¨ Failed ¨ Closed ¨ IHH

State of Maine Health Inspection Report

Establishment Name	As Authorized by 22 MRSA § 2496	No. of Risk Factor/InterventionViolations	2	Date	7/18/2014
AMIGOS		No. of Repeat Risk factor / Intervention Violations	1	Time In	12:00 PM
		Score (optional)		Time Out	2:00 PM

License Expiry Date/EST. ID#	Address	City	Zip Code	Telephone
2/28/2015 / 905	9 DANA ST	PORTLAND	04101-4014	207-772-0772

License Type	Owner Name	Purpose of Inspection	License Posted	Risk Category
MUN - EATING PLACE - SEATING	MILLS, BRUCE	Regular	Yes	High

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item — Mark"X" in appropriate box for COS and/or R

IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable — COS=corrected on-site during inspection R=repeat violation

	Compliance Status		COS	R
		Supervision		
1	IN	PIC present, demonstrates knowledge, and performs duties		
		Employee Health		
2	IN	Management awareness; policy present		
3	IN	Proper use of reporting, restriction & exclusion		
		Good Hygienic Practices		
4	IN	Proper eating, tasting, drinking, or tobacco use		
5	IN	No discharge from eyes, nose, and mouth		
		Preventing Contamination by Hands		
6	IN	Hands clean & properly washed		
7	IN	No bare hand contact with RTE foods or approved alternate method properly followed		
8	OUT	Adequate handwashing facilities supplied & accessible		X
		Approved Source		
9	IN	Food obtained from approved source		
10	IN	Food received at proper temperature		
11	IN	Food in good condition, safe, & unadulterated		
12	IN	Required records available: shellstock tags parasite destruction		
		Protection from Contamination		
13	IN	Food separated & protected		
14	OUT	Food-contact surfaces: cleaned and sanitized		
15	IN	Proper disposition of returned, previously served, reconditioned, & unsafe food		

	Compliance Status		COS	R
		Potentially Hazardous Food Time/Temperature		
16	IN	Proper cooking time & temperatures		
17	IN	Proper reheating procedures for hot holding		
18	IN	Proper cooling time & temperatures		
19	IN	Proper hot holding temperatures		
20	IN	Proper cold holding temperatures		
21	IN	Proper date marking & disposition		
22	IN	Time as a public health control: procedures & record		
		Consumer Advisory		
23	IN	Consumer advisory provided for raw or undercooked foods		
		Highly Susceptible Populations		
24	IN	Pasteurized foods used; prohibited foods not offered		
		Chemical		
25	IN	Food additives: approved & properly used		
26	IN	Toxic substances properly identified, stored & used		
		Conformance with Approved Procedures		
27	IN	Compliance with variance, specialized process, & HACCP plan		

Risk Factors are improper 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.

GOOD RETAIL PRACTICES

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

Mark "X" in box if numbered item is not in compliance — Mark "X" in appropriate box for COS and/or R — COS=corrected on-site during inspection R=repeat violation

			COS	R
		Safe Food and Water		
28	IN	Pasteurized eggs used where required		
29	IN	Water & ice from approved source		
30	IN	Variance obtained for specialized processing methods		
		Food Temperature Control		
31	X	Proper cooling methods used; adequate equipment for temperature control	x	
32	IN	Plant food properly cooked for hot holding		
33	IN	Approved thawing methods used		
34	IN	Thermometers provided and accurate		
		Food Identification		
35	IN	Food properly labeled; original container		
		Prevention of Food Contamination		
36	IN	Insects, rodents, & animals not present		
37	IN	Contamination prevented during food preparation, storage & display		
38	IN	Personal cleanliness		
39	IN	Wiping cloths: properly used & stored		
40	IN	Washing fruits & vegetables		

			COS	R
		Proper Use of Utensils		
41	IN	In-use utensils: properly stored		
42	IN	Utensils, equipment, & linens: properly stored, dried, & handled		
43	IN	Single-use & single-service articles: properly stored & used		
44	IN	Gloves used properly		
		Utensils, Equipment and Vending		
45	X	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
46	IN	Warewashing facilities: installed, maintained, & used; test strips		
47	IN	Non-food contact surfaces clean		
		Physical Facilities		
48	IN	Hot & cold water available; adequate pressure		
49	X	Plumbing installed; proper backflow devices		
50	IN	Sewage & waste water properly disposed		
51	IN	Toilet facilities: properly constructed, supplied, & cleaned		
52	IN	Garbage & refuse properly disposed; facilities maintained		
53	X	Physical facilities installed, maintained, & clean		
54	X	Adequate ventilation & lighting; designated areas used		

Person in Charge (Signature) Bruce A Mills Date: 7/18/2014

Health Inspector (Signature) Tom Williams

Follow-up: ¨ YES ÞNO Date of Follow-up:

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AMIGOS		

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Temperature Observations

Location	Temperature	Notes
BEANS/ HOT HOLD	135F	
H.W.@HANDWASH	102F	
SANITIZER/ QUAT	200 PPM	
MILK/ BAR COOLER	36F	
SALSA/ SAND. UNIT	41F	

GROUND BEEF/ WALKIN	41F	

Person in Charge (Signature) Tom Williams Date: 7/18/2014

Health Inspector (Signature) Tom Williams

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Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

8: 5-203.11: C: Inadequate number of hand wash facilities.

INSPECTOR NOTES: **REPEAT** NO HANDWASH SINK AT PATIO BAR. NO HANDWASH SINK AT UPSTAIRS BAR.

8: 6-301.11: N: Hand cleanser not available at hand wash sink or lavatory.

INSPECTOR NOTES: **REPEAT**NEED SOAP AT HANDWASH SINKS.

8: 6-301.12: N: Sanitary towels / hand drying device not provided for hand wash sink or lavatory.

INSPECTOR NOTES: **REPEAT** NEED PAPER TOWELS.

8: 6-301.14: N: Hand wash signage not provided for employee hand sink or lavatory.

INSPECTOR NOTES: NEED EMPLOYEE REMINDER IN RESTROOM. LEFT HANDOUT

14: 4-602.11.(E): N: Non-potentially hazardous food contact surfaces are not cleaned with proper frequency.

INSPECTOR NOTES: ICE MACHINE HAS MOLD IN HEAD UNIT, NEEDS CLEANING. DISCONTINUE USE.

31: 3-501.15: N: Cooked foods improperly cooled.

INSPECTOR NOTES: **COS**GROUND BEEF COOLING IN DEEP CONTAINER. PLACED IN A HOTEL PAN AND LEFT UNCOVERED.

45: 4-501.11: N: Equipment in disrepair.

INSPECTOR NOTES: FREEZER DOOR BROKEN, INSULATION EXPOSED.

49: 5-203.13: N: Inadequate number of service sinks.

INSPECTOR NOTES: NEED MOP SINK INSTALLED.

53: 6-501.11: N: The physical facilities are in disrepair.

INSPECTOR NOTES: ELECTRICAL BOX IN CEILING OF BEER COOLER BROKEN.

53: 6-501.12: N: The physical facilities are not clean.

INSPECTOR NOTES: BEER COOLER WALLS, CEILING, FAN GAURDS NEED MOLD REMEDIATION. FLOORS UNDER EQUIPMENT IN KITCHEN AND STOVE NEED CLEANING.

54: 6-202.11: N: Lights not shielded.

INSPECTOR NOTES: **REPEAT**NEED LIGHT SHEILDS IN KITCHEN.

Person in Charge (Signature) & Ann G Mills Date: 7/18/2014

Health Inspector (Signature) Tom Williams

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AMIGOS					
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Inspection Notes

BE ADVISED: MAINE FOOD CODE PROHIBITS BARE HAND CONTACT WITH READY TO EAT FOODS
Certified Food Protection Manager: Elizabeth Tavares 1/25/11 PIC: Asher Shryock Owner: Bruce Mills
- Unless directed otherwise, effective January 18, 2012 establishments have to have a Certified Food Protection Manager (CFPM) at each establishment as required by 10-144 CMR, Chapter 201, Section 2.
- A CFPM must be hired within 90 days of a new establishment opening or when the only CFPM leaves the employment of the establishment. .
- For a list of CFPM courses and trainers go to: www.maine.gov/healthinspection/training.htm
- Upon completion of the CFPM course, please fax cover sheet and course certificate to (207) 287-3165. On the cover letter please send to the attention of Carol Gott and include your establishment name and establishment license number. Her Phone number is 287-5675. You can also mail a copy, with establishment ID number, to her at 286 Water St, 3rd Floor, 11 State House Station, Augusta, ME 04333-0011.

Violation Correction Time Frame
- Critical Violations should be corrected on site, but, in any event, within 10 days. The licensee must contact the inspector when the critical violation has been addressed. Please send an e-mail to tw@portlandmaine.gov or call Tom Williams at 874-8772.
- Non-critical violations must be corrected no later than 90 calendar days after the inspection. The Department may approve a compliance schedule that extends beyond the time limits if a written schedule of compliance is submitted by the Permit Holder and no health hazard exists or will result from allowing an extended schedule for compliance.
- Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department, which are outlined in Sections 6, 7, 8 and 9 of 10-144 CMR Chapter 201 available at:
www.maine.gov/dhhs/mecdc/environmental-health/el/index.htm

C=Critical violation and NC=Noncritical violation
"Critical item" means a provision of the Food Code that, if in noncompliance, is more likely than other violations to contribute to food contamination, illness, or environmental health hazard.

Sec. 11-40. Penalties.
Following the issuance of a failed inspection notice and an order to correct violations, the health inspector will re-inspect the premises at a fee of seventy five dollars ($75.00); if the follow up inspection results in another failed inspection, the violator will be charged a second re-inspection fee of one hundred fifty dollars ($150.00). If the third re-inspection results in a failed inspection, the third and each subsequent follow-up re-inspection will result in a three hundred dollar ($300.00) per re-inspection charge. In addition, upon the third failed re-inspection, the health inspector may order the establishment closed until the establishment yields a passing inspection.

Documentation Retention
- A copy of the most recent inspection report must be maintained at the establishment and be made available to the public upon request.
- A copy of all CFPM certificates must be maintained at the establishment.
- The establishment's current license must be displayed.

Person in Charge (Signature) Bruce A Mills Date: 7/18/2014

Health Inspector (Signature) Tom Williams