

Failed  Closed  IHH

# State of Maine Health Inspection Report

Establishment Name Spare Time	As Authorized by 22 MRSA § 2496	No. of Risk Factor/Intervention Violations	2	Date	1/30/2013
		No. of Repeat Risk factor / Intervention Violations	0	Time In	4:00 PM
		Score (optional)		Time Out	5:30 PM

License Expiry Date/EST. ID# 10/25/2012 / 5954	Address 867 RIVERSIDE ST	City PORTLAND	Zip Code 04103-1070	Telephone 207-878-2695
License Type MUN - EATING PLACE - SEATING	Owner Name	Purpose of Inspection Complaint Inspection	License Posted Yes	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	
<b>Supervision</b>					
1	IN	PIC present, demonstrates knowledge, and performs duties			
<b>Employee Health</b>					
2	IN	Management awareness; policy present			
3	IN	Proper use of reporting, restriction & exclusion			
<b>Good Hygienic Practices</b>					
4	IN	Proper eating, tasting, drinking, or tobacco use			
5	IN	No discharge from eyes, nose, and mouth			
<b>Preventing Contamination by Hands</b>					
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			
<b>Approved Source</b>					
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			
<b>Protection from Contamination</b>					
13	IN	Food separated & protected			
14	IN	Food-contact surfaces: cleaned and sanitized			
15	IN	Proper disposition of returned, previously served, reconditioned, & unsafe food			
<b>Potentially Hazardous Food Time/Temperature</b>					
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	OUT	Proper cold holding temperatures			
21	IN	Proper date marking & disposition			
22	IN	Time as a public health control: procedures & record			
<b>Consumer Advisory</b>					
23	IN	Consumer advisory provided for raw or undercooked foods			
<b>Highly Susceptible Populations</b>					
24	IN	Pasteurized foods used; prohibited foods not offered			
<b>Chemical</b>					
25	IN	Food additives: approved & properly used			
26	IN	Toxic substances properly identified, stored & used			
<b>Conformance with Approved Procedures</b>					
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	
<b>Safe Food and Water</b>					
28	IN	Pasteurized eggs used where required			
29	IN	Water & Ice from approved source			
30	IN	Variance obtained for specialized processing methods			
<b>Food Temperature Control</b>					
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			
<b>Food Identification</b>					
35	IN	Food properly labeled; original container			
<b>Prevention of Food Contamination</b>					
36	X	Insects, rodents, & animals not present			
37	X	Contamination prevented during food preparation, storage & display			
38	IN	Personal cleanliness			
39	X	Wiping cloths: properly used & stored			
40	IN	Washing fruits & vegetables			
<b>Proper Use of Utensils</b>					
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			
<b>Utensils, Equipment and Vending</b>					
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			
<b>Physical Facilities</b>					
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	X	Physical facilities installed, maintained, & clean			
54	IN	Adequate ventilation & lighting; designated areas used			

Person in Charge (Signature)

Date: 1/30/2013

Health Inspector (Signature)

Follow-up:  YES  NO

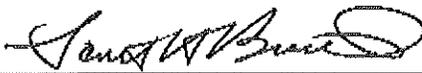
Date of Follow-up:

# State of Maine Health Inspection Report

Establishment Name Spare Time		As Authorized by 22 MRSA § 2496		Date 1/30/2013
License Expiry Date/EST. ID# 10/25/2012 / 5954	Address 867 RIVERSIDE ST	City / State PORTLAND / ME	Zip Code 04103-1070	Telephone 207-878-2695

## Temperature Observations

Location	Temperature	Notes
CH 1 - Pizza Sauce	44 F	
Hot water handwash	125 F	

Person In Charge (Signature)  Date: 1/30/2013

Health Inspector (Signature) 

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<b>Establishment Name</b> Spare Time				<b>Date</b> 1/30/2013	
<b>License Expiry Date/EST. ID#</b> 10/25/2012 / 5954	<b>Address</b> 867 RIVERSIDE ST	<b>City / State</b> PORTLAND ME	<b>Zip Code</b> 04103-1070		

## 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: 6-301.12: N: Sanitary towels / hand drying device not provided for handwash lavatory.

INSPECTOR NOTES: No towels for hand wash

20: 3-501.16.(B): C: Cold Food not maintained at proper temperature.

INSPECTOR NOTES:

36: 6-501.111.(D): N: Evidence of insects, rodents or other pests.

INSPECTOR NOTES: Strong presence of fruit flies in bar and around wipe cloths left out.

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

INSPECTOR NOTES: Many items in cooler left uncovered.

39: 3-304.14.(B).(1): N: Wiping cloths not dry and improperly used.

INSPECTOR NOTES: Wipe cloths on floor, counters.

45: 4-101.19: N: Unapproved wood used as food contact surface.

INSPECTOR NOTES: Wood knife block in use.

45: 4-501.12: N: Cutting surfaces not easily cleanable.

INSPECTOR NOTES: Plastic cutting surface rippled and heavily discolored.

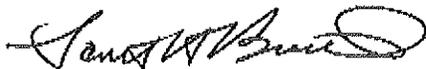
53: 6-201.11: N: Floors, walls, and ceilings are not smooth and easily cleanable.

INSPECTOR NOTES: Many broken tiles on kitchen floor, walk in cooler, perimeter around hand wash station and open cabinets.

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

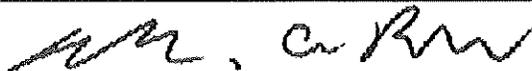
INSPECTOR NOTES: Too much grease, dirt and food on floor.

Person In Charge (Signature)



Date: 1/30/2013

Health Inspector (Signature)



# State of Maine Health Inspection Report

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Spare Time						
License Expiry Date/EST. ID#	Address	City / State	ME	Zip Code		
10/25/2012 / 5954	867 RIVERSIDE ST	PORTLAND		04103-1070		

## 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 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 [mar@portlandmaine.gov](mailto:mar@portlandmaine.gov) or call Michael Russell at 756-8008.
- 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)

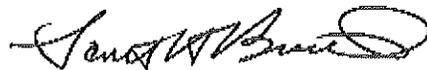
### Sec. 11-40. Penalties.

Following the issuance of a failed inspection notice and an order to correct violations, the health inspector will reinspect the premises at a fee of seventy five dollars (\$75.00); if the followup 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 reinspection results in a failed inspection, the third and each subsequent follow-up reinspection will result in a three hundred dollar (\$300.00) per reinspection charge. In addition, upon the third failed reinspection, 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)



Date: 1/30/2013

Health Inspector (Signature)

