

**RETAIL FOOD FACILITY INSPECTION REPORT**

<b>RADNOR TOWNSHIP</b>		# Risk Factor Violations	0	DATE	11/22/16
<b>301 IVEN AVENUE</b>		# Repeat Risk Factor Violations	0	TIME IN	10:15AM
<b>WAYNE, PA 19087</b>		Overall Compliance Status	IN	TIME OUT	11:45AM
Food Facility	Address	City/State	Zip	Phone #	
SPRING MILL BREAD COMPANY	128 E LANCASTER AVENUE	WAYNE, PA	19087		
Registration #	Owner	Purpose of Inspection (choose one)		License Type	Risk Category
FE00001275	LORI KERPOUS	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			
1	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
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	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
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

**Reset Form**

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 <b>NEED IN THE BASEMENT FREEZER</b>	N/A	48	OUT	Non-food contact surfaces clean <b>COMMERCIAL CAN OPENER NEEDS CLEANED</b>	C
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	N/A
37	OUT	Insects, rodents, & animals not present <b>CONTINUE WITH PROFESSIONAL EXTERMINATION AND CLEANING</b>	C	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
40	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	OUT	Certified Food Employee employed; acts as PIC; accessible <b>POST WHERE THE CONSUMER CAN VIEW ALONG WITH THE FOOD</b>	C	57	IN	Certified Food manager certificate: valid and properly displayed <b>POST WHERE THE CONSUMER CAN VIEW</b>	C

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

*Imboly Mue*

*Laura Teller*

<b>RADNOR TOWNSHIP</b> <b>301 IVEN AVENUE</b> <b>WAYNE, PA 19087</b>		# Risk Factor Violations	0	DATE	11/22/16
		# Repeat Risk Factor Violations	0	TIME IN	10:15AM
		Overall Compliance Status	IN	TIME OUT	11:45AM
Food Facility	Address	City/State		Zip	Phone #
SPRING MILL BREAD COMPANY	128 E LANCASTER AVENUE	WAYNE, PA		19087	
Registration #	Owner	Purpose of Inspection (choose one)		License Type	Risk Category
FE00001275	LORI KERPOUS	Routine		Retail	RETAIL FOOD

**TEMPERATURE RECORDINGS**

ITEM/LOCATION	TEMP	ITEM/LOCATION	TEMP
TRUE DOUBLE DOOR REFRIGERATER	40		
MILK	41		
LUNCHEON MEATS	39		
CHEESE	40		

**WAREWASHING FACILITIES**

	SANITIZER	PPM
3 Bay Sink		
3 Bay Sink		
Dishwasher		
Wiping Coths		

**OBSERVATIONS & CORRECTIVE ACTIONS**

ITEM #	VIOLATION TEXT
NOTE	THE SMOKE DETECTOR BATTERY NEEDS CHANGED CORRECTED WHILE ON SITE

VIOLATIONS SHALL BE CORRECTED WITHIN 48 HOURS UNLESS OTHERWISE SPECIFIED. NON-COMPLIANCE MAY RESULT IN PENALTIES IN ACCORDANCE WITH APPLICABLE ADOPTED RADNOR TOWNSHIP CODES.

Follow-up to be completed on sanitarian copy only!

Warning Letter Requested

Prosecution Requested

Follow-up Date