

CITY OF TITUSVILLE, PA FOOD ESTABLISHMENT INSPECTION REPORT

CITY OF TITUSVILLE DEPARTMENT OF HEALTH		No. of Risk Factor/Interventions Violations	Date 1/17/18
		No. of Repeat Risk Factor/Intervention/Violations	Current Expiration 1/17/2018
Establishment Subway		Location 116 N Franklin St	
License / Permit #		Phone 814-755-4475	
Contact/Permit Holder Menahem Thalkar	Purpose of Inspection Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/>	Est Type FS <input type="checkbox"/> RS <input checked="" type="checkbox"/>	Risk Category High 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				Potentially Hazardous Food Time/Temperature			
1	IN OUT			16	IN OUT N/A N/O		
Certification by accredited program, compliance with Code, or correct responses				Proper cooking time & temperatures			
Employee Health				Consumer Advisory			
2	IN OUT			17	IN OUT N/A N/O		
Management awareness; policy present				Proper reheating proc for hot holding			
3	IN OUT			18	IN OUT N/A N/O		
Proper use of reporting, restriction & exclusion				Proper cooling time & temperatures			
Good Hygienic Practices				Highly Susceptible Populations			
4	IN OUT N/O			19	IN OUT N/A N/O		
Proper eating, tasting, drinking, or tobacco use				Proper hot holding temperatures			
5	IN OUT N/O			20	IN OUT N/A		
No discharge from eyes, nose, and mouth				Proper cold holding temperatures			
Preventing Contamination by Hands				Chemical			
6	IN OUT N/O			21	IN OUT N/A N/O		
Hands clean & properly washed				Proper date marking & disposition			
7	IN OUT N/A N/O			22	IN OUT N/A N/O		
No bare hand contact with RTE foods or approved alternate method properly followed				Time as public health control; proc & rec			
8	IN OUT			Conformance with Approved Procedures			
Adequate handwashing facilities supplied & accessible				23	IN OUT N/A		
				Consumer advisory provided for raw or undercooked foods			
Approved Sources				Protection from contamination			
9	IN OUT			24	IN OUT N/A		
Food obtained from approved source				Pasteurized foods used; prohibited foods not offered			
10	IN OUT N/A N/O			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 received at proper temperature							
11	IN OUT						
Food in good condition, safe & unadulterated							
12	IN OUT N/A N/O						
Required records available: shelf stock tags, parasite destruction							
13	IN OUT N/A			GOOD RETAIL PRACTICES			
Food separated & protected				Good Retail Practices are preventative measures to control the addition of pathogens, chemicals and physical objects into foods.			
14	IN OUT N/A			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			
Food-contact surfaces: cleaned & sanitized				COS R			
15	IN OUT			COS R			
Proper disposition of returned, previously served, reconditioned & unsafe food				COS R			

Safe Food and Water		COS	R	Proper Use of Utensils		COS	R
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				44	Gloves used properly		
31	Proper cooling methods used; adequate equipment for temperature control			Utensils, Equipment and Vending			
32	Plant food properly cooled 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				Physical Facilities			
35	Food properly labeled; original container			48	Hot & cold water available; adequate pressure		
Prevention of Food Contamination				49	Plumbing installed; proper backflow devices		
36	Insects, rodents & animals not present; no unauthorized persons			50	Sewage & waste water properly disposed		
37	Contamination prevented during prep, storage & display			51	Toilet facilities: properly constructed, supplied & cleaned		
38	Personal cleanliness			52	Garbage & refuse properly disposed; facilities maintained		
39	Wiping cloths: properly used & stored			53	Physical facilities installed, maintained & clean		
40	Washing fruits & vegetables			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

