

401 A002

City of Portland Health Inspection Report

Establishment Name <i>Sala Thai</i>		No. of Risk Factor/Intervention Violations		Date	
		No. of Repeat Risk Factor/Intervention Violations		Time In <i>7:28-09</i>	
License/Est. ID# <i>1019</i>		Address <i>1362 Washington</i>		City/State <i>OR</i>	
License Posted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Owner Name		Purpose of Inspection <i>Annex</i>	
		Zip Code		Score (optional) 96	
				Telephone	
				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
Supervision							
5 1	<input checked="" type="radio"/> IN <input type="radio"/> OUT			PIC present, demonstrates knowledge, and performs duties			
Employee Health							
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			
Good Hygienic Practices							
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			
Preventing Contamination by Hands							
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			
Approved Source							
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			
Protection from Contamination							
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			
Potentially Hazardous Food Time/Temperature							
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			
Consumer Advisory							
5 23	<input checked="" type="radio"/> IN <input type="radio"/> OUT	N/A		Consumer advisory provided for raw or undercooked foods			
Highly Susceptible Populations							
5 24	<input checked="" type="radio"/> IN <input type="radio"/> OUT	N/A		Pasteurized foods used; prohibited foods not offered			
Chemical							
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			
Conformance with Approved Procedures							
5 27	<input checked="" type="radio"/> IN <input type="radio"/> 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
5 28	Pasteurized eggs used where required			2 41	In-use utensils: properly stored		
5 29	Water & ice from approved source			2 42	Utensils, equipment & linens: properly stored, dried & handled		
30	Variance obtained for specialized processing			2 43	Single-use & single-service articles: properly stored & used		
Food Temperature Control							
5 31	Proper cooling methods used; adequate equipment for temperature control			2 44	Gloves used properly		
5 32	Plant food properly cooked for hot holding			Utensil, Equipment and Vending			
5 33	Approved thawing methods used			2 45	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
1 34	Thermometers provided & accurate			1 46	Warewashing facilities: installed, maintained, & used test strips		
Food Identification							
1 35	Food properly labeled; original container			1 47	Non-food contact surfaces clean		
Prevention of Food Contamination							
4 36	Insects, rodents, & animals not present			Physical Facilities			
2 37	Contamination prevented during food preparation, storage & display			4 48	Hot & cold water available; adequate pressure		
5 38	Personal cleanliness			5 49	Plumbing installed; proper backflow devices		
1 39	Wiping cloths: properly used & stored			5 50	Sewage & waste water properly disposed		
1 40	Washing fruits & vegetables			2 51	Toilet facilities: properly constructed, supplied, & cleaned		
				2 52	Garbage & refuse properly disposed; facilities maintained		
				1 53	Physical facilities installed, maintained, & clean		
				1 54	Adequate ventilation & lighting; designated areas used		

Person in Charge (Signature)

[Signature]

Date:

Health Inspector (Signature)

[Signature]

Follow-up: YES NO (circle one)

Follow-up Date:

401 4002

City of Portland Health Inspection Report

Establishment Name <i>Saha Thai</i>		As Authorized by 22 MRSA § 2496		Date <i>7-28-09</i>	
License/EST. ID #	Address <i>1362 Washington</i>	City/State <i>Portland ME</i>	Zip Code	Telephone	

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
	<i>40</i>				
	<i>40</i>	<i>Dishwasher</i>			
	<i>0°</i>		<i>170°</i>		

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	Observations and Corrective Actions
<i>34</i>	<i>LIGHTS REQUIRED IN coolers</i>
<i>37</i>	<i>All product must be off floor</i>
<i>46</i>	<i>Test strip for Sanitation Bucket Bleach strips</i>
	<i>Store in use utensils with handle up in food handle up scoops</i>
	<i>Very nice kitchen</i>

Person in Charge (Signature) <i>S. Jones</i>	Date <i>7-29-09</i>
Health Inspector (Signature) <i>T. V. [Signature]</i>	Date <i>7-29-09</i>