



FOOD ESTABLISHMENT INSPECTION REPORT

RADNOR TOWNSHIP
301 Iven Avenue - Wayne, PA 19087
Phone (610) 688-5600

FOOD ESTABLISHMENT INFORMATION

<u>FE NAME</u>	PRIMO HOAGIES	<u>LICENSE</u>	FE00001296
<u>ADDRESS</u>	362 W LANCASTER AV	<u>INSP. TYPE</u>	FEI
	WAYNE	<u>INSP. NUMBER</u>	6280
	PA 19087		
<u>MANAGER NAME</u>	THOMAS J DOLAN	<u>INSPECTION DATE</u>	9/1/2015
		<u>TIME IN</u>	
		<u>TIME OUT</u>	
		<u>PURPOSE</u>	FINAL PRE-OPENING
		<u>OVERALL COMPLIANCE</u>	IN
		<u>RISK CATEGORY</u>	

OBSERVATIONS AND CORRECTIVE ACTIONS

VIOLATIONS CITED IN THIS REPORT MUST BE CORRECTED WITHIN THE TIME FRAMES BELOW.

COMPLIANCE STATUS: OUT = not in compliance, N/O = not observed, N/A = not applicable, C = corrected on site, R = repeated

<u>COMP STAT</u>	<u>VIOLATION OF CODE</u> <u>COMMENTS</u>	<u>NEW/OLD VIOLATION</u> <u>CORRECT BY DATE</u>
10. ADEQUATE HANDWASHING SINKS, PROPERLY SUPPLIED AND ACCESSIBLE		
OUT	10. 46-5-205.11 Using a Handwashing Sink-Operation and Maintenance (Pf) THE HAND & 3 BAY SINKS DRAIN SLOWLY.	
40. PERSONAL CLEANLINESS		
OUT	40. 46-2-402.11 Effectiveness-Hair Restraints (C) HAIR RESTRAINTS INCLUDING BEARDS ARE REQUIRED FOR FOOD PREPARATION WORKERS	
51. PLUMBING INSTALLED; PROPER BACKFLOW DEVICES		
COS	51. 46-5-205.15 System Maintained in Good Repair (P, C) BATHROOM NEEDS HOT WATER, VALVE SHUT OFF	
53. TOILET FACILITIES: PROPERLY CONSTRUCTED, SUPPLIED, CLEAN		
OUT	53. 46-6-501.19 Closing Toilet Room Doors (C) THE EMPLOYEE TOILET ROOM DOOR NEEDS AN AUTOMATIC CLOSER ON THE DOOR	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

COLD / HOT HOLDING AND TEMPERATURES		WAREWASHING FACILITIES		
<u>HOLDING LOCATION</u>	<u>TEMP</u>	<u>TYPE</u>	<u>SANITIZER</u>	<u>PPM</u>
HAM	41.00	3 BAY SINK	QUATS	200
BOLOGNA	40.00	SANITIZING BUCKETS	QUATS / COS	200
CHEESE	41.00			
COLE SLAW	41.00			
PEPPERS	41.00			
W/REFRIGERATOR	36.00			
W/FREEZER	2.00			

REMARKS

VIOLATIONS SHALL BE CORRECTED WITHIN 48 HOURS UNLESS OTHERWISE SPECIFIED. NON-COMPLIANCE MAY RESULT IN PENALTIES IN ACCORDANCE WITH APPLICABLE ADOPTED RADNOR TOWNSHIP CODES. MUST POST THE RESULTS OF THE MOST RECENT FOOD SAFETY INSPECTION OR NOTICE OF CONSUMERS ABILITY TO VIEW REPORT UPON REQUEST. MUST POST CERTIFIED FOOD MANAGER CERTIFICATE & FOOD LICENSE WHERE CONSUMER CAN VIEW

SIGNATURES

Person in Charge (Signature): _____

Inspector (Signature): Larry Talton
Larry Talton