## RETAIL FOOD FACILITY INSPECTION REPORT

RADNOR TOWNHSIP 301 IVEN AVENUE WAYNE, PA 19087			# Risk Factor Violations	DATE	01/18/17
			#Repeat Risk Factor Violations	TIME IN	09:45am
			Overall Compliance Status	TIME OUT	11:15am
Food Facility Address SMASH BURGERS 550 E. LAN		Address	City/State	Zip	Phone #
		550 E. LANCASTER AVENUE	RADNOR, PA	19087	
Registration # Owner		Purpose of Inspection (choose one)	License Type	Risk Category	
FE00001220 KEVIN FERRELL		Routine	Retail	RETAIL FOOD	

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Risk Factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury.

Public Health interventions are control measures to prevent foodborne illness or injury.

		Demonstration of Knowledge				Protection from Contamination	
	IN	Person in charge, demonstrates knowledge & performs duties	N/A	14	IN	Food separated & protected	N/A
		Employee Health		15	IN	Food contact surfaces: cleaned and sanitized	N/A
	IN	Management, food employee & conditional employee; knowledge, responsibilities & reporting	N/A	16	IN	Proper disposition of returned, previously served, reconditioned and unsafe food.	N/A
	IN	Proper use of reporting; restriction & exclusion	N/A	17		Time/Temperature Control for Safety  Proper cooking time & temperature	
	IN	Procedures for responding to vomiting & diarrheal events		14	IN		N/A
		Good Hygienic Practices		18	IN	Proper reheating procedures for hot holding	N//
	IN	Proper eating, tasting, drinking or tobacco use	N/A	19	IN	Proper cooling time & temperature	N/A
	IN	No discharge from eyes, nose & mouth	N/A	20	IN	Proper hot holding & temperatures	N/A
		Preventing Contamination by Hands		21	IN	Proper cold holding & temperatures	N/
	IN	Hands clean & properly washed	N/A	22	IN	Proper data marking & disposition	N/
	IN	No bare hand contact with RTE foods or pre-approved alternate method properly followed	N/A	23	IN	Time as a public health control: procedures & record	N/A
	IN	Adequate handwashing sinks properly supplied and accessible  N/A				Consumer Advisory	
Approved Source			24	IN	Consumer advisory provided for raw/undercooked foods	N/	
	iN	Food obtained from approved source	N/A			Highly Susceptible Population	
	IN	Food received at proper temperature	N/A	25	25 Pasteurized food used; prohibited foods not offered IN		N/
	IN	Food in good condition, safe & unadulterated	N/A			Food/Color Additives & Toxic Substances	
	IN	Required records available, shellstock tags, parasite	N/A	26	IN	Food/Color additives: approved & properly used	N
				27	IN	Toxic substances properly identified, stored & used	N
						Conformance with Approved Procedures	
			28		Compliance with variance/specialized process/HACCP	N	

## **GOOD RETAIL PRACTICES**

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into food.

Safe Food & Water					Proper Use of Utensils					
9	IN	Pasteurized eggs used where required	N/A	42	IN	In-Use utensils; properly stored	N/A			
0	IN	Water & Ice from approved source	N/A	43	IN	Utensils, equipment & linens; properly stored, dried & handled	N/A			
1	IN	Variance obtained for specialized processing methods  N/A		44	IN	Single-use/single-service articles: properly stored & used				
		Food Temperature Control		45	IN	Gloves used properly				
2	OUT	Proper cooling methods used; adequate equipment for temperature control N/A				Utensils, Equipment & Vending				
3	IN	Plant food properly cooked for hot holding  N/A		46	IN	Food & non-food contact surfaces cleanable, properly designed, constructed, & used	N/A			
ı	IN	Approved thawing methods used	N/A	47	OUT	Warewashing facilities; installed, maintained & used; test	N/A			
	iN	Thermometers provided & accurate N/A		48	IN	Non-food contact surfaces clean	N/			
	Food Identification				Physical Facilities	100				
•	IN	Food properly labeled; original container N/A		49	IN	Hot & cold water available: adequate pressure	N/A			
		Prevention of Food Contamination		50	IN	Plumbing installed: installed, maintained & used; test	N/			
7	IN	Insects, rodents, & animals not present	N/A	51	IN	Sewage & waste water properly disposed	N/			
3	IN	Contamination prevented during food preparation, storage & display	N/A	52	оит	Toilet facilities; properly constructed, supplied, cleaned	N/A			
,	OUT	Personal cleanliness	С	53	IN	Garbage & refuse properly disposed: facilities maintained	N/			
,	IN	Wipe clothes; properly used & stored	N/A	54	оит	Physical facilities installed, maintained & clean	С			
	IN	Washing fruits & vegetables	N/A	55	OUT	Adequate ventilation & lighting: designated areas used	N			

FOOD EMPLOYEE CERTIFICATION Compliance with PA Food Employee Certification Act (3Pa.CSASS§§6501-6510)

	CERTIFIED FOOD EMPLOYEE				CERTIFICATE				
56	IN	Certified Food Employee employed; acts as PIC; accessible	N/A	57	out	Certified Food manager certificate: valid and properly displayed	N/A		

IN = in compliance, OUT = not in compliance, N/O = not observed, N/A = not applicable

C = corrected on site, R = repeated

P.I.C. Signature

Sanitarian Signature

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WAYNE, PA 19087					ompliance Status	TIME OUT	11:15am	
Food Facility Address			V 1 22	City/State		Zip	Phone #	
	SMASH BURGERS 550 E. LANCASTER AVENUE			D	RADNOR, PA of Inspection (choose one)	19087 License Type	Risk Category	
Registration # FE0000	Owner	KEVIN FERRELL		ruipose	Routine	Retail	RETAIL FOOD	
FE0000	11220	TENADEI	ATI IDE DE	CORDINGS				
			TEMI		ITEM/LOCA	TION	TEMP	
ITEM/LOCATION					11 Littly EOG	· · · · · · · · · · · · · · · · · · ·	154711	
BACON			145					
ONIONS			38					
CHEESE			38					
MUSHROOM			38					
W/REFRIGER	RATOR		39					
W/FREEZER			-6					
			WARE	NASHING I	FACILITIES			
				S	ANITIZER		PPM	
3 Bay Sink								
3 Bay Sink				QUATS			200	
				CHLORINE			N/O	
Dishwasher							200	
Wiping Cot	ns				QUATS		200	
		OB	SERVATION	S & COR	RECTIVE ACTIONS			
ITEM#				VIOLA	TION TEXT			
32	BAINE MARIE NOT WORK	ING. OPERATOR MAINTAINI	NG FOOD TEMPE	RATURE WI	TH DOUBLE ICE TRAY. MAINTENA	ANCE SCHEDULED		
39	ALL FOOD PREPARATION	N WORKERS MUST WEAR HA	IR RESTRAINTS.	CORRECT	ED WHILE ON SITE.			
47		RKING. USING 3 BAY SINK MA						
52					DS BEFORE RETURNING TO WOR			
54	MOP THE FLOOR IN THE	BACK OF THE HOUSE & UND	DER THE SODA	ISPENSOR	IN THE DINING AREA. CORRECTE	D WHILE ON SITE.		
55	RE-INSTALL THE OUTLET	COVER ON THE WALL IN TH	HE DISH ROOM					
57	POST IN PLAIN VIEW THE	E NATIONALLY RECOGNIZED	CERTIFIED FOO	D MANAGE	R CERTIFICATE, & THE MOST REC	ENT FOOD SAFETY INSPE	CTION REPORT	
	1	G THE CONSUMER OF THEIR			1111			
********	MAY RESULT IN ADDITION.	AL PENALTIES						
	IN ACCORDANCE WITH A	APPLICABLE ADOPTED RADIO	OR TOWNSHIP	CODES.				

Follow-up to be completed on sanitarian copy only

Warning Letter Requested

Prosecution Requested

Follow-up Date