]Fail	led	Closed IHH	State of Maine I	- -lea	lth	ր lı	ns	spe	ectio	n Report	<u> </u>		— Р	age 1	of 4		
					Critic				•		•		1	Date	<u> </u>	10/18	3/20	16
		hment Na		As Authorized by 22 MRSA § 2496	Non-C								5	Tim	e In	9:40	AM	
			SANDWICH SHOPPE		Certif	ied F	ood	Pro	otect	ion Mana	ger		Υ	Tim	e Out	10:30) AI	<u>/L</u>
License Expiry Date/EST. ID# Address						ty				Zip Code			ephone					
12/28/2016 / 5166 963 SABATTUS ST					LEWISTON				_					ٺ	7-782-25			
License Type Owner Name						Purpose of Inspection				pection		License Post		Risk Cate	gory			
MUN - EATING PLACE SAMS ITALIAN FOODS						Regular Yes												
			FOOL	BORNE ILLNESS RISK FA	СТО	RS	ANI	D F	PUB	LIC HE	ALTH INTER	VENTIONS		•				
	C:	rala dagiar	acted compliance status	(IN, OUT, N/O, N/A) for each numb	orod it					Ma	rk"X" in appropr	iata hay far C	°06 on	d/or l	ь			Т
		in complian	•	` , , , ,	not app		nle				corrected on-site				n ⊧repeat vio	lation		
			•	1470-1101 00001100 1471-1											-ropout vio			_
Compliance Status Supervision							Compliance Status Potentially Hazardous Food Time/Temperature						3		cos	R		
PIC present demonstr				•	$\overline{}$	П	16	16		IN Proper cooking time & tem			•		-			_
1		IIN	performs duties			Ш	17	_		IN	Proper reheating				olding			
		15.1		loyee Health			18	3		IN	Proper cooling	time & tempe	erature	es				Г
3		IN IN	Management awarenes	ss; policy present g, restriction & exclusion	+	Н	19			IN	Proper hot hold	ling temperat	tures					
٥		IIV		jenic Practices		\Box	20	_		OUT	Proper cold ho						х	
4		IN	Proper eating, tasting,	drinking, or tobacco use			21	-		IN	Proper date ma						_	-
5		IN	No discharge from eyes			Ц	22	4		IN	Time as a publi		rol: pr	oced	ures & re	cord		
		INI		mination by Hands	1			F			1	ner Advisory	-J &			-	-	
6		IN	Hands clean & properly		+	$\vdash \vdash$	23	3		IN	Consumer advi undercooked for		u tor ra	aw or	-			
7		IN	alternate method prope	vith RTE foods or approved							Highly Susce		tions					
8		IN		g facilities supplied & accessible	+	Н	24			IN	Pasteurized for	-		d food	ds not			_
				ed Source			24	<u>'L</u>		IIN	offered							
9		IN	Food obtained from app		Т	П						Chemical						
10		IN	Food received at prope		+	Н	25			IN	Food additives:	approved &	prope	rly us	sed			
11		IN	Food in good condition	· · · · · · · · · · · · · · · · · · ·		Н	26	ો		IN	Toxic substanc	es properly id	dentifi	ed, st	tored & u	sed		
40		INI I	Required records avail			П				Co	nformance with	Approved Pr	ocedu	res				
12		IN	parasite destruction				27	,		IN	Compliance wit	th variance, s	pecial	ized	process,			l
			Protection fr	om Contamination			L				& HACCP plan							_
13		IN	Food separated & prote	ected		Ш	. [R	isk Fa	actors	are improper prac	tices or proced	dures id	lentifi	ed as the n	nost		
14 IN Food-contact surfaces: cleaned and sanitized				_	Ш	.	р	reval	ent contrib	outing factors of f	oodborne illnes	ss or ii	njury.	Public Hea	alth			
Proper disposition of returned, previously served, reconditioned, & unsafe food								Interventions are control measures to prevent foodborne illness or injury.										
			Teconationea, & ansar	GOOD	DET/			· O.	TIO	- C								
			Good Retail Practices are	preventative measures to control the						_	and physical obje	cts into foods						
Ma	rl: "Y'	' in boy if n	umbered item is not in com	•			•	•			=corrected on-site		tion	D_r	opost viols	ation		
IVIa	IN A	III DOX II III	umbered item is not in com	ipilance Mark A in appropriat	cos	_	US a	HQ/C	חוע	003	=corrected on-site	during inspec	lion	n=i	epeat viola		000	_
							╙										cos	R
Safe Food and Water											•	e of Utensils						
28		Pasteurized eggs used where required Water & ice from approved source				\vdash	ı —	I IN			sils: properly sto						\dashv	
29						Н	42	-	_		quipment, & liner				-	led		_
30 IN Variance obtained for specialized processing methods Food Temperature Control							43	-	_		& single-service d properly	articles: proj	perly s	torec	a & used		\dashv	_
	Τ.	D=====================================	<u> </u>		_		44	+ IIIN	ı je		<u> </u>	mont and Van	dina					
31	IIN I	Proper cod temperatu	oling methods used; ade re control	quate equipment for				T	F		-food contact su					T	T	
32	-			holding	+	\vdash	45	5 X	- 1		signed, constru		ubic,					
33	_	Plant food properly cooked for hot holding Approved thawing methods used			+	H	46	3 IN	÷		ng facilities: inst		ined \$	R USA	d: test sti	rips	\dashv	_
34	_		eters provided and accur	rate		Н	47	_	÷		ontact surfaces	-			, 1001 01.			х
			Food Identificati					_	1			al Facilities						
35	IN I	Food prop	erly labeled; original con		Т	\Box	48	3 IN	Тн	ot & cold v	water available;		essure				П	_
			Prevention of Food Conf				49	-	_		ıstalled; proper l						\dashv	_
36 IN Insects, rodents, & animals not present							50	_			vaste water proj						\dashv	_
\vdash	7 IN Contamination prevented during food preparation, storage & display					П	51	ı IN	_		ties: properly co			l, & c	leaned		一	_
38 IN Personal cleanliness						П	52	2 IN	_		refuse properly							_
39	IN 1	Wiping clo	ths: properly used & sto	red			53	3 X	\neg		cilities installed,							_
40	IN 1	Washing fr	uits & vegetables				54	1 IN	I A	dequate v	entilation & light	ting; designat	ted are	eas u	sed			_
Per	son i	n Charge (Signature)	75								Date:	10/18/	2016				
		spector (S								Follow-u	ıp: YES	√ NO Da	ate of F	ollov	w-up:			

	State of Mai	ne Hea	alth Inspect	ion Repor	t	Page 2 of 4
Establishment Name SAMS ITALIAN SANDWICH SHOPP		As Authorized b	Date 10/18/2016			
License Expiry Date/EST. ID# Address 12/28/2016 /5166 963 SABATTUS ST			City / State Zip Code LEWISTON / ME 04240-3332			Telephone 207-782-2550
		eratur	e Observati	ions	·	·
Location	Temperature			Notes		
sandwich bar	49					
milk	40					
soup	153 HH					
tuna	48					
COOLER	36					
ham	36					
meatballs	40					
LAZAGNA	37					
pizza bar						
roast beef	47					

Person in Charge (Signature)

ER

Date: 10/18/2016

Health Inspector (Signature)

State of Maine Health Inspection Report

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Establishment Name

SAMS ITALIAN SANDWICH SHOPPE

Date 10/18/2016

License Francisco Deta/EST 1D#

License Expiry Date/EST. ID# Add 12/28/2016 /5166 963

Address 963 SABATTUS ST City / State LEWISTON

ME

Zip Code 04240-3332

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

20: 3-501.16.(A).(2): C: PHF not maintained at 41 F or less.

INSPECTOR NOTES: sandwich bar out of temp-items discarded cos

45: 4-202.15: N: Can openers improperly designed and constructed.

INSPECTOR NOTES: clean or replace can opener

47: 4-602.13: N: Non-food contact surfaces are not cleaned at a frequency necessary to preclude accumulation of soil residues.

INSPECTOR NOTES: clean rack large coolerclean refrigerator door seals sandwich bar

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

INSPECTOR NOTES: repair cove base

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

INSPECTOR NOTES: clean in back of equipment-floor edges

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

INSPECTOR NOTES: wet mop in sink-must be hung to air dry

Person in Charge (Signature)

Health Inspector (Signature)

Date: 10/18/2016

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State of Maine Health Inspection Report Page 4 of 4 10/18/2016 Date **Establishment Name SAMS ITALIAN SANDWICH SHOPPE** License Expiry Date/EST. ID# **Address** Zip Code City / State 12/28/2016 /5166 963 SABATTUS ST LEWISTON ME 04240-3332

Inspection Notes

DHHS Blurb attached: Certified Food Protection Manager

Unless directed otherwise, all Eating Establishments are required to submit a copy of their Certified Food Protection Manager (CFPM) certificate. A CFPM must be hired within 90 days of a new eating establishment opening or when a CFPM leaves employment. For a list of CFPM courses and trainers go to http://www.maine.gov/healthinspection/training.htm

Please provide a copy of this certification(s) to your inspector [Susan Reny] by emailing to

[sreny@lewistonmaine.gov] or faxing to 207-795-5071. A copy may also be sent to Carol Gott, Health Inspection Program, 286 Water St. 3rd Floor, Augusta, ME 04333 or carol.gott@maine.gov.

Please include the name of your establishment and the establishment ID# with your certification(s).

2013 Maine Food Code Adoption

The Maine Food Code was adopted in October of 2013. Please refer to our website for a copy,

http://www.maine.gov/healthinspection. Following are a few of the major changes:

- No Bare Hand Contact with Ready-To-Eat Food. Handlers are required to use gloves, utensils, deli papers, etc., to avoid bare hand contact with ready-to-eat food;
- Establishments must have clean-up procedures for employees to follow following vomiting and diarrheal events;
- Responsibilities of the person in charge for ill employees (exclusions and restrictions); and,
- Date marking of Ready-to-eat potentially hazardous foods.

Violation Correction Timeframe

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 at 207-(513-3125 Ext 3224) or email (sreny@lewistonmaine.gov). Non-critical violations must be corrected within 30 days. Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department to include fines and penalties, which are outlined in Sections 7, 8 and 9 of the Rules Relating to the Administration and Enforcement of Establishments Licensed by the Health Inspection Program available at http://www.maine.gov/healthinspection. License renewals can be denied if violations are not corrected within the noted timeframes.

C= Critical violation and NC= Non-critical violation

"Critical violation" means a provision of the Food Code that, if in non-compliance, is more likely than other violations to contribute to food contamination, illness or environmental health hazard.

Additional Inspection Fee

License fees provide for two inspections per year. When additional inspections are required, the Department may charge an additional \$100 fee to cover the costs of each additional inspection or visit.

Document Retention/Posting

Pursuant to the Maine Food Code, the establishment's current license must be displayed. In addition, a sign or placard must be posted in a conspicuous area notifying consumers that a copy of the most recent inspection report is available upon request. CFPM certificates must be posted in a conspicuous area and must be available to the Department upon request.

CFPM: Paige Bousquet Exp 4/1/2020

Ice machine cleaned quarterly

Person in Charge (Signature)

Date: 10/18/2016

Health Inspector (Signature)

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