¨ Failed ¨ Closed ¨ IHH

# State of Maine Health Inspection Report



| | | | |
|---|---|---|---|
| Establishment Name: AMVETS-POST 25 | *As Authorized by 22 MRSA § 2496* | No. of Risk Factor/InterventionViolations: 2 | Date: 8/13/2013 |
| | | No. of Repeat Risk factor / Intervention Violations: 0 | Time In: 3:30 PM |
| | | Score *(optional)* | Time Out: 4:30 PM |

| License Expiry Date/EST. ID# | Address | City | Zip Code | Telephone |
|---|---|---|---|---|
| 12/28/2013 / 964 | 186 WASHINGTON AVE | PORTLAND | 04101-2632 | 207-772-9577 |

| License Type | Owner Name | Purpose of Inspection | License Posted | Risk Category |
|---|---|---|---|---|
| MUN - EATING PLACE - SEATING | CHARLES J LORING JR-POST | Regular | Yes | Low |

## 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 | | |
| | | **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 | IN | 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 | OUT | 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 | IN | Proper cooling methods used; adequate equipment for temperature control | | |
| 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 | IN | 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 | IN | 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 | IN | Physical facilities installed, maintained, & clean | | |
| 54 | IN | Adequate ventilation & lighting; designated areas used | | |

Person in Charge (Signature) — Date: 8/13/2013

Health Inspector (Signature) — Follow-up: ¨ YES ÞNO Date of Follow-up:

# State of Maine Health Inspection Report



| Establishment Name | As Authorized by 22 MRSA § 2496 | Date 8/13/2013 |
|---|---|---|
| AMVETS-POST 25 | | |

| License Expiry Date/EST. ID# | Address | City / State | Zip Code | Telephone |
|---|---|---|---|---|
| 12/28/2013 / 964 | 186 WASHINGTON AVE | PORTLAND / ME | 04101-2632 | 207-772-9577 |

## Temperature Observations

| Location | Temperature | Notes |
|---|---|---|
| BEER COOLER | 40F | |
| REFRIGERATOR | 40F | |

Person in Charge (Signature) Date: 8/13/2013

Health Inspector (Signature)

# State of Maine Health Inspection Report

| Establishment Name | License Expiry Date/EST. ID# | Address | City / State | | Zip Code | Date |
|---|---|---|---|---|---|---|
| AMVETS-POST 25 | 12/28/2013 / 964 | 186 WASHINGTON AVE | PORTLAND | ME | 04101-2632 | 8/13/2013 |

## 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: 6-301.14: N: Handwash signage not provided for employee hand wash lavatory.

INSPECTOR NOTES: NEED HANDWASH REMINDER IN RESTROOMS

26: 7-202.12: C: Poisonous or toxic materials are being improperly used / applied.

INSPECTOR NOTES: CHLORINE SANITIZER AT TOXIC LEVEL/ OVER 200PPM.

Person in Charge (Signature) Date: 8/13/2013

Health Inspector (Signature)

# State of Maine Health Inspection Report

| Establishment Name | | | | | Date 8/13/2013 |
|---|---|---|---|---|---|
| AMVETS-POST 25 | | | | | |
| License Expiry Date/EST. ID# | Address | City / State | | Zip Code | |
| 12/28/2013 / 964 | 186 WASHINGTON AVE | PORTLAND | ME | 04101-2632 | |

## Inspection Notes

Certified Food Protection Manager: Not required
- 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 classes in Portland and signup sheet email: tw@portlandmaine.gov.
- For a list of CFPM courses and trainers got 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.
Tips & Reminders
www.portlandmaine.gov/hhs/foodserviceinspections.asp?

**Person in Charge (Signature)** **Date: 8/13/2013**

**Health Inspector (Signature)**