RETAIL FOOD FACILITY INSPECTION REPORT

RADNOR TOWNHSIP 301 IVEN AVENUE WAYNE, PA 19087			# Risk Factor Violations # Repeat Risk Factor Violations	DATE TIME IN	06/09/17 0140pm
			Overall Compliance Status	TIME OUT	
Food Facility Address		Address	City/State	Zîp	Phone #
THE BAGEL FACTORY 968 COUNTY LINE RD			WAYNE,PA		
Registration#	Owner		Purpose of Inspection (choose one)	License Type	Risk Category
FE00001046 CINDY AKLEY,MGR		Follow Up	Retail	RETAIL	

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			
1	IN	Person in charge, demonstrates knowledge & performs duties	N/A	14	IN	Food separated & protected	N/A		
		Employee Health	M	15	IN	Food contact surfaces: cleaned and sanitized	N/A		
2	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	NVA			Time/Temperature Control for Safety			
		Procedures for responding to vomiting & diarrheal events	N/A		IN	Proper cooking time & temperature	N/A		
400	IN	Good Hygienic Practices	N/A		IN	Proper reheating procedures for hot holding	N/A		
	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			IN	Proper cold holding & temperatures	N/A		
1	IN	Hands clean & properly washed	N/A	22	IN	Proper data marking & disposition	N/A		
3	IN	No bare hand contact with RTE foods or pre-approved alternate method properly followed	N/A	23		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/A		
LO	IN	Food obtained from approved source			Highly Susceptible Population				
11	IN	Food received at proper temperature	N/A	25	IN	Pasteurized food used; prohibited foods not offered	N/A		
12	IN	Food in good condition, safe & unadulterated	N/A			Food/Color Additives & Toxic Substances			
3	IN	Required records available, shellstock tags, parasite	N/A	26	IN	Food/Color additives: approved & properly used	N/A		
				27	IN	Toxic substances properly identified, stored & used	N/A		
						Conformance with Approved Procedures			
	E	Reset Form		28	IN	Compliance with variance/specialized process/HACCP	N/A		

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		
29	IN	Pasteurized eggs used where required	N/A	42	IN	In-Use utensils; properly stored	N/A	
30	IN	Water & Ice from approved source	N/A	43	IN	Utensils, equipment & linens; properly stored, dried & handled	N/A	
31	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	N/A	
32	IN	Proper cooling methods used; adequate equipment for temperature control				Utensils, Equipment & Vending		
33	IN	Plant food properly cooked for hot holding N/A		46	IN	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
34	IN	Approved thawing methods used	N/A	47	IN	Warewashing facilities; installed, maintained & used; test	N/A	
35	IN	Thermometers provided & accurate N/A		48	48 Non-food contact surfaces clean		N/A	
Food Identification						Physical Facilities		
36	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		
37	IN	Insects, rodents, & animals not present	N/A	51	IN	Sewage & waste water properly disposed	N/A	
38	IN	Contamination prevented during food preparation, storage & display	N/A	52	IN	Toilet facilities; properly constructed, supplied, cleaned	N/A	
39	IN	Personal cleanliness	N/A	53	IN	Garbage & refuse properly disposed: facilities maintained	N/A	
10	IN	Wipe clothes; properly used & stored	N/A	54	IN	Physical facilities installed, maintained & clean	N/A	
41	IN	Washing fruits & vegetables	N/A	55	IN	Adequate ventilation & lighting: designated areas used	N/A	

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	IN	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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RADNOR TOWNHSIP				-	Factor Violations eat Risk Factor Violations	DATE TIME IN	06/09/17 0140pm				
301 IVEN AVENUE WAYNE, PA 19087					-	Il Compliance Status	TIME OUT	Отторий:			
Food Facility Address					City/S		Zip	Phone #			
				I INE BD	City/s	WAYNE,PA	2.0	T HOULE W			
Registration#				LINE NO	Durne	se of Inspection (choose one)	License Type	Risk Category			
FE000	01040	Owner	CINDY AKLEY,MGR		raipe		Retail	RETAIL			
FEUU	01040		OND AREI, MON			Follow Up	, and the second	NETAL			
100.5				TEMPE	KATUKE	RECORDINGS					
		ITEM/LOCATIO	N	TEM	P	ITEM/LO	CATION	TEMP			
	14										
								-			
				WARE	WASHIN	G FACILITIES					
						SANITIZER		PPM			
3 Bay Sink											
3 Bay Sink		10. 10. 10. 10. 10. 10. 10. 10. 10. 10.									
Dishwashe											
Wiping Co	ths				NAME OF TAXABLE PARTY.						
			OBS	ERVATION	IS & CC	PRRECTIVE ACTIONS					
ITEM#					VIO	LATION TEXT					
****	All violations from previous inspection have been corrected.										
7. W 1001525 100	All violatio	ns nom previous ms	speculor nave been corrected	*)			to consider the control of the contr				
****	Continue	to maintain daily alor	aning schedule for grill.								
	Continue	to manitain daily clea	aning scriedule for grin.	***************************************							
****	Will follow	up with district mana	ager about repairing or replac	cing soda machir	ne and/or o	abinet.					
						Φ.					
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							ACCURATION OF THE PROPERTY OF	The second secon			
- Innie - Annie - Alpus-	-										
	11										

Follow-up to be completed on sanitarian copy only!

Warning Letter Requested

Prosecution Requested

Follow-up Date