

429-0007

City of Portland Health Inspection Report

Establishment Name <i>City Deli</i>		No. of Risk Factor/Intervention Violations		Date <i>1-22-08</i>	
License/Est. ID# <i>NEW</i>		Address <i>16 Venanda</i>		Time In	
License Posted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>new</i>		Owner Name <i>Mario DeSalle</i>		Time Out	
City/State		Zip Code		Telephone	
Purpose of Inspection <i>New Items</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
 IN= in compliance OUT=not in compliance N/O=not observed N/A=not applicable
 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
Supervision									
51	IN	OUT			516	IN	OUT	N/A	N/O
		PIC present, demonstrates knowledge, and performs duties			Potentially Hazardous Food Time/Temperature				
Proper cooking time & temperatures									
Employee Health									
52	IN	OUT			517	IN	OUT	N/A	N/O
		Management awareness; policy present			Proper reheating procedures for hot holding				
53	IN	OUT			518	IN	OUT	N/A	N/O
		Proper use of reporting, restriction & Exclusion			Proper cooling time & temperature				
Good Hygienic Practices									
54	IN	OUT	N/O		519	IN	OUT	N/A	N/O
		Proper eating, tasting, drinking, or tobacco use			Proper hot holding temperatures				
55	IN	OUT	N/O		520	IN	OUT	N/A	N/O
		No discharge from eyes, nose, and mouth			Proper cold holding temperatures				
Preventing Contamination by Hands									
56	IN	OUT	N/O		521	IN	OUT	N/A	N/O
		Hands clean & properly washed			Proper date marking & disposition				
27	IN	OUT	N/A	N/O	522	IN	OUT	N/A	N/O
		No bare hand contact with RTE foods or approved alternate method properly followed			Time as a public health control: procedures & record				
58	IN	OUT			Consumer Advisory				
		Adequate handwashing facilities supplied & accessible			523	IN	OUT	N/A	
					Consumer advisory provided for raw or undercooked foods				
Approved Source									
59	IN	OUT			Highly Susceptible Populations				
		Food obtained from approved source			524	IN	OUT	N/A	
510	IN	OUT	N/A	N/O	Chemical				
		Food received at proper temperature			525	IN	OUT	N/A	
511	IN	OUT			Food additives: approved & properly used				
		Food in good condition, safe, & unadulterated			526	IN	OUT		
112	IN	OUT	N/A	N/O	Toxic substances properly identified, stored, & used				
		Required records available: shellstock tags, parasite destruction			Conformance with Approved Procedures				
Protection from Contamination									
213	IN	OUT	N/A		527	IN	OUT	N/A	
		Food separated & protected			Compliance with variance, specialized process, & HACCP plan				
214	IN	OUT	N/A		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.				
		Food-contact surfaces: cleaned & sanitized							
515	IN	OUT							
		Proper disposition of returned, previously 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

Safe Food and Water			COS	R	Proper Use of Utensils			COS	R
528		Pasteurized eggs used where required			241		In-use utensils: properly stored		
529		Water & ice from approved source			242		Utensils, equipment & linens: properly stored, dried & handled		
30		Variance obtained for specialized processing			243		Single-use & single-service articles: properly stored & used		
Food Temperature Control									
531		Proper cooling methods used; adequate equipment for temperature control			244		Gloves used properly		
532		Plant food properly cooked for hot holding			Utensil, Equipment and Vending				
533		Approved thawing methods used			245		Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
134		Thermometers provided & accurate			146		Warewashing facilities: installed, maintained, & used; test strips		
Food Identification									
135		Food properly labeled; original container			147		Non-food contact surfaces clean		
Prevention of Food Contamination									
436		Insects, rodents, & animals not present			Physical Facilities				
237		Contamination prevented during food preparation, storage & display			448		Hot & cold water available; adequate pressure		
538		Personal cleanliness			549	X	Plumbing installed; proper backflow devices		
139		Wiping cloths: properly used & stored			550		Sewage & waste water properly disposed		
140		Washing fruits & vegetables			251	X	Toilet facilities: properly constructed, supplied, & cleaned		
					252	X	Garbage & refuse properly disposed; facilities maintained		
					153	X	Physical facilities installed, maintained, & clean		
					154		Adequate ventilation & lighting; designated areas used		

Person in Charge (Signature) *[Signature]* Date: *1-23-08*

Health Inspector (Signature) *[Signature]* Follow-up: YES NO (circle one) Follow-up Date: _____

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Establishment Name <i>City Deli -</i>		As Authorized by 22 MRSA § 2496		Date <i>1-22-08</i>	
License/EST. ID # <i>New</i>	Address	City/State	Zip Code	Telephone	

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
<i>Hammer</i>	<i>160°</i>	<i>Dishwasher</i>	<i>75ppm</i>		
		<i>Sanitizing bucket</i>	<i>75ppm</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	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>53</i>	<i>mop is to stretch to air dry -</i>	<i>6.501.16-17</i>
<i>49</i>	<i>secure ^{Hand} wash sink to wall -</i>	<i>5.205.14-15</i> ✓
<i>49</i>	<i>install paper length faucet to prevent H₂O spilling on floor -</i>	<i>5.202.11</i> ✓
<i>49</i>	<i>Backflow preventor on utility sink</i>	<i>5.203.14</i> ✓
<i>51</i>	<i>self closing door on bathroom missing thermostats</i>	✓
<i>53</i>	<i>remove plywood insulation for kitchen area</i>	<i>5.202.11</i> ✓
<i>51</i>	<i>Bathroom door self closing required</i>	<i>6.501.19</i> ✓
<i>49</i>	<i>Fix Handwash Sink / secure</i>	<i>5.205.14-15</i> ✓
<i>X</i>	<i>Remove paint cans + Toxic materials</i>	

Person in Charge (Signature) <i>Cal Felt</i>	Date <i>1-23-08</i>
Health Inspector (Signature) <i>Sig Hunt</i>	Date <i>1-23-08</i>