

Princeton Health Department
 One Monument Drive P.O. Box 390
 Princeton, N.J. 08542
 609-497-7608 - ofc. 609-924-7627

RETAIL FOOD INSPECTION REPORT

Activity Type INITIAL	Evaluation SATISFACTORY
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Name of Owner(s), Partnership or Corporation Tony Vitella	Trade Name Metro North	Reinspection on or After: Satisfactory
Establishment Location (Street Address) 378 Alexander Rd	City Princeton	Zip Code 08540
Establishment Mailing Address (if different)	Telephone No. 609-454-3121	County Mercer
Name of Inspecting Official Randy F. Carter	REHS Lic. # B1805	Name of Health Officer Jeffrey C. Grossen
		Risk Type 3
		License No. F201-156

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

Date	Code	Began	Ended	Date	Code	Began	Ended	Date	Code	Began	Ended
3/14/2015											

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 January 2, 2010.	<input checked="" type="checkbox"/>		----	<input type="checkbox"/>	----
3 Ill or injured foodworkers restricted or excluded as required.	<input checked="" type="checkbox"/>		<input type="checkbox"/>	----	<input 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"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Handwashing proper; duration at least 20 seconds with at least 10 seconds of vigorous lathering.	<input checked="" type="checkbox"/>		<input type="checkbox"/>	----	<input type="checkbox"/>
6 Handwashing facilities provided in toilet rooms and prep areas; convenient, accessible, unobstructed.	<input checked="" type="checkbox"/>		----	----	<input type="checkbox"/>
7 Handwashing facilities provided with warm water; soap and acceptable hand-drying method.	<input checked="" type="checkbox"/>		----	----	<input type="checkbox"/>
8 Direct bare hand contact with exposed, ready-to-eat foods is avoided.	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input 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"/>		----	----	<input type="checkbox"/>
10 Shellfish/Seafood record keeping procedures; storage; proper handling; parasite destruction	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 PHFs received at 41°F or below. Except: milk, shell eggs and shellfish (45°F)	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input 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"/>		----	<input type="checkbox"/>	<input type="checkbox"/>
13 Food protected from contamination	<input checked="" type="checkbox"/>		----	----	<input type="checkbox"/>
14 Food contact surfaces properly cleaned and sanitized	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input 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) Except: Foods may be served raw or undercooked in response to a consumer order and for immediate service. 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"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17 COLD HOLDING: PHFs maintained at "Refrigeration Temperatures" (41°F)	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19 COOLING: PHFs prepared from ingredients at ambient temperature cooled to 41°F within 4 hours.	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input 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"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21 HOT HOLDING: PHFs Hot Held at 135°F or above in appropriate equipment.	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22 TIME as a PUBLIC HEALTH CONTROL: Approval; written procedures; time marked; discarded in 4 hours.	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
23 SPECIALIZED PROCESSING METHODS: Approval; written procedures; conducted properly.	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24 HIGHLY SUSCEPTIBLE POPULATIONS: Pasteurized foods used; prohibited foods not offered.	<input type="checkbox"/>		----	<input checked="" type="checkbox"/>	<input type="checkbox"/>

#2 Sonu Soke Her wuer sat expires 10/28/2019
 Whitney Vitella - 10/28/2019

**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.	X	<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.	X	<input type="checkbox"/>
41	Equipment temperature measuring devices provided (refrigeration units, etc).	X	<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.	X	<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)

18	3:50	Meat Wall-In - Checked out of Temp at 440°F - See Cont pg 1
		Prep wall In - Checked out of Temp at 450°F - see Cont pg 1
44	4:15	Door gaskets torn in disrepair at several Refrigeration units
44	4:16	Several refrigerators are unclear at door handles, lower area, gaskets - keep on maintenance schedule
27	3:13	one under counter refrigerator at cookline - buildup of water
41	4:12	Some interior hanging thermometers missing or not visible refrigeration

Name of Inspecting Official <i>Randy F. Carter</i>	Signature of Inspecting Official <i>Randy F. Carter</i>	Name and Title of Person Receiving Copy of Report <i>[Signature]</i>
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40 4:10 Drip line on exhaust hood is unclear
 27 3:13 Ice Machine - slime mold observed on left side unit

Posted - SATISFACTORY

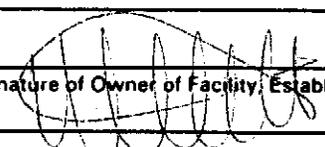
CONTINUATION SHEET

(for Inspections, Surveys, Audits, etc.)

Name (Individual, Facility, Establishment, etc.): <u>Motus Montin</u>	Date: <u>3/4/2015</u>
Municipality: <u>Princeton</u>	Tel., Code or ID No.: <u>454-3121</u>

Item No.	Remarks
4.2c	Meat Walk-In Box @ 41°F - No visible thermometer
3.5	Sausages at 43°F in deep SS container - cool w/ steam in shallower pans to maintain temperatures of 41°F or less
Prep Hot	Meat Walk-In Box
3.5e	PHS - cooked chicken @ 44-45° covered on sheet tray - LEAVE uncovered or partially uncovered until temp reaches 41°F
	All other PHS in Meat Walk-In are 40°F or less
	Produce Walk-In box - Good - In compliance
	Dry Storage - Good - In compliance
3.3	Ice Machines - one on left - Black mold accumulating
NOTE	Sanitizer out at all stations
4.5	Several Refrigeration units - door gaskets torn, ripped (replace)
3.3 4.5	Under-counter refrigerator at cook line - water buildup observed
4.2c	General Note - Keep hanging visible thermometers in all refrigeration units
4.6	General Violation - Refrigeration door gaskets, hinges, handles are unclean
4.6	Exhaust Hood - Grease drip line unclean
	Issue - Chalk Poster

SATISFACTORY

Signature of Individual Completing Form <u>Randy F. Cook</u>	Signature of Owner of Facility, Establishment, etc., if required 
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