

Failed Closed IHH

State of Maine Health Inspection Report

Establishment Name AMATO'S	As Authorized by 22 MRSA § 2496	No. of Risk Factor/Intervention/ Violations	2	Date	11/8/2012
		No. of Repeat Risk factor / Intervention Violations	0	Time In	8:00 AM
		Score (optional)		Time Out	9:00 AM

License Expiry Date/EST. ID# 9/30/2013 / 7931	Address 312 ST JOHN ST	City PORTLAND	Zip Code 04106-2409	Telephone 207-828-5978
License Type MUN - EATING PLACE - SEATING	Owner Name AMATOS SANDWICH SHOP INC	Purpose of Inspection Regular	License Posted No	Risk Category High

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
 IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable

Mark "X" in appropriate box for COS and/or R
 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	IN	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	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	OUT	Proper hot holding temperatures		X
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

Compliance Status			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	X	Contamination prevented during food preparation, storage & display	X	
38	X	Personal cleanliness	X	
39	IN	Wiping cloths: properly used & stored		
40	IN	Washing fruits & vegetables		

Compliance Status			cos	R
Proper Use of Utensils				
41	X	In-use utensils: properly stored		X
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	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) _____

D. Michelle Sturgeon

Date: 11/8/2012

Health Inspector (Signature) _____

Follow-up: YES NO Date of Follow-up: _____

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Temperature Observations

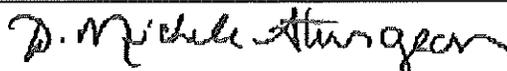
Location	Temperature	Notes
FR HW	127.6F	
CHICK CH2	31F	
PEPPERONI	41.0F	
SAME	119-122	REAR, JUST PUT OUT, HAD RE-HEATED TO 155 SO, WOULD HOLD TEMP IN REAR FOR DINNER RUSH
BUTTER W/I	41F	
CUT TOM CH2	38.8F	
CHOPPED ONIONS W/I	41	
HW WW	141.7F	
HH1	114F-129F	ALL ITEMS BEEN THERE ABOUT AN HR., REHEATING IN OVEN AND TURNING UNIT UP, TO MAINTAIN PROPER TEMP
3-BAY	143F	
HAM CH1	41.5	LOWER UNIT BY A COUPLE DEGREES, SO TOP LAYERS MAINTAIN TEMPS
SAUCE W/MEATB HH1	152F	FRONT
SANI	100PPM	SHOULD BE 200 PPM, HAD CORRECTED

Person In Charge (Signature)



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City / State
PORTLAND

ME

Zip Code
04106-2409

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

14: 4-602.11.(A): C: Food contact surfaces are not cleaned between uses.

INSPECTOR NOTES: MISC FOOD EQUIPMENT NED CLEANING

19: 3-501.16.(A): C: Hot foods not maintained at proper temperature.

INSPECTOR NOTES: COS, ALL RE-HEATED & UNIT TURNED UP

37: 3-305.11.(A).(B): N: Food not protected from contamination during storage.

INSPECTOR NOTES: COS, ALL FOOD ITEMS NEED TO BE AT LEAST 6" OFF FLOOR

38: 2-402.11: N: Food Employees not wearing effective hair restraints.

INSPECTOR NOTES: COS, NEED PROPER HAIR RESTRAINTS (LOOSE TOUCHING COLLAR, TIED BACK)

41: 3-304.12: N: Improper between-use storage of utensils..

INSPECTOR NOTES: COS, KEEP SCOOPS OUT OF BULK CONTANERS WHERE HANDLES TOUCH PRODUCT

49: 5-202.13: C: Air gap required.

INSPECTOR NOTES: FOOD PREP SINK NEEDS PROPER AIR GAP

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

INSPECTOR NOTES: COVERED MOPBOARD NEEDED WHERE MISSING AND CAULKING AROUND ALL IMMOVABLE EQUIPMENT, REPAIR/REPLACE ANY STAINED CEILING TILES

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

INSPECTOR NOTES: WOOD SHELVING, ETC. TO BE 'SMOOTH AND EASILY CLEANABLE'

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

INSPECTOR NOTES: DIRTY DOOR HANDLES, LIGHT SWITCHES, ETC.

54: 6-501.14.(A): N: Ventilation not clean.

INSPECTOR NOTES: BATHROOM AND DRINK COOLER VENTS/CEILING AROUND COMPRESSOR BOX, ETC. NEED CLEANING

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Inspection Notes

POST CITY & DHHS FOOD LICENSES VISIBLE TO PUBLIC.

Grading ~ Pass / Fail criteria

A passing inspection, is one with no more than ten (10) Non Critical violations and not more than three (3) Critical violations. Any over those thresholds, are a Failing inspection. If enough items can be COS (corrected on site), to bring the totals to the above-referenced threshold, Health Inspector will work with you on time frame(s) within which the remaining items need correction.

Follow up inspection(s) to a Failing inspection, will be invoiced (Per City of Portland Ordinance, Ch.11), to the establishment owner, at a rate of seventy-five dollars (\$75.00), per follow up inspection, that is deemed necessary by Health Inspector. Once establishment is cleared from the original failure and placed onto a regular follow up schedule, no additional fees will be charged, until and unless a repeated failing inspection occurs.

Certified Food Protection Manager

- Unless directed otherwise, effective January 18, 2012 establishments have to have a Certified Food Protection Manager (CFPM) at each establishment per 10-144 CMR, Chapter 201, Section 2.

- A CFPM must be hired within 60 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 msturgen@portlandmaine.gov.

- 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 7, 8, and 9 of 10-144 CMR Chapter 201 available at:

www.maine.gov/dhhs/eng/el/rules.htm

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.

WILL SEND SAMPLE TEMP LOG, TO TAILOR TO YOUR ESTABLISHMENT.

Person in Charge (Signature)



Date: 11/8/2012

Health Inspector (Signature)

