

Business Name: Big Oak Cafe Operator: _____ Phone: () _____

Address: 410 Stauffer Avenue, Chambersburg City: _____ ZIP: _____ Seat / Checkouts: _____

General Health Record ID: PR 20110-11411 P/E: _____ Date: 12/14/10 EHS: _____ Activity Time: _____ m Travel Time: _____ m

Red High Risk Factors			
High Risk Factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Circles indicate compliance status (IN, OUT, N/O, N/A) for each item.			
IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable CDI = corrected during inspection R = repeat violation			
Compliance Status	CDI	R	PTS
Demonstration of Knowledge			
0100 IN OUT			5
PIC certified by accredited program, or compliance with Code, or correct answers			
0200 IN OUT			5
Food Worker Cards current for all food workers; new food workers trained			
Employee Health			
0300 IN OUT			25
Proper ill worker practices; no ill workers present; proper reporting of illness			
Preventing Contamination by Hands			
0400 IN OUT N/O			15
Hands washed as required			
0500 IN OUT N/A N/O			15
Proper methods used to prevent bare hand contact with RTE foods			
0600 IN OUT			10
Adequate handwashing facilities			
Approved Source, Wholesome, Not Adulterated			
0700 IN OUT			15
Food obtained from approved source			
0800 IN OUT			15
Water supply, ice from approved source			
0900 IN OUT N/A N/O			10
Proper washing of fruits and vegetables			
1000 IN OUT			10
Food in good condition, safe and unadulterated; approved additives			
1100 IN OUT			10
Proper disposition of returned, previously served, unsafe, or contaminated food			
1200 IN OUT N/A N/O			5
Proper shellstock identification; proper parasite destruction procedures for fish			
Protection from Cross Contamination			
1300 IN OUT N/A			15
Food contact surfaces used for raw meat thoroughly cleaned and sanitized			
1400 IN OUT N/A			5
Raw meats below or away from RTE food			
1500 IN OUT N/A N/O			5
Proper handling of pooled eggs			

- Service**
- 128 Scheduled
 - 129 Return
 - 126 Fld PI Rvw
 - 130 Complaint
 - 133 Illness / Injury
 - 134 Permit Inv.
 - 136 Field Education
 - 127 Pre-Operat.
 - 106 HACCP

- Results**
- 01 Satisfactory
 - 02 Unsatisfactory
 - 03 Complete
 - 04 Incomplete

- Action**
- 04 Suspend
 - 07 Approved
 - 10 Disapproved
 - 26 Follow-up Req'd

- Meals Served**
- 6020 Breakfast
 - 6025 Lunch
 - 6030 Dinner
 - 6035 Cater
 - 6040 Other

- Meal Observed**
- 6045 Breakfast
 - 6050 Lunch
 - 6055 Dinner
 - 6060 Cater
 - 6065 Other

Blue Low Risk Factors			
Low Risk Factors are preventive measures to control the addition of pathogens, chemicals, and physical objects into foods. Circled points indicate items not in compliance.			
Compliance Status	CDI	R	PTS
Food Temperature Control			
2800			5
Food received at proper temperature			
2900			5
Adequate equipment for temperature control			
3000			3
Proper thawing methods used			
Food Identification			
3100			5
Proper labeling, signage			
Protection from Contamination			
3200			5
Insects, rodents, animals not present; entrance controlled			
3300			5
Potential food contamination prevented during preparation, storage, display			
3400			5
Wiping cloths properly used, stored			
3500			3
Employee cleanliness and hygiene			
3600			3
Proper eating, tasting, drinking, or tobacco use			
Proper Use of Utensils			
3700			3
In-use utensils properly stored			
3800			3
Utensils, equipment, linens properly stored, used, handled			
3900			3
Single-use and single-service articles properly stored, used			
Utensils and Equipment			
4000			5
Food and non-food surfaces properly used and constructed; cleanable			
4100			5
Warewashing facilities properly installed, maintained, used; test strips available and used			
4200			5
Food — contact surfaces maintained, cleaned, sanitized			
4300			3
Non-food — contact surfaces maintained and clean			
Physical Facilities			
4400			5
Plumbing properly sized, installed, and maintained; proper backflow devices, indirect drains, no cross-connections			
4500			5
Sewage, wastewater properly disposed			
4600			3
Toilet facilities properly constructed, supplied, cleaned			
4700			3
Garbage, refuse properly disposed; facilities maintained			
4800			2
Physical facilities properly installed, maintained, cleaned; unnecessary persons excluded from establishment			
4900			2
Adequate ventilation, lighting; designated areas used			
5000			2
Posting of permit; mobile establishment name easily visible			

Red Critical Points
0

Blue Points
24

Total Points
24

Based on an inspection this day, the above items are violations, which must be corrected in the time specified by the health officer. A food establishment permit may be suspended without warning, notice or hearing if the requirements of the food code and/or directives of the health officer are not met or if violations are not corrected in the time stated in this report. The permit will be suspended if an imminent hazard exists or there are 75 or more red critical points or if there are 101 or more total points. The health officer will provide an opportunity for an appeal on the validity of a suspension or the findings of an inspection report if a written request is filed with the health officer within ten (10) days of the suspension or inspection. The filing of an appeal does not stay the effectiveness of a suspension. The completed inspection form is a public document that must be made available to any person who requests it under the provision of the Right to Know Law.

Person in Charge (Printed Name): _____ (Signature): Frank W Beach

Regulatory Authority (Printed Name): Alicia Schooley (Signature): Alicia Schooley

Food Inspection Program

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General Health Record ID: _____ P/E: _____ Date: _____ EHS: _____ Activity Time: _____ Travel Time: _____
 PR 2010-11411 12114110 m m

TEMPERATURE OBSERVATIONS

Item / Location	Temp (°F)	Item / Location	Temp (°F)
1 dr. cooler	30°		
1 dr. cooler	31°		
2 dr. cooler	38°		
2 dr. prep cooler	30°		
2 dr. prep cooler - Fruit	38.7°		

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Blue Points	24
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OBSERVATIONS and CORRECTION ACTIONS

Item Number	Violations cited in this area must be corrected with the time frame specified.	Points
4100	NO test strips	5
4300	Seals need replaced on 1 dr. cooler	3
4300	Seals need replaced on 1 dr. cooler	3
2900	NO thermometer in 1 dr. cooler	5
2900	NO thermometer in 1 dr. cooler	5
4300	Seals need cleaned on 2 dr. prep cooler fruit	3
	No signs for employees to wash hands	

Comments: _____

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Person in Charge (Printed Name): _____ (Signature): Frank W. Krash

Regulatory Authority (Printed Name): Alicia Schady (Signature): Alicia Schady