

RETAIL FOOD FACILITY INSPECTION REPORT

RADNOR TOWNSHIP 301 IVEN AVENUE WAYNE, PA 19087		# Risk Factor Violations	1	DATE	10/31/16
		# Repeat Risk Factor Violations	0	TIME IN	10:00AM
		Overall Compliance Status	IN	TIME OUT	11:00AM
Food Facility	Address	City/State		Zip	Phone #
SUSHI NAMI	367-B W. LANCASTER AVENUE	WAYNE, PA		19087	
Registration #	Owner	Purpose of Inspection (choose one)		License Type	Risk Category
FE00001322	JIAN CAO	Routine		Retail	PRE-OPENING

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	OUT	Person in charge, demonstrates knowledge & performs duties MUST OBTAIN AND PAY FEE FOR FOOD LICENSE	N/A	14	IN	Food separated & protected	N/A
Employee Health			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
3	IN	Proper use of reporting; restriction & exclusion	N/A	Time/Temperature Control for Safety			
4	IN	Procedures for responding to vomiting & diarrheal events	N/A	17	IN	Proper cooking time & temperature	N/A
Good Hygienic Practices			18	IN	Proper reheating procedures for hot holding	N/A	
5	IN	Proper eating, tasting, drinking or tobacco use	N/A	19	IN	Proper cooling time & temperature	N/A
6	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/A	
7	IN	Hands clean & properly washed	N/A	22	IN	Proper date marking & disposition	N/A
8	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
9	OUT	Adequate handwashing sinks properly supplied and accessible	N/A	Consumer Advisory			
Approved Source			24	IN	Consumer advisory provided for raw/undercooked foods	N/A	
10	IN	Food obtained from approved source	N/A	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			
13	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				
				28	IN	Compliance with variance/specialized process/HACCP	N/A

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

C = corrected on site, R = repeated

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	N/A
Food Temperature Control				45	IN	Gloves used properly	N/A
32	IN	Proper cooling methods used; adequate equipment for temperature control	N/A	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	N/A
34	IN	Approved thawing methods used	N/A	47	IN	Warewashing facilities; installed, maintained & used; test	N/A
35	OUT	Thermometers provided & accurate NEED THERMOMETERS THAT ARE EASILY READABLE	N/A	48	IN	Non-food contact surfaces clean	N/A
Food Identification				Physical Facilities			
36	OUT	Food properly labeled; original container	N/A	49	OUT	Hot & cold water available: adequate pressure WATER AT HAND SINKS TOO HOT	N/A
Prevention of Food Contamination				50	IN	Plumbing installed: installed, maintained & used; test	N/A
37	IN	Insects, rodents, & animals not present	N/A	51	IN	Sewage & waste water properly disposed	N/A
38	OUT	Contamination prevented during food preparation, storage & display CHECK THE PH OF SUSHI RICE	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
40	IN	Wipe clothes; properly used & stored	N/A	54	OUT	Physical facilities installed, maintained & clean ENTIRE FACILITY NEEDS A THOROUGH CLEANING	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

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P.I.C. Signature

Sanitarian Signature

Laura Totten

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TEMPERATURE RECORDINGS

ITEM/LOCATION	TEMP	ITEM/LOCATION	TEMP
UNDER COUNTER COOLER #1	34		
UNDER COUNTER COOLER #2	36		
SUSHI FISH COOLER	41		
BAINIE MARIE #1	40		
BAINIE MARIE #2	34		
WALKIN REFRIGERATOR	39		
WALKIN FREEZER	4		

WAREWASHING FACILITIES

	SANITIZER	PPM
3 Bay Sink	QUATS	200
3 Bay Sink		
Dishwasher	CHLORINE	75
Wiping Cloths		

OBSERVATIONS & CORRECTIVE ACTIONS

ITEM #	VIOLATION TEXT
	REMINDER;
	* THE TYPE 1 HOOD NEEDS INSPECTED EVERY 6 MONTHS AND ALL FIRE EXTINGUISHERS NEED INSPECTED 1 TIME EVERY 12 MONTHS.
	* THE FOOD FACILITY SHALL RECEIVE A GREASE TRAP, HOOD AND SEWER LATERAL CLEANING SCHEDULE TO BE COMPLIED WITH AND RECORDS KEPT ON FILE AT THE FACILITY AND MADE AVAILABLE FOR INSPECTION.
	* MUST COMPLY WITH ALL ITEMS THAT ARE NECESSARY TO OBTAIN THE CERTIFICATE OF OCCUPANCY FROM THE BUILDING INSPECTOR.
	* THE # OF SEATS CAN NOT BE DETERMINED WITHOUT THE ZONING OFFICER AND FIRE MARSHALL'S APPROVAL.
	* A DIPPING WELL IS NEEDED FOR SCOOPED ICE CREAM
	* THE ENTIRE FACILITY NEEDS CLEANING AND SHALL BE IN A "READY TO OPERATE CONDITION".
	*NEITHER THE CERTIFICATE OF OCCUPANCY OR THE FOOD LICENSE HAVE BEEN ISSUED AT THIS POINT. HAND WRITTEN SIGNED REPORT ON FILE AT THE RADNOR TOWNSHIP BUILDING.

Follow-up to be completed on sanitarian copy only!

Warning Letter Requested

Prosecution Requested

Follow-up Date