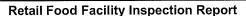
# **Radnor Township**

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



Facility: JULES THIN CRUST LLC Facility ID: 128588

Owner: JOHN ORDWAY Address: 114 E LANCASTER AVE

City/State: Wayne PA
Zip: 19087 County: Delaware Region: Region 7

Phone: (917) 658-8205

Insp. ID: 672860 Insp. Date: 5/8/2018 Insp. Reason: Regular No. of Risk Factors: 5 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 **Protection From Contamination** Supervision 14. Food separated & protected In 1. Person in charge present, demonstrates knowledge, & Out performs duties 15. Food-contact surfaces: cleaned & sanitized Out **Employee Health** 16. Proper disposition of returned, previously served, ln reconditioned, & unsafe food 2. Management, food employee & conditional food employee In knowledge, responsibilities & reporting Time/Temperature Control for Safety 3. Proper use of restriction & exclusion In N/O 17. Proper cooking time & temperatures 4. Procedure for responding to vomiting & diarrheal events In 18. Proper reheating procedures for hot holding In **Good Hygienic Practices** 19. Proper cooling time & temperatures In N/O 5. Proper eating, tasting, drinking, or tobacco use N/O 20. Proper hot holding temperatures 21. Proper cold holding temperatures In 6. No discharge from eyes, nose, & mouth In Out 22. Proper date marking & disposition **Preventing Contamination by Hands** 23. Time as a public health control: procedures & records ſn 7. Hands clean & properly washed Out **Consumer Advisory** 8. No bare hand contact with RTE food or a pre-approved 24. Consumer advisory provided for raw / undercooked foods alternate method properly followed N/A 9. Adequate handwashing sinks properly supplied & accessible Out **Highly Susceptible Population** Approved Source 25. Pasteurized foods used; prohibited foods not offered In 10. Food obtained from approved source Food/Color Additives & Toxic Substances 11. Food received at proper temperature N/O 26. Food additives: approved & properly used N/A 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 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. Proper Use of Utensils Safe Food & Water Out 42. In-use utensils: properly stored 29. Pasteurized eggs used where required In In 43. Utensils, equipment & linens: properly stored, dried & In 30. Water & ice from approved source 31. Variance obtained for specialized processing methods ln 44. Single-use/single-service articles: properly stored & used ln **Food Temperature Control** 45. Gloves used properly In 32. Proper cooling methods used; adequate equipment for In Utensils, Equipment & Vending temperature control 46. Food & non-food contact surfaces cleanable, properly In 33. Plant food properly cooked for hot holding ln designed, constructed, & used 34. Approved thawing methods used In Warewashing facilities: installed, maintained & used; test Out 35. Thermometers provided & accurate In strips Food Identification 48. Non-food contact surfaces clean ln 36. Food properly labeled; original container ln **Physical Facilities Prevention of Food Contamination** 49. Hot & cold water available; adequate pressure In 37. Insects, rodents & animals not present Out In 50. Plumbing installed; proper backflow devices 38. Contamination prevented during food preparation, storage & Out, C 51. Sewage & waste water properly disposed In 52. Toilet facilities: properly constructed, supplied, cleaned ln 39. Personal cleanliness Out, C 53. Garbage/refuse properly disposed; facilities maintained ln 40. Wiping cloths: properly used & stored Out 54. Physical facilities installed, maintained, & clean In 41. Washing fruit & vegetables In 55. Adequate ventilation & lighting; designated areas used In FOOD EMPLOYEE CERTIFICATION Certificate **Certified Food Employee** 57. Certified food manager certificate: valid & properly displayed 56. Certified Food Employee employed; acts as PIC; accessible In Sig. Date Person In Charge Person In Charge Sanitarian Signature Time Out 5/9/2018 1:45 PM 3:15 PM 5/8/2018 Marie Carbonara 5/8/2018 Tyler Sykes (Signature on Mane Carlone

File)



### **Radnor Township**

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

## **Retail Food Facility Inspection Report**

Facility: JULES THIN CRUST LLC Facility ID: 128588 Owner: JOHN ORDWAY

Address: 114 E LANCASTER AVE

City/State: Wayne PA Zip: 19087 County: Delaware Region: Region 7 Phone: (917) 658-8205

Insp. ID: 672860 Insp. Date: 5/8/2018 Insp. Reason: Regular No. of Risk Factors: 5 No. of Repeat Risk Factors: 0 Overall Compliance: IN

TEMPERATURE OBSERVATIONS										
Item	Location	Temp	ltem	Location	Temp	ltem	Location	Temp		
salsa	Other	41°F	Other	Refrigerator	40°F	lettuce	Other	51°F		
Other	Walk-In Cooler	41°F	Mozz Cheese	Prep Area	41°F			۰		

OBSERVATIONS AND CORRECTIVE ACTIONS  Violations cited in this report must be corrected within the timeframes below								
Item Number	Violation of Code	Comment	Correct By Date	Repeat Violation				
1.	2 - 102.11(A- C1)(C4-16)	Person in charge needs further Food Safety Training.		* And The Control of				
7.	2 - 301.14	Food Employee observed changing tasks that may have contaminated hands without a proper handwash in-between.		Section and the section				
7.	2 - 301.14	Food Employee observed donning single use gloves without a prior hand wash.		Victoria del				
9.	6 - 301.11	Paper towel dispenser empty at the handwash sink in the front and back kitchen area-COS						
9.	6 - 301.11	Soap was not available at the handwash sink in the front and back kitchen area-COS						
9.	6 - 301.11	Empty sanitizer bottle laying in back kitchen hand sink where no soap or paper towels present.						
15.	4 - 601.11(A)	Slicer, a food contact surface, was observed being wiped with dirty, dry wiping cloth with no sanitizer.						
15.	4 - 601.11(A)	Shelf in kitchen area for clean pots noted to have droppings. Area cleaned and sanitized on site during inspection.						
22.	3 - 501.17	Potentially hazardous ready-to-eat food prepared in the food facility and held for more than 24 hours, located in all refrigerators, is not being date marked.		**************************************				
37.	6 - 501.111	Food facility is not removing dead or trapped pests from control devices frequently, as evidenced by observed dead pest in pest control device in the basement area-COS						
37.	6 - 501.111	Potential rodent harborage areas inside the food facility observed in the basement area due to droppings along perimeter of basement and build of up trash and old boxes piled in basement.						
38.	3 - 305.11	Observed cooked food stored in kitchen area, where is it subject to splash from mop-COS						
39.	2 - 402.11	Food employee observed in front pizza area, not wearing proper hair restraints, such as nets or hats-COS						
40.	3 - 304.14	Observed wiping cloths in extremely unclean condition throughout facility.						
40.	3 - 304.14	No sanitizer wiping buckets on site during inspection-COS						
42.	3 - 304.12	Food utensils in kitchen prep area observed stored in a container of water which is not maintained at 135°F.						
47.	4 - 302.14	Food Employee is not using available sanitizer test strips or test kit to determine sanitizer concentration.						

#### **PUBLISHED COMMENTS**

Correct Violations within 3 days. Violations not corrected by first follow up inspection may result in additional fines or fees.

Maintain Professional Pest Control Services. Please send previous 3 pest control reports to Health Officer.

Label 3 bay sink with Wash, Rinse, Sanitize.

\*\*\*\*Person in charge should be enrolled into Certified Food Safety Manager Program within 1 week.

\*\*\*\*Discard Cut Lettuce by 3 pm on day of inspection as discussed, to be within 4 hour regulation period.

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

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