



FOOD ESTABLISHMENT INSPECTION REPORT

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

FOOD ESTABLISHMENT INFORMATION

<u>FE NAME</u>				<u>LICENSE</u>
INSOMNIA COOKIES				FE00001213
<u>ADDRESS</u>				<u>INSP. TYPE</u> <u>INSP. NUMBER</u>
1084 E LANCASTER AV	#203 ROSEMONT		PA 19010	FEI 6484
<u>MANAGER NAME</u>	<u>INSP. DATE</u>	<u>TIME IN</u>	<u>TIME OUT</u>	<u>PURPOSE</u>
ASHLEY WINKLBAUER	5/24/2016	2:30 PM		ROUTINE
	<u>OVERALL COMPLIANCE</u>	<u>RISK CATEGORY</u>		
	IN			

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>NEW/OLD VIOLATION</u>
	<u>COMMENTS</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) FAUCET IS LOOSE ON THE HAND WASH STATION	
36.	THERMOMETERS PROVIDED AND ACCURATE	
OUT	36. 46-4-302.12 Food Temperature Measuring Devices (Pf) NEED THERMOMETER INSIDE OF ALL CHEST FREEZERS	
37.	FOOD PROPERLY LABELED; ORIGINAL CONTAINER	
COS	37. 46-3-601.12 Honestly Presented (C) DISCRD MILK DUE TO OUT DATED	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

COLD / HOT HOLDING AND TEMPERATURES		WAREWASHING FACILITIES		
HOLDING LOCATION	TEMP	TYPE	SANITIZER	PPM
W/FREEZER	12.40	3 BAY SINK	QUATS N/O	0
CHEST FREEZER	11.00			
CHEST FRREZR	14.00			
CHEST FREEER	19.00			
ICE CREAM	16.00			

REMARKS

CORRECT THE VIOLATIONS WITHIN 48 HOURS UNLESS SPECIFIED OTHERWISE. OPERATOR MUST POST FOOD LICENSE, FOOD MANAGER CERTIFICATION & INSPECTION REPORT WHERE PATRONS CAN VIEW.

SIGNATURES

Person in Charge (Signature): *Ashley Winklbauer* 5/24/2016

Inspector (Signature): *Larry Taltoan* 5/24/2016

Larry Taltoan