SANITARY INSPECTION REPORT

IDENTIFICATION

OWNER INFORMATION (Complete this section only if different from establishment information)		ESTABLISHMENT INFORMATION		
NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT: Hau Yeung		ESTABLISHMENT TRADING NAME: Kung Fu Noodle		
NUMBER AND STREET: 111 Wordlige St	COUNTY: #2 Mercer	NUMBER AND STREET: 80 Nassau St.	COUNTY: Mercer	
MUNICIPALITY: W. Windson	STATE: NJ	MUNICIPALITY: Princeton	ZIP CODE:	TELEPHONE NO.: 609 688-0108
ZIP CODE: 08542	COMUN. CODE:	ESTABLISHMENT STATE LICENSE NO. (if appl.):	COMUN. CODE:	

INSPECTION

TYPE OF ESTABLISHMENT

- [x] 1 RETAIL
- [ ] 2 OTHER (Specify)
- [ ] 3
- [ ] 4

ESTABLISHMENT CODE

#3 -

GOODS

- [ ] 1 DESTROYED
- [ ] 2 EMBARGOED

Pre-operational

- [ ] 1 INITIAL INSPECTION
- [ ] 2 REINSPECTION *(other than initial inspection)*

TIME - (2400 HOURS)

DATE	BEGIN	END
6/13/2016		

EVALUATION

- [ ] *SATISFACTORY*
- [ ] *CONDITIONALLY SATISFACTORY*
- [ ] *UNSATISFACTORY*

No Rating on Pre-operational

OFFICIAL(S)

LOCAL BOARD OF HEALTH	INSPECTING OFFICIAL
NAME, ADDRESS AND TELEPHONE NUMBER (print): PRINCETON HEALTH DEPARTMENT ONE MONUMENT DRIVE PRINCETON, NEW JERSEY 08540 609-497-7608	INSPECTOR'S NAME AND TITLE: Randy F. Carter Sr. REHS
	INSPECTOR'S SIGNATURE: Randy F Carter
HEALTH OFFICER: Jeffrey C. Grosser	INSPECTOR'S PERM. REG. NO.: B1805

CONTINUATION SHEET

(for Inspections, Surveys, Audits, etc.)

Name (Individual, Facility, Establishment, etc.) Kung Fu Noodle	Date 6/13/2016
Municipality Pennsauken	Tel., Code or ID No. 609-688-0108

Item No.	Remarks
	Pre-operational Inspection
	All Refrigeration is in Compliance w/ Thermometer
	Hand Wash Sinks w/ warm water, soap & paper towels
	Prep Sinks & 3 compartment + Dishwasher - In Compliance
	All areas are easy to clean & maintain
	Exhaust Hood Approved - all parts in working order
	Food Thermometer for checking cooking temperatures
*	Keep a small container (marked) with a sanitizer + clean rag at front near prep / serve station
*	No bare hand contact with any ready-to-eat foods - Use Gloves & utensils
	Garbage Contract with Waste Mgt. for curb pickup
	2 workers will be required to have a Food Protection Manager Certification
	Approved to operate as a Retail Food Establishment
	Fill out Application for Food Handlers License and pay fees at our office

Signature of Individual Completing Form: Praveen Patel

Signature of Owner of Facility, Establishment, etc., if required

Page ____ of ____