

CITY OF TITUSVILLE, PA FOOD ESTABLISHMENT INSPECTION REPORT

CITY OF TITUSVILLE DEPARTMENT OF HEALTH		No. of Risk Factor/Interventions Violations		Date <u>3/16/17</u>	
		No. of Repeat Risk Factor/Intervention/Violations		Current Expiration	
Establishment <u>Boonies Sports Bar</u>		Location		Phone	
License / Permit #	Permit/Holder	Purpose of Inspection Routine <input type="checkbox"/> <u>Follow-up</u> <input checked="" type="checkbox"/>	Est Type FS <input type="checkbox"/> <u>RS</u> <input checked="" type="checkbox"/> <u>RS</u> <input type="checkbox"/>	Risk Category <u>High</u> Medium Low	

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

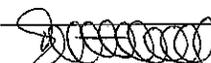
Compliance Status		COS	R	Compliance Status		COS	R
Demonstration of Knowledge							
1	IN OUT	Certification by accredited program, compliance with Code, or correct responses		16	IN OUT N/A N/O	Proper cooking time & temperatures	
					17	IN OUT N/A N/O	Proper reheating proc for hot holding
Employee Health							
2	IN OUT	Management awareness; policy present		18	IN OUT N/A N/O	Proper cooling time & temperatures	
3	IN OUT	Proper use of reporting, restriction & exclusion		19	IN OUT N/A N/O	Proper hot holding temperatures	
Good Hygienic Practices							
4	IN OUT N/O	Proper eating, tasting, drinking, or tobacco use		20	IN OUT N/A	Proper cold holding temperatures	
5	IN OUT N/O	No discharge from eyes, nose, and mouth		21	IN OUT N/A N/O	Proper date marking & disposition	
Preventing Contamination by Hands							
6	IN OUT N/O	Hands clean & properly washed		22	IN OUT N/A N/O	Time as public health control; proc & rec	
7	IN OUT N/A N/O	No bare hand contact with RTE foods or approved alternate method properly followed		Consumer Advisory			
8	IN OUT	Adequate handwashing facilities supplied & accessible		23	IN OUT N/A	Consumer advisory provided for raw or undercooked foods	
Approved Sources							
9	IN OUT	Food obtained from approved source		Highly Susceptible Populations			
10	IN OUT N/A N/O	Food received at proper temperature		24	IN OUT N/A	Pasteurized foods used; prohibited foods not offered	
11	IN OUT	Food in good condition, safe & unadulterated		Chemical			
12	IN OUT N/A N/O	Required records available: shelf stock tags, parasite destruction		25	IN OUT N/A	Food additives: approved & properly used	
Protection from contamination							
13	IN OUT N/A	Food separated & protected		26	IN OUT N/A	Toxic substances properly identified, stored & used	
14	IN OUT N/A	Food-contact surfaces: cleaned & sanitized		Conformance with Approved Procedures			
15	IN OUT	Proper disposition of returned, previously served, reconditioned & unsafe food		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			COS	R
Safe Food and Water							
28		Pasteurized eggs used where required		41		In-use utensils: properly stored	
29		Water & ice from approved source		42		Utensils, equip & linens: properly stored, dried & handled	
30		Variance obtained for specialized processing methods		43		Single-use & single-service articles: properly stored & used	
Food Temperature Control							
31		Proper cooling methods used; adequate equipment for temperature control		44		Gloves used properly	
Utensils, Equipment and Vending							
32		Plant food properly cooked for hot holding		45		Food & non-food contact surfaces cleanable, properly designed, constructed & used	
33		Approved thawing methods used		46		Warewashing facilities: installed, maintained, used; test strips	
34		Thermometers provided & accurate		47		Non-food contact surfaces clean	
Food Identification							
35		Food properly labeled; original container		Physical Facilities			
Prevention of Food Contamination							
36		Insects, rodents & animals not present; no unauthorized persons		48		Hot & cold water available; adequate pressure	
37		Contamination prevented during prep, storage & display		49		Plumbing installed; proper backflow devices	
38		Personal cleanliness		50		Sewage & waste water properly disposed	
39		Wiping cloths: properly used & stored		51		Toilet facilities: properly constructed, supplied & cleaned	
40		Washing fruits & vegetables		52		Garbage & refuse properly disposed; facilities maintained	
				53		Physical facilities installed, maintained & clean	
				54		Adequate ventilator & lighting: designated areas used	

Person in Charge (Signature) 

Follow-up: YES NO (Circle one)

Inspector (Signature) _____

Follow-up Date: _____

APPROVED **NEW** **RE-NEW** **RE-INSPECT**

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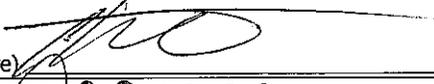
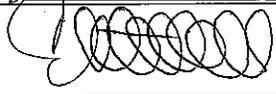
CITY OF TITUSVILLE DEPARTMENT OF HEALTH	GREASE TRAP INSTALLED Yes No	Date <u>3/16/17</u>
Establishment _____	Address/City/State/Zip Code _____	Phone _____

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Wings	32-34°F				
FEC	copy sent (Need Original)				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	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 of the food code.
	Stopped regarding violations noted during previous inspection. All which have been corrected at the time of this inspection.
	Owner states that primary kitchen employee is a food handler.
	FEC training started this Monday.
	Log sheet are by manual for cooking and cooling temperatures. First cook is 180° Final Cook is 185-200 after 7 minutes.
	Approve Renewal with re-inspection fee.

Person in Charge (Signature) <u></u>	Date: <u>3/16/17</u>
Inspector (Signature) <u></u>	Date: <u>3/16/17</u>