RADNOR TOWNHSIP 301 IVEN AVENUE WAYNE, PA 19087					# Risk Factor Violations  # Repeat Risk Factor Violations  Overall Compliance Status			DATE	07/28/17			
								TIME IN				
								TIME OUT				
0	od Facility			Address		City/Sta			Zip	Phone #		
		Ultimate Bake	Shoppe	389 Lancaster Ave Farmer's Mark	ket			Wayne, Pa				
le,	gistration	#	Owner			Purpose	e of Inspe	ection (choose one)	License Type	Risk Category	ν	
FE00001303 Stephanie Brown PIC					R	outine	Retail	Retail	- R R			
CALL STREET, S		ı	Risk Factors are impo	FOODBORNE ILLNESS RISK I ortant practices or procedures iden Public Health interventions are of f Knowledge	tified a	s the m	ost pre	valent contributing factors of revent foodborne illness or in	foodborne illness or injury			
	IM	Person in char	ge, demonstrates knowl	edge & performs duties		14	IN	Food separated & protected				
	IN				N/A		IN		W. Valencinion		N	
			Employee	Health		15	IN	Food contact surfaces: cleane	d and sanitized		N	
	IN	Management, food employee & conditional employee; knowledge, responsibilities & reporting			N/A	16	Proper disposition of returned, previously served, reconditioned and IN				N	
_	IN	Proper use of r	eporting; restriction & e	exclusion	11/4			Time/Temper	Time/Temperature Control for Safety			
	1	Procedures for	responding to vomiting	& diarrheal events	N/A	17	IN	Proper cooking time & temper	rature		١	
	IN		Good Hygienia	Practices	N/A	18	IN	Proper reheating procedures for	or hot holding		N	
Good Hygienic Practices  Proper eating, tasting, drinking or tobacco use				N/A	19	19 Proper cooling time & temperature				N		
	IN	No discharge fr	rom eyes, nose & mouth		N/A	20	20 Proper hot holding & temperatures				I	
		Prev	enting Contami	nation by Hands		21	IN	Proper cold holding & tempera	atures	32	i N	
	IN		properly washed		N/A	22	IN	Proper data marking & disposi	ition		I	
	IN	No bare hand contact with RTE foods or pre-approved alternate method properly followed			N/A	23	23 Time as a public health control: procedures & record				N	
	IN	Adequate hand	dwashing sinks properly	supplied and accessible	N/A			Cons	umer Advisory			
1100000			Approved S	Source		24	IN	Consumer advisory provided for	or raw/undercooked foods		N	
	IN	Food obtained	from approved source	<	N/A			Highly S	iusceptible Population			
	IN	Food received	at proper temperature	۵	N/A	25	IN	Pasteurized food used; prohibi	ited foods not offered		N	
	IN	Food in good o	ondition, safe & unadult	erated	N/A		************	LEAST ALL THE THE RESIDENCE OF THE PARTY OF	litives & Toxic Substa	nces		
	IN	Required recor	ds available, shellstock	tags, parasite	N/A	1 26	IN	Food/Color additives: approve	ed & properly used		N	
			2			27	IN	Toxic substances properly iden	ntified, stored & used		N	
								Conformance w	ith Approved Proced	ures		
						28	THE PERSON NAMED IN COLUMN	Compliance with variance/spe	cialized process/HACCP		T	

IN

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
80	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	OUT	Single-use/single-service articles: properly stored & used store single use items handle up	N/A
10000		Food Temperature Control		45	IN	Gloves used properly	N/a
2	IN	Proper cooling methods used; adequate equipment for temperature control	N/A			Utensils, Equipment & Vending	2000000
3	IN	Plant food properly cooked for hot holding		46	IN	Food & non-food contact surfaces cleanable, properly designed, constructed, & used	N/A
4	IN	Approved thawing methods used	N/A	47	IN	Warewashing facilities; installed, maintained & used; test	N/A
5	IN	Thermometers provided & accurate	N/A	48	OUT	Non-food contact surfaces clean Clean under ovens	N/A
		Food Identification				Physical Facilities	
6	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/A
7	IN	Insects, rodents, & animals not present	N/A	51	IN	Sewage & waste water properly disposed	N/A
8	OUT	Contamination prevented during food preparation, storage & display  Do not store food on floor under oven, at least 6 inches off floor	N/A	52	IN	Toilet facilities; properly constructed, supplied, cleaned	N/A
9	IN	Personal cleanliness	N/A	53	IN	Garbage & refuse properly disposed: facilities maintained	N/A
0	оит	Wipe clothes; properly used & stored	N/A	54	IN	Physical facilities installed, maintained & clean	N/A
1	IN	Washing fruits & vegetables	N/A	55	IN	Adequate ventilation & lighting: designated areas used	N/A
		FOOD EMPLOYEE CERTIFICATION Compliance	with P	A Foo	d Empl	oyee Certification Act (3Pa.CSASS§§6501-6510)	
		CERTIFIED FOOD EMPLOYEE				CERTIFICATE	
6	IN	Certified Food Employee employed; acts as PIC; accessible	N/A	57	IN	Certified Food manager certificate: valid and properly displayed	N/A

N/A

IN

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

C = corrected on site, R = repeated

N/A

RADNOR TO				# Risk Factor Violations			07/28/17
301 IVEN A				# Repeat Risk Factor Violations	TIIV	1E IN	
WAYNE, PA	T3081			Overall Compliance Status	TIME	E OUT	- 200 100 200 200
Food Facility		Address		City/State	Z	ľip .	Phone #
	Itimate Bake Shoppe	389 Lancaster Ave	e Farmer's Market	Wayne, Pa			
Registration #	Owner			Purpose of Inspection (choose one)	Licens	se Туре	Risk Category
FE0000	1303	Stephanie Brown PIC		Routine	Re	etail	Retail
			TEMPERA	ATURE RECORDINGS			
	ITEM/LOCATION		TEMP	ITEI	M/LOCATION		TEMP
freezer			21				
reach in			40				
Cacillii			40	-			
					-		
					11000		
			WAREW	ASHING FACILITIES			
				SANITIZER			PPM
				JAMILIZEN		de constantante	
3 Bay Sink							
3 Bay Sink							
3 Bay Sink 3 Bay Sink Dishwasher Wiping Coth				use chlorine for food prep are	eas		N/A
3 Bay Sink Dishwasher		OB	SFRVATIONS				N/A
Bay Sink  Dishwasher  Wiping Coth		ОВ	SERVATIONS	& CORRECTIVE ACTIONS			N/A
Bay Sink  Dishwasher  Wiping Coth		ОВ	SERVATIONS				N/A
Bay Sink  Dishwasher  Wiping Coth		ОВ	SERVATIONS	& CORRECTIVE ACTIONS			N/A
3 Bay Sink Dishwasher		ОВ	SERVATIONS	& CORRECTIVE ACTIONS			N/A
3 Bay Sink Dishwasher Wiping Coth	15	OB	SERVATIONS	& CORRECTIVE ACTIONS			N/A
Bay Sink Dishwasher Wiping Coth		ОВ	SERVATIONS	& CORRECTIVE ACTIONS			N/A
3 Bay Sink Dishwasher Wiping Coth	15	ОВ	SERVATIONS	& CORRECTIVE ACTIONS			N/A
Bay Sink  Dishwasher  Wiping Coth	15	ОВ	SERVATIONS	& CORRECTIVE ACTIONS			N/A
3 Bay Sink Dishwasher Wiping Coth	15	ОВ	SERVATIONS	& CORRECTIVE ACTIONS			N/A
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3 Bay Sink Dishwasher Wiping Coth	15	ОВ	SERVATIONS	& CORRECTIVE ACTIONS			N/A
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3 Bay Sink Dishwasher Wiping Coth	15	ОВ	SERVATIONS	& CORRECTIVE ACTIONS			N/A
3 Bay Sink Dishwasher Wiping Coth	15	ОВ	SERVATIONS	& CORRECTIVE ACTIONS			N/A

Follow-up to be completed on sanitarian copy only!

Warning Letter Requested Prosecution Requested

Follow-up Date