



301 IVEN AVENUE **WAYNE, PA 19087** 610-688-5600

Retail Food Facility Inspection Report

Facility: SEASON'S PIZZA Facility ID: 136924

Owner: ANGELIA BEARD Address: 369 Lancaster AVE City/State: Wayne PA

Zip: 19087 County: Delaware Region: Region 7

Phone:

Insp. ID: 812474 Insp. Date: 9/2/2020 Insp. Reason: Regular No. of Risk Factors: 0 No. of Repeat Risk Factors: 0 Overall Compliance: IN

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS Risk Factors are important practices and procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Intervention are control measures to prevent foodborne illness or injury. IN = In Compliance, OUT = Out of Compliance, N/O = Not Observed, N/A = Not Applicable, C = Corrected On Site, R = Repeat Violation Supervision Protection From Contamination 1. Person in charge present, demonstrates knowledge, & In 14. Food separated & protected In performs duties 15. Food-contact surfaces: cleaned & sanitized In **Employee Health** 16. Proper disposition of returned, previously served, In 2. Management, food employee & conditional food employee reconditioned, & unsafe food In knowledge, responsibilities & reporting Time/Temperature Control for Safety 3. Proper use of restriction & exclusion In 17. Proper cooking time & temperatures N/O 4. Procedure for responding to vomiting & diarrheal events ln 18. Proper reheating procedures for hot holding N/O **Good Hygienic Practices** 19. Proper cooling time & temperatures N/O 5. Proper eating, tasting, drinking, or tobacco use N/O 20. Proper hot holding temperatures N/O 6. No discharge from eyes, nose, & mouth In 21. Proper cold holding temperatures In **Preventing Contamination by Hands** 22. Proper date marking & disposition ln 23. Time as a public health control: procedures & records 7. Hands clean & properly washed ln In 8. No bare hand contact with RTE food or a pre-approved Consumer Advisory In alternate method properly followed 24. Consumer advisory provided for raw / undercooked foods N/A 9. Adequate handwashing sinks properly supplied & accessible In **Highly Susceptible Population Approved Source** 25. Pasteurized foods used; prohibited foods not offered In 10. Food obtained from approved source In Food/Color Additives & Toxic Substances 11. Food received at proper temperature N/O 26. Food additives: approved & properly used In 12. Food in good condition, safe, & unadulterated In 27. Toxic substances properly identified, stored & used; held for In 13. Required records available: shellstock tags, parasite N/A retail sale, properly stored destruction **Conformance with Approved Procedures** 28. Compliance with variance, specialized process, reduced N/A oxygen packaging criteria or HACCP plan **GOOD RETAIL PRACTICES** Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Safe Food & Water Proper Use of Utensils 29. Pasteurized eggs used where required In 42. In-use utensils: properly stored ln 30. Water & ice from approved source 43. Utensils, equipment & linens: properly stored, dried & In In handled 31. Variance obtained for specialized processing methods In 44. Single-use/single-service articles: properly stored & used In Food Temperature Control 45. Gloves used properly ln 32. Proper cooling methods used; adequate equipment for ln Utensils, Equipment & Vending temperature control 46. Food & non-food contact surfaces cleanable, properly 33. Plant food properly cooked for hot holding ln ln designed, constructed, & used 34. Approved thawing methods used In 47. Warewashing facilities: installed, maintained & used; test In 35. Thermometers provided & accurate ln Food Identification 48. Non-food contact surfaces clean Out, R 36. Food properly labeled; original container ln **Physical Facilities Prevention of Food Contamination** 49. Hot & cold water available; adequate pressure ln 37. Insects, rodents & animals not present In 50. Plumbing installed; proper backflow devices In 38. Contamination prevented during food preparation, storage & In 51. Sewage & waste water properly disposed ln display 52. Toilet facilities: properly constructed, supplied, cleaned In 39. Personal cleanliness ln 53. Garbage/refuse properly disposed; facilities maintained ln 40. Wiping cloths: properly used & stored ln 54. Physical facilities installed, maintained, & clean ln 41. Washing fruit & vegetables ln 55. Adequate ventilation & lighting; designated areas used In FOOD EMPLOYEE CERTIFICATION **Certified Food Employee** Certificate 56. Certified Food Employee employed; acts as PIC; accessible 57. Certified food manager certificate: valid & properly displayed Visit Date Person In Charge Person In Charge Signature

Sig, Date

Sanitarian

9/2/2020 Marie Carbonara

Sanitarian Signature

Manu Carloner

Sig. Date

9/2/2020 Kevin Beard (No Sign

Policy)

Time Out

Time In

9/2/2020 11:00 AM 11:30 AM



Radnor Township

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				TEMPE	RATURE OBSERVA	rions			
Ite	m	Location	Temp	Item	Location	Temp	Item	Location	on Temp
Other Co		-Hold Unit	36°F	cheese	Refrigerator	38°F	Other	Walk-In Co	oler 38°F
OBSERVATIONS AND CORRECTIVE ACTIONS Violations cited in this report must be corrected within the timeframes below Item Violation of Comment Number Code							nes below	orrect By Date	Repeat Violation
48.	4 - 601.11(B- C)	Observed cook line, in the kitchen area, with encrusted grease and soil accumulation.							
48.	4 - 602.13	Non-food contact surfaces not cleaned at a frequency to preclude accumulation of dirt and soil.							Repeat Violation
				DIII	BI ISHED COMMENT	`^			

PUBLISHED COMMENTS

Correct violations within 3 days. Violations not corrected may result in additional fines or fees.

The compliance status of this facility and a copy of this inspection report will be posted on the PA Department of Agriculture website.

Please continue to follow and maintain COVID-19 guidelines at https://www.governor.pa.gov/covid-19/restaurant-industry-guidance/