly used identified, stored,		_
5 11 IN OUT 1 12 IN OUTN/A N/O	Food in good co	ndition, safe, & unadulterated available: shellstock					_		& used				
	tags, parasite de	struction				5 27	IN	OUT (N/A)	mance with A Compliance with	p proved i n variance,	Procedures specialized		
	rotection from Food separated				-				process, & HAC	CP plan			
2 14 IN OUT N/A	Food-contact sur	faces: cleaned & sanitized				Ris	k fa	actors are impr	oper practices of	or procedu	res identified as the	mos	t
5 15 IN OUT		n of returned, previously oned, & unsafe food				Inte	vaie erve	ent contributing tentions are conti	factors of foodbo rol measures to	orne illness prevent fo	s or injury. Public Hea codborne illness or i	alth niun/	
		GOOL	RE	TAI	LF								_
Good	Retail Practices a	re preventative measures to co	ntrol	the a	add	ition	of r	nathogens chem	nicals, and physi	cal objects	into foods.		
Wark A III DOX II Huff	ibered item is not	in compliance Mark "X" in app	cos	ate bo	ox f	or CC	<u>os</u>	and/or R COS=	corrected on-site	during ins	pection R=repeat vio	lation	
5 28 Pasteurized eq	Safe Food a gs used where re								Proper Use	of Utensi	ls	COS	ĸ
5 29 Water & ice fro	m approved sourc	е	-	+		2 41 2 42	H	In-use utensils: Utensils, equipn	properly stored nent & linens: or	operly stor	ed, dried & handled		
30 Variance obtain	ed for specialized Food Tempera				2	2 43		Single-use & sir	ngle-service artic	les: proper	ly stored & used		
	methods used; ac	dequate equipment for		Н	4	2 44		Gloves used pro	operly <mark>ensil, Equipme</mark>	ent and V	endina		
temperature co Representation de la companya del companya del companya de la comp	ntrol erly cooked for he	at holding			2	2 45		Food & non-foo	d contact surfac	es cleanat	ole, properly		
33 Approved thaw	ing methods used			H	-	1 46	H	designed, const Warewashing fa	tructed, & used cilities: installed.	maintaine	d, & used; test strips		-
Thermometers	provided & accura Food Ident				Ī	47		Non-food contact	ct surfaces clear	1	a, a assa, test strips		
	abeled; original co	ontainer		Н	2	1 48		Hot & cold water	Physical er available; ade	Facilities	sure		
	vention of Food s, & animals not p	Contamination				49		Plumbing install	ed; proper backf	low device	es .	/	~
2 37 Contamination p		od preparation, storage & display	_	H		5 50		Toilet facilities:	e water properly properly constru	disposed	ied & cleaned		_
5 38 Personal cleanl 39 Wiping cloths: p	iness properly used & st	orod			2	2 52	П	Garbage & refus	se properly dispe	osed; facili	ties maintained		
40 Washing fruits 8		orea	-	Н	1		H	Adequate ventila	s installed, main ation & lighting;	tained, & c	d areas used		
		/////			_				and a ngriding,	doorgratet	a dicas used		
_	//								,	/			
Person in Charge (Sigr	nature)	M						Date	: 0//0	7/05			
		11/							/	/			
Health Inspector (Signa	ature)				-	alla		. VEO	Mahada	- "	5.		
(Oigina					1 -	ollow	-up	: YES NO	(circle one)	Follow-up	Date:		
		_										-	
	White cop	y - Inspections Office	γ	/ello	W	сор	у -	·State Pi	ink copy - Cι	ıstomer			

stablishment Name	ty of Por		orized by 22 MRS		Maray Maran and	Page	07/06
<u> </u>	Sob						•
cense/EST. ID # (Address	Brighton Are	City/State Por Hand	L, MG	Zip Code	Telephor	ne 1.1002
Item/Location	Temp	TEMPERATU	JRE OBSERVA	Temp	ltom/l		
3-bay 200 PPM		Sal Ber	cation # L	400	(h;/: H)	r/(os)	Tem _l /Y 9 Y0
Hordsink (cos)	600	Velk n	1 # 2	38	Chaesa	(cold)	40
Hardsin Cl	Signature and	Heeze	*2	5			-
	OBS	ERVATIONS A	ND CORRECT	IVE ACTIO)NS		
Item Violations cited in this	report must be co	rrected within the tir	ne frames below, or	r as stated in	sections 8-405.1	1 and 8-406.11 of	the Food C
	6 11.	<i>H</i>	du 6.1			1 11	1101
8 Maintaining 33 Approved 49 Plunsing	the sin	[[[suit Sink		service 21	ea 6-50	11.18
19 71/10000	TCHIN	(03)	<u> </u>	501.12	- <i>1</i> J		
49 Plunding	lemps	C 3-	bay/ hard	sinles	5-202	.12	
X 1	100-11204	= min and	7214	1 C	05)		
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erson in Charge (Signature)						Date	

City of Portland Health Inspection Report Page _ **Establishment Name** No. of Risk Factor/Intervention Violations Date No. of Repeat Risk Factor/Intervention Violations Time In Score (optional / ปี อิ Time Out Zip Code Telephone OY 102 License Posted Est. Type Risk Category [4] Yes [] No 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** COSR **Compliance Status** Supervision Potentially Hazardous Food Time/Temperature IN OUT PIC present, demonstrates knowledge, and IN OUTN/A N/O | Proper cooking time & temperatures performs duties IN OUTN/A N/O Proper reheating procedures for hot holding **Employee Health** 5 18 IN OUT N/A N/O Proper cooling time & temperature IN OUT 5 19 IN OUTN/A N/O Proper hot holding temperatures Management awareness; policy present Proper use of reporting, restriction & Exclusion 5 3 IN OUT N/A Proper cold holding temperatures Good Hygienic Practices 5 21 IN OUTN/A N/O Proper date marking & disposition IN OUT N/O Proper eating, tasting, drinking, or tobacco use IN OUTN/A N/O Time as a public health control: procedures N/O No discharge from eyes, nose, and mouth 5 5 IN OUT & record **Preventing Contamination by Hands** Consumer Advisory IN OUT N/O | Hands clean & properly washed 5 23 IN OUT N/A | Consumer advisory provided for raw or IN OUTN/A N/O No bare hand contact with RTE foods or undergooked foods approved alternate method properly followed Highly Susceptible Populations IN OUT Adequate handwashing facilities supplied & IN OUT N/A Pasteurized foods used; prohibited foods not accessible offered **Approved Source** Chemical I IN OUT Food obtained form approved source 5 25 IN OUT Food additives: approved & properly used 5 10 IN OUT N/A N/O Food received at proper temperature 5 26 IN OUT Toxic substances properly identified, stored, 5 11 IN OUT Food in good condition, safe, & unadulterated & used 1 12 IN OUTN/A N/O Required records available: shellstock Conformance with Approved Procedures tags, parasite destruction TUO NI N/A | Compliance with variance, specialized Protection from Contamination process, & HACCP plan 2 13 IN OUT N/A | Food separated & protected Risk factors are improper practices or procedures identified as the most 2 14 IN OUT N/A Food-contact surfaces: cleaned & sanitized prevalent contributing factors of foodborne illness or injury. Public Health IN OUT 5 15 Proper disposition of returned, previously Interventions are control measures to prevent foodborne illness or injury. served, reconditioned, & unsafe food 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 COS R Safe Food and Water Proper Use of Utensils Pasteurized eggs used where required 5 28 In-use utensils: properly stored 5 29 Water & ice from approved source 2 42 Utensils, equipment & linens: properly stored, dried & handled Variance obtained for specialized processing 30 2 43 Single-use & single-service articles: properly stored & used Food Temperature Control 2 44 Gloves used properly Proper cooling methods used; adequate equipment for Utensil, Equipment and Vending temperature control Food & non-food contact surfaces cleanable, properly 32 Plant food properly cooked for hot holding designed, constructed, & used 33 Approved thawing methods used Warewashing facilities: installed, maintained, & used; test strips 1 46 1 34 Thermometers provided & accurate 1 47 Non-food contact surfaces clean Food Identification **Physical Facilities** 1 35 Food properly labeled; original container 4 48 Hot & cold water available; adequate pressure Prevention of Food Contamination 5 49 Plumbing installed; proper backflow devices Insects, rodents, & animals not present 4 36 Sewage & waste water properly disposed 5 50 2 37 Contamination prevented during food preparation, storage & display 2 51 Toilet facilities: properly constructed, supplied, & cleaned 5 38 Personal cleanliness 2 52 Garbage & refuse properly disposed; facilities maintained 39 Wiping cloths: properly used & stored 1 53 Physical facilities installed, maintained, & clean 1 40 Washing fruits & vegetables Adequate ventilation & lighting; designated areas used Person in Charge (Signature) Health Inspector (Signature) Follow-up: YES (circle one) Follow-up Date: