

CITY OF TITUSVILLE, PA FOOD ESTABLISHMENT INSPECTION REPORT

CITY OF TITUSVILLE DEPARTMENT OF HEALTH		No. of Risk Factor/Interventions Violations	Date	7/23/19
		No. of Repeat Risk Factor/Intervention/Violations	Current Expiration	7/18/2019
Establishment Burger King #6053		Location 213 S Franklin St		Phone
License / Permit #	Contact/Permit Holder Fast Food Enterprises	Purpose of Inspection <input checked="" type="radio"/> Routine <input type="radio"/> Follow-up	Est Type FS <input checked="" type="radio"/> RS	Risk Category <input checked="" type="radio"/> High <input type="radio"/> Medium <input type="radio"/> 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			
2	IN OUT			17	IN OUT N/A N/O		
	Employee Health			Proper reheating proc for hot holding			
3	IN OUT			18	IN OUT N/A N/O		
	Management awareness; policy present			Proper cooling time & temperatures			
4	IN OUT			19	IN OUT N/A N/O		
	Proper use of reporting, restriction & exclusion			Proper hot holding temperatures			
5	IN OUT N/O			20	IN OUT N/A		
	Good Hygienic Practices			Proper cold holding temperatures			
6	IN OUT N/O			21	IN OUT N/A N/O		
	Preventing Contamination by Hands			Proper date marking & disposition			
7	IN OUT N/A N/O			22	IN OUT N/A N/O		
	Hands clean & properly washed			Time as public health control; proc & rec			
8	IN OUT			Consumer Advisory			
	No bare hand contact with RTE foods or approved alternate method properly followed			Consumer advisory provided for raw or undercooked foods			
9	IN OUT			Highly Susceptible Populations			
	Approved Sources			Pasteurized foods used; prohibited foods not offered			
10	IN OUT N/A N/O			Chemical			
	Food obtained from approved source			Food additives: approved & properly used			
11	IN OUT			Conformance with Approved Procedures			
	Food received at proper temperature			Compliance with variance, specialized process, & HACCP plan			
12	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						
13	IN OUT N/A						
	Protection from contamination						
14	IN OUT N/A						
	Food separated & protected						
15	IN OUT						
	Food-contact surfaces: cleaned & sanitized						
16	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				41	In-use utensils: properly stored		
				Pasteurized eggs used where required			
29				42	Utensils, equip & linens: properly stored, dried & handled		
				Water & ice from approved source			
30				43	Single-use & single-service articles: properly stored & used		
				Variance obtained for specialized processing methods			
31				44	Gloves used properly		
				Food Temperature Control			
32				Utensils, Equipment and Vending			
				Proper cooling methods used; adequate equipment for temperature control			
33				45	Food & non-food contact surfaces cleanable, properly designed, constructed & used		
				Plant food properly cooked for hot holding			
34				46	Warewashing facilities: installed, maintained, used: test strips		
				Approved thawing methods used			
35	<input checked="" type="checkbox"/>			47	Non-food contact surfaces clean		
				Food Identification			
36				Physical Facilities			
				Prevention of Food Contamination			
37				48	Hot & cold water available; adequate pressure		
				Insects, rodents & animals not present; no unauthorized persons			
38				49	Plumbing installed; proper backflow devices		
				Contamination prevented during prep, storage & display			
39				50	Sewage & waste water properly disposed		
				Personal cleanliness			
40				51	Toilet facilities: properly constructed, supplied & cleaned		
				Wiping cloths: properly used & stored			
41				52	Garbage & refuse properly disposed; facilities maintained		
				Washing fruits & vegetables			
42				53	Physical facilities installed, maintained & clean		
				Adequate ventilator & lighting: designated areas used			
43				54	Adequate ventilator & lighting: designated areas used		
				Thermometers provided & accurate			

Person in Charge (Signature) *[Signature]* Follow-up: YES NO (Circle one)

Inspector (Signature) *[Signature]* Follow-up Date: _____

APPROVED NEW RE-NEW RE-INSPECT

