City of Portland Health Inspection Report

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Establishment Name	No. of Risk Factor/Intervention Violations		Date 03/01/11
Casco Bay Lines	No. of Repeat Risk Factor/Intervention Violations		Time In 1120 AM
	Score (optional) 94		Time Out 1130

License/Est. ID#	Address 56 Commercial St	City/State Portland, ME	Zip Code	Telephone 774.7871

License Posted City Only 901 [✓]Yes [ ] No SL 7035	Owner Name Casco Bay Tran. Dist.	Purpose of Inspection Annual	Est. Type cl. 1 FSE	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
		Supervision		
5	1	IN OUT — PIC present, demonstrates knowledge, and performs duties		
		Employee Health		
5	2	IN OUT — Management awareness; policy present		
5	3	IN OUT — Proper use of reporting, restriction & Exclusion		
		Good Hygienic Practices		
5	4	IN OUT N/O Proper eating, tasting, drinking, or tobacco use		
5	5	IN OUT N/O No discharge from eyes, nose, and mouth		
		Preventing Contamination by Hands		
5	6	IN OUT N/O Hands clean & properly washed		
2	7	IN OUT N/A N/O No bare hand contact with RTE foods or approved alternate method properly followed		
5	8	IN OUT Adequate handwashing facilities supplied & accessible		
		Approved Source		
5	9	IN OUT Food obtained form approved source		
5	10	IN OUT N/A N/O Food received at proper temperature		
5	11	IN OUT Food in good condition, safe, & unadulterated		
1	12	IN OUT N/A N/O Required records available: shellstock tags, parasite destruction		
		Protection from Contamination		
2	13	IN OUT N/A Food separated & protected		
2	14	IN OUT N/A Food-contact surfaces: cleaned & sanitized		
5	15	IN OUT Proper disposition of returned, previously served, reconditioned, & unsafe food		

		Compliance Status	COS	R
		Potentially Hazardous Food Time/Temperature		
5	16	IN OUT N/A N/O Proper cooking time & temperatures		
5	17	IN OUT N/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 OUT N/A N/O Proper date marking & disposition		
5	22	IN OUT N/A N/O Time as a public health control: procedures & record		
		Consumer Advisory		
5	23	IN OUT N/A Consumer advisory provided for raw or undercooked foods		
		Highly Susceptible Populations		
5	24	IN OUT N/A Pasteurized foods used; prohibited foods not offered		
		Chemical		
5	25	IN OUT N/A Food additives: approved & properly used		
5	26	IN OUT Toxic substances properly identified, stored, & used		
		Conformance with Approved Procedures		
5	27	IN 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

			COS	R
		Safe Food and Water		
5	28	Pasteurized eggs used where required		
5	29	Water & ice from approved source		
	30	Variance obtained for specialized processing		
		Food Temperature Control		
5	31	Proper cooling methods used; adequate equipment for temperature control		
5	32	Plant food properly cooked for hot holding		
5	33	Approved thawing methods used		
1	34	Thermometers provided & accurate		
		Food Identification		
1	35	Food properly labeled; original container		
		Prevention of Food Contamination		
4	36	Insects, rodents, & animals not present		
2	37	Contamination prevented during food preparation, storage & display		
5	38	Personal cleanliness		
1	39	Wiping cloths: properly used & stored		
1	40	Washing fruits & vegetables		

			COS	R
		Proper Use of Utensils		
2	41	In-use utensils: properly stored		
2	42	Utensils, equipment & linens: properly stored, dried & handled		
2	43	Single-use & single-service articles: properly stored & used		
2	44	Gloves used properly		
		Utensil, Equipment and Vending		
2	45	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
1	46	Warewashing facilities: installed, maintained, & used; test strips		
1	47	Non-food contact surfaces clean		
		Physical Facilities		
4	48	Hot & cold water available; adequate pressure		
5	49	Plumbing installed; proper backflow devices		
5	50	Sewage & waste water properly disposed		
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) _CMYildart_   Date: 03/01/11

Health Inspector (Signature)

Follow-up: YES   NO   (circle one)   Follow-up Date:

44 V   1002

City of Portland Health Inspection Report

As Authorized by 22 MRSA § 2496

Date 03/01/11

Establishment Name
Casco Bay Lines

License/EST. ID #

Address 56 Comercial **City/State** Portland ME **Zip Code** **Telephone** 774.7871

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Handsink	104°F			Cooler #2	38°F
Handsink	100°F			Bring to ≤ 41°F	
(110°F to 120°F)					

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	
5	(storage) Handwashing sink provided mounted paper towels
34	Thermometers provided in cooler
X	When reach-In cooler is replaced new cooler must be NFS cert.
X	Note: 02/08/11 Coast Guard License - Single-service items used. - No food present on inspt.

Person in Charge (Signature) _cmgildart_

Health Inspector (Signature)

Date

Date 03/01/11