

# City of Portland Health Inspection Report

Establishment Name <i>Sala Thai</i>	No. of Risk Factor/Intervention Violations		Date <i>7-28-08</i>
	No. of Repeat Risk Factor/Intervention Violations		Time In <i>10:15 AM</i>
	Score (optional) <i>96</i>		Time Out _____
License/Est. ID# <i>04481</i>	Address <i>1363 Washington Ave</i>	City/State <i>Portland, Me.</i>	Zip Code <i>04102</i>
License Posted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Owner Name <i>Maria + Ben Partner.</i>	Purpose of Inspection <i>Yearly</i>	Telephone <i>797-0871</i>
		Est. Type	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
<b>Supervision</b>					
5 1 <input checked="" type="radio"/> IN <input type="radio"/> OUT			PIC present, demonstrates knowledge, and performs duties		
<b>Employee Health</b>					
5 2 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Management awareness; policy present		
5 3 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Proper use of reporting, restriction & Exclusion		
<b>Good Hygienic Practices</b>					
5 4 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/O	Proper eating, tasting, drinking, or tobacco use		
5 5 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/O	No discharge from eyes, nose, and mouth		
<b>Preventing Contamination by Hands</b>					
5 6 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/O	Hands clean & properly washed		
2 7 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A N/O	No bare hand contact with RTE foods or approved alternate method properly followed		
5 8 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Adequate handwashing facilities supplied & accessible		
<b>Approved Source</b>					
5 9 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Food obtained from approved source		
5 10 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A N/O	Food received at proper temperature		
5 11 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Food in good condition, safe, & unadulterated		
1 12 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A N/O	Required records available: shellstock tags, parasite destruction		
<b>Protection from Contamination</b>					
2 13 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A	Food separated & protected		
2 14 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A	Food-contact surfaces: cleaned & sanitized		
5 15 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Proper disposition of returned, previously served, reconditioned, & unsafe food		
<b>Potentially Hazardous Food Time/Temperature</b>					
5 16 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A N/O	Proper cooking time & temperatures		
5 17 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A N/O	Proper reheating procedures for hot holding		
5 18 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A N/O	Proper cooling time & temperature		
5 19 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A N/O	Proper hot holding temperatures		
5 20 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A	Proper cold holding temperatures		
5 21 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A N/O	Proper date marking & disposition		
5 22 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A N/O	Time as a public health control: procedures & record		
<b>Consumer Advisory</b>					
5 23 <input type="radio"/> IN <input type="radio"/> OUT		<input checked="" type="radio"/> N/A	Consumer advisory provided for raw or undercooked foods		
<b>Highly Susceptible Populations</b>					
5 24 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A	Pasteurized foods used; prohibited foods not offered		
<b>Chemical</b>					
5 25 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A	Food additives: approved & properly used		
5 26 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Toxic substances properly identified, stored, & used		
<b>Conformance with Approved Procedures</b>					
5 27 <input checked="" type="radio"/> IN <input type="radio"/> OUT		N/A	Compliance with variance, specialized process, & HACCP plan		
<b>Risk factors</b> 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

Compliance Status	COS	R	Compliance Status	COS	R
<b>Safe Food and Water</b>					
5 28 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Pasteurized eggs used where required		
5 29 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Water & ice from approved source		
30 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Variance obtained for specialized processing		
<b>Food Temperature Control</b>					
5 31 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Proper cooling methods used; adequate equipment for temperature control		
5 32 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Plant food properly cooked for hot holding		
5 33 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Approved thawing methods used		
1 34 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Thermometers provided & accurate		
<b>Food Identification</b>					
1 35 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Food properly labeled; original container		
<b>Prevention of Food Contamination</b>					
4 36 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Insects, rodents, & animals not present		
2 37 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Contamination prevented during food preparation, storage & display		
5 38 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Personal cleanliness		
1 39 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Wiping cloths: properly used & stored		
1 40 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Washing fruits & vegetables		
<b>Proper Use of Utensils</b>					
2 41 <input checked="" type="radio"/> IN <input type="radio"/> OUT			In-use utensils: properly stored		
2 42 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Utensils, equipment & linens: properly stored, dried & handled		
2 43 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Single-use & single-service articles: properly stored & used		
2 44 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Gloves used properly		
<b>Utensil, Equipment and Vending</b>					
2 45 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
1 46 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Warewashing facilities: installed, maintained, & used; test strips		
1 47 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Non-food contact surfaces clean		
<b>Physical Facilities</b>					
4 48 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Hot & cold water available; adequate pressure		
5 49 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Plumbing installed; proper backflow devices		
5 50 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Sewage & waste water properly disposed		
2 51 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Toilet facilities: properly constructed, supplied, & cleaned		
2 52 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Garbage & refuse properly disposed; facilities maintained		
1 53 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Physical facilities installed, maintained, & clean		
1 54 <input checked="" type="radio"/> IN <input type="radio"/> OUT			Adequate ventilation & lighting; designated areas used		

Person in Charge (Signature) <i>[Signature]</i>	Date: <i>July 28, 2008</i>
Health Inspector (Signature) <i>[Signature]</i>	Follow-up: YES <input type="radio"/> <input checked="" type="radio"/> NO (circle one)    Follow-up Date: _____

# City of Portland Health Inspection Report

<b>Establishment Name</b> <i>Sala Thai</i>	As Authorized by 22 MRSA § 2496	<b>Date</b> <i>7-28-08</i>
<b>License/EST. ID #</b>	<b>Address</b> <i>1363 Washington Ave Portland, Me.</i>	<b>City/State</b> <i>Portland, Me.</i>
	<b>Zip Code</b> <i>04102</i>	<b>Telephone</b> <i>797-0871</i>

## TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
<i>Walk-in cooler</i>	<i>39°</i>	<i>Dishwasher</i>	<i>180°</i>		
<i>Upright freezer 1</i>	<i>5°</i>				
<i>Sandwich table</i>	<i>38°</i>				
<i>Upright freezer 2</i>	<i>1°</i>				
<i>Bar cooler</i>	<i>40°</i>				
<i>Bar wine cooler</i>	<i>38°</i>				
<i>Bar sink</i>	<i>110°</i>				
<i>Hand sink</i>	<i>100°</i>				

## 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.
<i>35</i>	<i>Label + date 3-601.11</i>
<i>37</i>	<i>Food stored in cooler with covers + 6' off floor 3-305.11</i>
<i>54</i>	<i>Need more lighting kitchen area 6-303</i>

<b>Person in Charge (Signature)</b> <i>[Signature]</i>	<b>Date</b> <i>7-28-08</i>
<b>Health Inspector (Signature)</b> <i>[Signature]</i>	<b>Date</b> <i>7-28-08</i>