

CITY OF TITUSVILLE, PA FOOD ESTABLISHMENT INSPECTION REPORT

CITY OF TITUSVILLE DEPARTMENT OF HEALTH		No. of Risk Factor/Interventions Violations	Date	1/9/19
		No. of Repeat Risk Factor/Intervention/Violations	Current Expiration	1/15/2019
Establishment American Legion		Location 113 E Central Ave		Phone
License / Permit #	Contact/Permit Holder Brenda Strawbridge	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	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				18	IN	OUT	N/A	N/O	Proper cooling time & temperatures			
2	IN	OUT	Management awareness; policy present	19	IN	OUT	N/A	N/O	Proper hot holding temperatures			
3	IN	OUT	Proper use of reporting, restriction & exclusion	20	IN	OUT	N/A		Proper cold holding temperatures			
Good Hygienic Practices				21	IN	OUT	N/A	N/O	Proper date marking & disposition			
4	IN	OUT	N/O	Proper eating, tasting, drinking, or tobacco use	22	IN	OUT	N/A	N/O	Time as public health control; proc & rec		
5	IN	OUT	N/O	No discharge from eyes, nose, and mouth								
Preventing Contamination by Hands				Consumer Advisory								
6	IN	OUT	N/O	Hands clean & properly washed	23	IN	OUT	N/A	Consumer advisory provided for raw or undercooked foods			
7	IN	OUT	N/A	N/O	Highly Susceptible Populations							
8	IN	OUT	Adequate handwashing facilities supplied & accessible		24	IN	OUT	N/A	Pasteurized foods used; prohibited foods not offered			
Approved Sources				Chemical								
9	IN	OUT	Food obtained from approved source		25	IN	OUT	N/A	Food additives: approved & properly used			
10	IN	OUT	N/A	N/O	Food received at proper temperature		26	IN	OUT	N/A	Toxic substances properly identified, stored & used	
11	IN	OUT	Food in good condition, safe & unadulterated		Conformance with Approved Procedures							
12	IN	OUT	N/A	N/O	Required records available: shelf stock tags, parasite destruction	27	IN	OUT	N/A	Compliance with variance, specialized process, & HACCP plan		
Protection from contamination				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.								
13	IN	OUT	N/A									Food separated & protected
14	IN	OUT	N/A									Food-contact surfaces: cleaned & sanitized
15	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
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	X	Thermometers provided & accurate	X	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	X	Contamination prevented during prep, storage & display	X	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) _____
 Inspector (Signature) _____

Follow-up: YES NO (Circle one)

Follow-up Date: _____

APPROVED
 _____ NEW
 RE-NEW
 _____ RE-INSPECT

