

FOOD ESTABLISHMENT INSPECTION REPORT

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

FOOD ESTABLISHMENT INFORMATION

FE NAME

LOVECCHIIOS PIZZA

<u>ADDRESS</u>

LANDOVER RD

MANAGER NAME **NEIL DESAL**

FE00001323

INSP. TYPE INSP. NUMBER FEL

6530

LICENSE

BRYN MAWR

TIME IN TIME OUT

PURPOSE

PA 19010

INSP_DATE 8/3/2016

FINAL PRE-OPENING

OVERALL COMPLIANCE

RISK CATEGORY

OUT

OBSERVATONS 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

COMP

VIOLATION OF CODE

STAT **COMMENTS** **NEW/OLD VIOLATION**

CORRECT BY DATE

10. ADEQUATE HANDWASHING SINKS, PROPERLY SUPPLIED AND ACCESSIBLE

OUT

10. 46-5-205.11 Using a Handwashing Sink-Operation and Maintenance (Pf) SINK DRAINS SLOWLY

47. FOOD AND NON-FOOD-CONTACT SURFACES CLEANABLE, PROPERLY DESIGNED, CONSTRUCTED AND USED

OUT 47. 46-4-202.11 Food-Contact Surfaces-Cleanability (Pf)

CLEAN ALL FOOD CONTACT SURFACES

OUT 47. 46- (C) 4-202.15 Can Openers

CLEAN THE COMMERCIAL CAN OPENER

51. PLUMBING INSTALLED; PROPER BACKFLOW DEVICES

OUT 51. 46-5-205.15 System Maintained in Good Repair (P, C)

ADJUST THE WATER TEMPERATURE TO BETWEEN 80f - 100f

52. SEWAGE AND WASTE WATER PROPERLY DISPOSED

OUT 52. 46-5-402.12 Grease Trap (C)

CLEAN TRAP AND RE-SECURE THE COVER ON THE TOP

55. PHYSICAL FACILITIES INSTALLED, MAINTAINED, AND CLEAN

OUT 55. 46-6-201.11 Floors, Walls and Ceilings-Cleanability (C)

CLEAN THE WALLS. & FLOORS UNDER THE STOVE, EQUIPMENT AND ALSO THE BASEMENT

OUT 55. 46-6-201.16 W all and Ceiling Coverings and Coatings (C)

REPLACE THE MISSING CEILING TILES

56. ADEQUATE VENTILATION AND LIGHTING: DESIGNATED AREAS USED

OUT 56. 46-6-202.11 Light Bulbs, Protective Shielding (C)

INSTALL THE MISSINGCOVERS OVER SEVERAL OUTLETS



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FE NAME

LOVECCHIIOS PIZZA

LICENSE

FE00001323

ADDRESS

PA 19010

INSP. TYPE INSP. NUMBER

192

LANDOVER RD

BRYN MAWR

PURPOSE

6530

MANAGER NAME

INSP. DATE ້8/3/2016 🕏

TIME IN TIME OUT

FINAL PRE-OPENING

FE

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FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

COLD / HOT HOLDING AND TEMPERATURES		WAREWASHING FACILITIES		
HOLDING LOCATION	<u>TEMP</u>	TYPE	SANITIZER	PPM
TUNA	36.00	3 BAY SINK	CHLORINE N/O	0
LUNCH MEAT	35.00	SANITIZING BUCKETS	CHLORINE	100
PIZZZA SAUCE	37.10			

REMARKS

SIGNATURES

Person in Charge (Signature):	Signed Hand curitien on File	9/12/2016
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Inspector (Signature):	Lanning Tatte	9/12/2016

Larry Taltoan

^{*} NEED A LETTER OF SURRENDER OF THE FOOD LICENSE FROM THE CURRENT FOOD OPERATOR. * ALSO MUST COMPLY WITH THE VIOLATIONS THAT WERE IDENTIFIED BY THE BUILDING INSPECTOR. * THE CHANGE OF OPERATOR WILL NOT BE APPROVED WITHOUT PASSING THE FOOD SAFETY INSPECTION & BUILDING INSPECTION.