

Establishment Name <b>COFFEE BY DESIGN INC</b>	As Authorized by 22 MRSA § 2496	No. of Risk Factor/Intervention Violations	<b>2</b>	Date	<b>8/6/2013</b>
		No. of Repeat Risk factor / Intervention Violations	<b>0</b>	Time In	<b>10:30 AM</b>
		Score (optional)		Time Out	<b>11:45 AM</b>

License Expiry Date/EST. ID# <b>4/17/2014 / 6947</b>	Address <b>620 CONGRESS ST</b>	City <b>PORTLAND</b>	Zip Code <b>04106-2409</b>	Telephone <b>207-772-5533</b>
License Type <b>MUN - EATING PLACE - SEATING</b>	Owner Name <b>SPEAR, ALAN G &amp; LINDEMANN</b>	Purpose of Inspection <b>Regular</b>	License Posted <b>Yes</b>	Risk Category <b>Low</b>

**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	Compliance Status		cos	R
<b>Supervision</b>					<b>Potentially Hazardous Food Time/Temperature</b>			
1	IN	PIC present, demonstrates knowledge, and performs duties			16	IN	Proper cooking time & temperatures	
<b>Employee Health</b>					17	IN	Proper reheating procedures for hot holding	
2	IN	Management awareness; policy present			18	IN	Proper cooling time & temperatures	
3	IN	Proper use of reporting, restriction & exclusion			19	IN	Proper hot holding temperatures	
<b>Good Hygienic Practices</b>					20	IN	Proper cold holding temperatures	
4	IN	Proper eating, tasting, drinking, or tobacco use			21	IN	Proper date marking & disposition	
5	IN	No discharge from eyes, nose, and mouth			22	IN	Time as a public health control: procedures & record	
<b>Preventing Contamination by Hands</b>					<b>Consumer Advisory</b>			
6	IN	Hands clean & properly washed			23	IN	Consumer advisory provided for raw or undercooked foods	
7	IN	No bare hand contact with RTE foods or approved alternate method properly followed			<b>Highly Susceptible Populations</b>			
8	OUT	Adequate handwashing facilities supplied & accessible	X		24	IN	Pasteurized foods used; prohibited foods not offered	
<b>Approved Source</b>					<b>Chemical</b>			
9	IN	Food obtained from approved source			25	IN	Food additives: approved & properly used	
10	IN	Food received at proper temperature			26	OUT	Toxic substances properly identified, stored & used	X
11	IN	Food in good condition, safe, & unadulterated			<b>Conformance with Approved Procedures</b>			
12	IN	Required records available: shellstock tags parasite destruction			27	IN	Compliance with variance, specialized process, & HACCP plan	
<b>Protection from Contamination</b>					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.			
13	IN	Food separated & protected			<b>GOOD RETAIL PRACTICES</b>			
14	IN	Food-contact surfaces: cleaned and sanitized			Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.			
15	IN	Proper disposition of returned, previously served, reconditioned, & unsafe food			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			

Safe Food and Water			cos	R	Proper Use of Utensils		cos	R
28	IN	Pasteurized eggs used where required			41	IN	In-use utensils: properly stored	
29	IN	Water & ice from approved source			42	IN	Utensils, equipment, & linens: properly stored, dried, & handled	
30	IN	Variance obtained for specialized processing methods			43	IN	Single-use & single-service articles: properly stored & used	
<b>Food Temperature Control</b>					44	IN	Gloves used properly	
31	IN	Proper cooling methods used; adequate equipment for temperature control			<b>Utensils, Equipment and Vending</b>			
32	IN	Plant food properly cooked for hot holding			45	IN	Food & non-food contact surfaces cleanable, properly designed, constructed, & used	
33	IN	Approved thawing methods used			46	X	Warewashing facilities: installed, maintained, & used; test strips	
34	IN	Thermometers provided and accurate			47	IN	Non-food contact surfaces clean	
<b>Food Identification</b>					<b>Physical Facilities</b>			
35	IN	Food properly labeled; original container			48	IN	Hot & cold water available; adequate pressure	
<b>Prevention of Food Contamination</b>					49	X	Plumbing installed; proper backflow devices	
36	IN	Insects, rodents, & animals not present			50	IN	Sewage & waste water properly disposed	
37	IN	Contamination prevented during food preparation, storage & display			51	X	Toilet facilities: properly constructed, supplied, & cleaned	
38	IN	Personal cleanliness			52	IN	Garbage & refuse properly disposed; facilities maintained	
39	IN	Wiping cloths: properly used & stored			53	X	Physical facilities installed, maintained, & clean	
40	IN	Washing fruits & vegetables			54	IN	Adequate ventilation & lighting; designated areas used	

Person in Charge (Signature) \_\_\_\_\_ Date: 8/6/2013  
 Health Inspector (Signature) **ENTURED BY TW** Follow-up: YES  NO  Date of Follow-up: \_\_\_\_\_

# State of Maine Health Inspection Report

<b>Establishment Name</b> COFFEE BY DESIGN INC		As Authorized by 22 MRSA § 2496		Date <u>8/6/2013</u>
License Expiry Date/EST. ID# 4/17/2014 / 6947	Address 620 CONGRESS ST	City / State PORTLAND / ME	Zip Code 04106-2409	Telephone 207-772-5533

## Temperature Observations

Location	Temperature	Notes
REFRIG 2	35F	
SANI (BUCKETS)	600 PPM	SHOULD BE 400, PER CONTAINER. HAD BOTH DILUTED & TRAINED.
FRONT HW	119F	
3-BAY SANI	400 PPM	SHOULD BE 200 PPM PER CONTAINER. NO TEST STRIPS.
3-BAY	122F	
HW REAR	120F	
REFRIG 1	40F	
CRM CHS REF 3	35F	

Person in Charge (Signature)

X

Date: 8/6/2013

Health Inspector (Signature)

ENTERED BY TW

# State of Maine Health Inspection Report

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Date 8/6/2013

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PORTLAND ME

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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: 5-205.11.(B): N: Handwashing facility being used for other than handwashing.

INSPECTOR NOTES: COS, FRONT HANDWASH IS FOR HANDWASHING ONLY. NO DUMPING. HAVE THEM USE 3-BAY, UNTIL A 2ND SINK IS INSTALLED. NEED 12" SPLASH GAURDS ON BOTH SIDES OF THAT HANDWASH SINK. REAR HANDWASH SINK NEEDS UNIT DRAINING INTO IT REMOVED & CONNECTED TO PLUMBING.

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

INSPECTOR NOTES: COS, SANI AT 3-BAY & BUCKETS TOXIC, TRAINED.

46: 4-302.14: N: No chemical test kit available.

INSPECTOR NOTES: NEED QUATENARY TEST STRIPS ASAP, OR CAN SWITCH TO BLEACH (SEE NOTES) ,A AS YOU ALREADY HAVE CHLORINE TEST STRIPS.

49: 6-306.10: N: Service sink not readily available.

INSPECTOR NOTES: NEED A MOP SINK

51: 5-501.17: N: Covered receptacle not provided. (female use)

INSPECTOR NOTES: NEED

53: 6-201.13.(A): N: Floor and wall junctures are not enclosed and sealed.

INSPECTOR NOTES: COVED MOPBOARD NEEDED WHEREVER MISSING, EXCEPT IN SEATING AREA, CAULK AROUND ALL IMMOVEABLE EQUIPMENT (SINKS, SHELVES, ETC.)

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

INSPECTOR NOTES: NO DUCT TAPE, REPAIR ANY CHIPPING/PEELING WALLS, COUNTERS, SHELVING. ALL TO BE "SMOOTH & EASILY CLEANABLE".

53: 6-501.16: N: Mops are not being properly stored.

INSPECTOR NOTES: MOPS MUST HANG, AIR DRYING, BETWEEN USE, HANDLE UP.

Person in Charge (Signature)

X

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## Inspection Notes

### Certified Food Protection Manager

- 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](mailto:tw@portlandmaine.gov).

- For a list of CFPM courses and trainers got to: [www.maine.gov/healthinspection/training.htm](http://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](mailto: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](http://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](http://www.portlandmaine.gov/hhs/foodserviceinspections.asp)?

Person in Charge (Signature)

X

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Health Inspector (Signature)

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