268-4011

DIVISION OF ENVIRONMENTAL HEALTH MASTER COMPLAINT RECORD

	<u>MASTER</u> CC	MPLAINT RECC	RD	
INTAKE				
COMPLAINT #: 07-321 ESTAB	LISHMENT CITED IN C	OMPLAINT & ID#: Frie	ndly's # 1246	ID 909
DATE/TIME OF OCCURRENCE:	: September 18, 2007/ 10:0	00 AM		
INTAKE DATE/TIME OF COMPI	-			
	•			
LOCATION OF ESTABLISHMEN	NT: 139 Riverside Street,	Portland		
COMPLAINT DESCRIPTION: The flying around in the dining area. The			ners are eating and	there is construction debris
NATURE OF COMPLAINT: ILL	NESS/HEALTH RELATI	ED SANITATION/ENV	RONMENT	
HYGEN	NIC PRACTICES FOOI	O/INJURY SAFETY O	ГНЕК	
DECEMED DV. D. 11111				
RECEIVED BY: David Libby				1
INVESTIGATION				
PERSON (S) INTERVIEWED:	Diane	Diamora Stapl	POSITION(S):	Districe Manger and Inspection Completed SM
	N F	INSPECTION REPORT	:Y NF	ad Ingaeran
CORRECTIVE ACTION:	Construction 1 NTS: They SHO	s complete		Completed SMF
HEALTH INSPECTOR COMMEN	NTS:	·		
	They SHU	+ down for	part & a	n State of v.
	O.K.	0	<i>y</i>	
	Okay nov.			
		<i>y</i>		
SIGNATURE OF HEALTH INSPE	ECTOR: Sy ffers	10-03.0) DATE:	
SIGNATURE OF PERSON IN CH	IARGE:_ DIAN	one stantes	207-73	5 7352 By SM
REFERRALS				
KEFEKKALS	DATE/INITIAL			DATE/INITIAL
,				
DEPARMENT OF AGRICULTUR	-	DISEASE CON	ITROL	
DRINKING WATER PROGRAM	-	MUNICIPALITIES		
WASTE WATER PROGRAM		DEPARTMEN	T OF EDUCATIO	N
MARINE RESOURCES		INLAND FISHERIES A	ND WILDLIFE	
FIRE MARSHAL		STATE POLIC	E	
LIQUOR LICENSING		BOARD OF PI	ESTICIDE CONTR	OL
TOBACCO ENFORCEMENT		_ OTHER		and the second s
ADMINISTRATIVE REVIE	<u>W</u>			
FOLLOW UP NEEDED: Y	N REINSPECT:	CLOS	E INVESTIGATIC	N:
COMMENTS:	SUPERVIS	SOR SIGNATURE:		DATE:
DOA 287-3841 Marine Resources	624-6550 South Portland Mun.	. 767-7603 Auburn Mun.	333-6600 SP	800-452-4664
DWP 287-7690 Fire Marshal WWP 287-5672 Disease Control	626-3880 Portland Mun. 287-5195 Lewiston Mun.	874-8700 DOC 784-2951 IF&W	287-2211 BOP 287-2766	287-2731