

RETAIL FOOD INSPECTION REPORT

Activity/Type <i>Initial</i>	Evaluation <i>Satisfactory</i>
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Name of Owner(s), Partnership or Corporation <i>Sunny Deli</i>	Trade Name <i>50 Burgers</i>	Reinspection on or After		
Establishment Location (Street Address) <i>124 Nassau Street</i>	City <i>Princeton</i>	Zip Code <i>08542</i>	County <i>Mercer</i>	Co/Mun Code
Establishment Mailing Address (if different)	Telephone No. <i>732-410-5555</i>	E-mail Address		
Name of Inspecting Official <i>L. L. L...</i>	REHS Lic. # <i>B2257</i>	Name of Health Officer <i>J. Grosser</i>	Risk Type <i>2</i>	License No.

TIME/ACTIVITY REPORT (Codes: 1-Travel, 2-Inspection, 3-Administration)

Date	Code	Began	Ended	Date	Code	Began	Ended	Date	Code	Began	Ended
<i>8/13/14</i>											

FOODBORNE ILLNESS RISK FACTORS AND INTERVENTIONS

RISK FACTORS are improper practices identified as the most common factors resulting in foodborne illness (FBI). INTERVENTIONS are control measures to prevent FBI

Mark "X" in appropriate Box: IN=In Compliance; OUT=Not in Compliance; NO=Not Observed; NA=Not Applicable; COS=Corrected On-site. R in OUT Box=Repeat Violation.

MANAGEMENT AND PERSONNEL		IN	OUT	N.O.	N/A	COS
1	PIC demonstrates knowledge of food safety principles pertaining to this operation.	<input checked="" type="checkbox"/>				
2	PIC in Risk Level 3 Retail Food Establishments is certified by <i>January 2, 2010</i> .	<input checked="" type="checkbox"/>				
3	Ill or injured foodworkers restricted or excluded as required.	<input checked="" type="checkbox"/>				
PREVENTING CONTAMINATION FROM HANDS		IN	OUT	N.O.	N/A	COS
4	Handwashing conducted in a timely manner; prior to work, after using restroom, etc.	<input checked="" type="checkbox"/>				
5	Handwashing proper; duration at least 20 seconds with at least 10 seconds of vigorous lathering.	<input checked="" type="checkbox"/>				
6	Handwashing facilities provided in toilet rooms and prep areas; convenient, accessible, unobstructed.	<input checked="" type="checkbox"/>				
7	Handwashing facilities provided with warm water; soap and acceptable hand-drying method.	<input checked="" type="checkbox"/>				
8	Direct bare hand contact with exposed, ready-to-eat foods is avoided.	<input checked="" type="checkbox"/>				
FOOD SOURCE		IN	OUT	N.O.	N/A	COS
9	All foods, including ice and water, from approved sources; with proper records	<input checked="" type="checkbox"/>				
10	Shellfish/Seafood record keeping procedures; storage; proper handling; parasite destruction	<input checked="" type="checkbox"/>				
11	PHFs received at 41°F or below. <i>Except: milk, shell eggs and shellfish (45°F)</i>	<input checked="" type="checkbox"/>				
FOOD PROTECTED FROM CONTAMINATION		IN	OUT	N.O.	N/A	COS
12	Proper separation of raw meats and raw eggs from ready-to-eat foods provided	<input checked="" type="checkbox"/>				
13	Food protected from contamination	<input checked="" type="checkbox"/>				
14	Food contact surfaces properly cleaned and sanitized	<input checked="" type="checkbox"/>				
PHFs TIME/TEMPERATURE CONTROLS		IN	OUT	N.O.	N/A	COS
15	SAFE COOKING TEMPERATURES (Internal temperatures for raw animal foods for 15 seconds) <i>Except: Foods may be served raw or undercooked in response to a consumer order and for immediate service.</i> 130°F for 112 minutes: Roasts or as per cooking chart found under 3.4(a)2; 145°F: Fish, Meat, Pork; 155°F: Ground Meat/Fish; Injected Meats; or Pooled Shell Eggs; 165°F: Poultry; Stuffed fish/meat/or pasta; Stuffing containing fish/meat.	<input checked="" type="checkbox"/>				
16	PASTEURIZED EGGS: substituted for shell eggs in raw or undercooked egg-containing foods, i.e. Caesar salad dressing, hollandaise sauce, tiramisu, chocolate mousse, meringue, etc.	<input checked="" type="checkbox"/>				
17	COLD HOLDING: PHFs maintained at "Refrigeration Temperatures" (41°F)	<input checked="" type="checkbox"/>				
18	COOLING: PHFs rapidly cooled from 135°F to 41°F within 6 hours and from 135°F to 70°F within 2 hours.	<input checked="" type="checkbox"/>				
19	COOLING: PHFs prepared from ingredients at ambient temperature cooled to 41°F within 4 hours.	<input checked="" type="checkbox"/>				
20	REHEATING: PHFs rapidly reheated (within 2 hours) in proper facilities to at least 165°F; or commercially processed PHFs heated to at least 135°F prior to hot holding.	<input checked="" type="checkbox"/>				
21	HOT HOLDING: PHFs Hot Held at 135°F or above in appropriate equipment.	<input checked="" type="checkbox"/>				
22	TIME as a PUBLIC HEALTH CONTROL: Approval; written procedures; time marked; discarded in 4 hours.	<input checked="" type="checkbox"/>				
23	SPECIALIZED PROCESSING METHODS: Approval; written procedures; conducted properly.	<input checked="" type="checkbox"/>				
24	HIGHLY SUSCEPTIBLE POPULATIONS: Pasteurized foods used; prohibited foods not offered.	<input checked="" type="checkbox"/>				

**RETAIL FOOD INSPECTION REPORT
(CONTINUED)**

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals and physical objects into foods.
 OUT= Not in Compliance; COS=Corrected On-site; For "Repeat" Violation: Mark "R" in OUT Box

SAFE FOOD AND WATER / PROTECTION FROM CONTAMINATION

		OUT	COS
25	Hot and cold water available; adequate pressure.		<input type="checkbox"/>
26	Food properly labeled, original container.		<input type="checkbox"/>
27	Food protected from potential contamination during preparation, storage, display.		<input type="checkbox"/>
28	Utensils, spatulas, tongs, forks, disposable gloves provided and used properly to restrict bare hand contact.		<input type="checkbox"/>
29	Raw fruits and vegetables washed prior to serving.		<input type="checkbox"/>
30	Wiping cloths properly used and stored.		<input type="checkbox"/>
31	Toxic substances properly identified, stored and used.		<input type="checkbox"/>
32	Presence of insects/rodents minimized: outer openings protected, animals as allowed.		<input type="checkbox"/>
33	Personal cleanliness (fingernails, jewelry, outer clothing, hair restraint).		<input type="checkbox"/>

FOOD TEMPERATURE CONTROL

		OUT	COS
34	Food temperature measuring devices provided and calibrated.		<input type="checkbox"/>
35	Thin-probed temperature measuring device provided for monitoring thin foods (i.e. meat patties and fish filets).		<input type="checkbox"/>
36	Frozen foods maintained completely frozen.		<input type="checkbox"/>
37	Frozen foods properly thawed.		<input type="checkbox"/>
38	Plant food for hot holding properly cooked to at least 135°F.		<input type="checkbox"/>
39	Methods for rapidly cooling PHFs are properly conducted and equipment is adequate.		<input type="checkbox"/>

EQUIPMENT, UTENSILS AND LINENS

		OUT	COS
40	Materials, construction, repair, design, capacity, location, installation, maintenance.		<input type="checkbox"/>
41	Equipment temperature measuring devices provided (refrigeration units, etc).		<input type="checkbox"/>
42	In-use utensils properly stored.		<input type="checkbox"/>
43	Utensils, single service items, equipment, linens properly stored, dried and handled.		<input type="checkbox"/>
44	Food and non-food contact surfaces properly constructed, cleanable, used.		<input type="checkbox"/>
45	Proper warewashing facilities installed, maintained, cleaned, used; sanitizer test strips available, used.		<input type="checkbox"/>

PHYSICAL FACILITIES

		OUT	COS
46	Plumbing system properly installed; safe and in good repair; no potential backflow or backsiphonage conditions.		<input type="checkbox"/>
47	Sewage and waste water properly disposed.		<input type="checkbox"/>
48	Toilet facilities are adequate, properly constructed, properly maintained, supplied and cleaned.		<input type="checkbox"/>
49	Design, construction, installation and maintenance proper-floors/walls/ceilings.		<input type="checkbox"/>
50	Adequate ventilation; lighting; designated areas used.		<input type="checkbox"/>
51	Premises maintained free of litter, unnecessary articles, cleaning and maintenance equipment properly stored; and garbage and refuse properly maintained.		<input type="checkbox"/>
52	All required signs (handwashing, inspection placard, etc) provided and conspicuously posted.		<input type="checkbox"/>

Item # NJAC 8:24 REMARKS ("R" = Repeat violation from previous inspection)

** See Attached Report*

Name of Inspecting Official <i>R. Levine</i>	Signature of Inspecting Official <i>R. Levine</i>	Name and Title of Person Receiving Copy of Report <i>[Signature]</i>
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CONTINUATION SHEET
(for Inspections, Surveys, Audits, etc.)

NAME (Individual, Facility, Establishment, etc.) 30 Burgers DATE 8/13/14
MUNICIPALITY Princeton TEL. CODE or ID NO.

ITEM NO. General Condition: Good REMARKS

4.4 Utensil storage improper. Knife stored between prep table & drain panel. (Corrected on-site)

3.5 Vegetables require washing and sanitizing prior to slicing
* use veggie sanitizer or a solution of 1 part chlorine bleach to 10 parts water. (Proper method was shown to staff)

* Serv-safe certificate to be faxed to Keith at 609.924.7627

* Hot water heater requires repair of electrical component. Please ensure a minimum temperature of 120°F at all sinks

* Bagged lettuce to be used due to limited prep space and refrigerator storage

* Please ensure deliveries are frequent enough to avoid storage issues. Have food deliveries put away as soon as they are delivered to ensure proper temperatures are kept

SIGNATURE OF INDIVIDUAL COMPLETING FORM Keith SIGNATURE OF OWNER OF FACILITY, ESTABLISHMENT, ETC., IF REQUIRED [Signature]

CONTINUATION SHEET
(for Inspections, Surveys, Audits, etc.)

NAME (Individual, Facility, Establishment, etc.)	30 Burgers	DATE	8/13/14
MUNICIPALITY	Princeton	TEL., CODE or ID NO.	

ITEM NO.	REMARKS
Notes:	All refrigeration temps at 41° or below
	Food storage proper to prevent cross-contamination
	Handwash sink properly set up w/ hot water, soap & disposable towels
	Sanitize buckets in use for storing cloth rags.
	Employees use gloves when handling ready-to-eat foods
	Restrooms & patron area properly maintained
	No signs of pest activity - please ensure restaurant is clean at end of work day to avoid pest issues.
	Dumpster area maintained. Please ensure proper recycling of cardboard, plastic, glass & metals is done

SIGNATURE OF INDIVIDUAL COMPLETING FORM	SIGNATURE OF OWNER OF FACILITY, ESTABLISHMENT, ETC., IF REQUIRED
<i>Kevin Ferrine</i>	<i>[Signature]</i>