

CITY OF TITUSVILLE, PA FOOD ESTABLISHMENT INSPECTION REPORT

CITY OF TITUSVILLE DEPARTMENT OF HEALTH		No. of Risk Factor/Interventions Violations	Date	5/17/18
		No. of Repeat Risk Factor/Intervention/Violations	Current Expiration	4/4/2018
Establishment Lin's China Wok Buffet, Inc.		Location 225 W Spring St		Phone 814-827-9830
License / Permit #	Contact/Permit Holder Wen Ying Chen	Purpose of Inspection Routine Follow-up	Est Type FS RS	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							
1	IN OUT			16	IN OUT N/A N/O		
Certification by accredited program, compliance with Code, or correct responses				17	IN OUT N/A N/O		
Employee Health							
2	IN OUT			18	IN OUT N/A N/O		
Management awareness; policy present				19	IN OUT N/A N/O		
3	IN OUT			20	IN OUT N/A		
Proper use of reporting, restriction & exclusion				21	IN OUT N/A N/O		
Good Hygienic Practices							
4	IN OUT N/O			22	IN OUT N/A N/O		
Proper eating, tasting, drinking, or tobacco use				Consumer Advisory			
5	IN OUT N/O						
No discharge from eyes, nose, and mouth				23	IN OUT N/A		
Preventing Contamination by Hands							
6	IN OUT N/O			Highly Susceptible Populations			
Hands clean & properly washed							
7	IN OUT N/A N/O			24	IN OUT N/A		
No bare hand contact with RTE foods or approved alternate method properly followed				Chemical			
8	IN <u>OUT</u>		X				
Adequate handwashing facilities supplied & accessible				25	IN OUT N/A		
Approved Sources							
9	IN OUT			26	IN OUT N/A		
Food obtained from approved source				Conformance with Approved Procedures			
10	IN OUT N/A N/O						
Food received at proper temperature				27	IN OUT N/A		
11	IN OUT			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 in good condition, safe & unadulterated							
12	IN OUT N/A N/O						
Required records available: shelf stock tags, parasite destruction							
Protection from contamination							
13	IN OUT N/A						
Food separated & protected							
14	IN <u>OUT</u> N/A						
Food-contact surfaces: cleaned & sanitized							
15	IN OUT			GOOD RETAIL PRACTICES			
Proper disposition of returned, previously served, reconditioned & unsafe food							

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
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 cooled for hot holding			45	Food & non-food contact surfaces cleanable, properly designed, constructed & used		
33	<u>X</u> Approved thawing methods used			46	Warewashing facilities: installed, maintained, used: test strips		
34	<u>X</u> 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	<u>X</u> Hot & cold water available; adequate pressure		
37	<u>X</u> Contamination prevented during prep, storage & display			49	<u>X</u> Plumbing installed; proper backflow devices		
38	<u>X</u> Personal cleanliness			50	Sewage & waste water properly disposed		
39	<u>X</u> Wiping cloths: properly used & stored			51	Toilet facilities: properly constructed, supplied & cleaned		
40	<u>X</u> Washing fruits & vegetables			52	Garbage & refuse properly disposed; facilities maintained		
				53	Physical facilities installed, maintained & clean		
				54	<u>X</u> Adequate ventilator & lighting: designated areas used		

Person in Charge (Signature) _____
 Inspector (Signature) _____

Follow-up: YES NO (Circle one)

Follow-up Date: _____

APPROVED

NEW

RE-NEW

RE-INSPECT

