

RETAIL FOOD INSPECTION REPORT

Activity Type <i>Initial</i>		Evaluation <i>Delay Besting</i>	
Name of Owner(s), Partnership or Corporation <i>Michael McFadden</i>		Trade Name <i>Princeton Theological Seminary</i>	
Reinspection on or After: <i>Satisfactory - 10/22/14</i>			
Establishment Location (Street Address) <i>Collese Rd</i>		City <i>Princeton</i>	Zip Code <i>08542</i>
County <i>Mercer</i>		Co/Mun Code	
Establishment Mailing Address (if different) <i>64 Mercer St.</i>		Telephone No. <i>609 497 7745</i>	E-mail Address
Name of Inspecting Official <i>K. Levine</i>	REHS Lic. # <i>B2257</i>	Name of Health Officer <i>J. Grasser</i>	Risk Type <i>3</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>10/22/14</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 January 2, 2010.	<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. Except: milk, shell eggs and shellfish (45°F)	<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) 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"/>				
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"/>				

*10/22/14 - All violations corrected*  
*(KLD)*

**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

<b>SAFE FOOD AND WATER / PROTECTION FROM CONTAMINATION</b>		<b>OUT</b>	<b>COS</b>
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"/>
<b>FOOD TEMPERATURE CONTROL</b>		<b>OUT</b>	<b>COS</b>
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"/>
<b>EQUIPMENT, UTENSILS AND LINENS</b>		<b>OUT</b>	<b>COS</b>
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"/>
<b>PHYSICAL FACILITIES</b>		<b>OUT</b>	<b>COS</b>
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

Name of Inspecting Official <i>Keith Levine</i>	Signature of Inspecting Official <i>X Keith Levine</i>	Name and Title of Person Receiving Copy of Report <i>X [Signature]</i>
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CONTINUATION SHEET

(for Inspections, Surveys, Audits, etc.)

Name (Individual, Facility, Establishment, etc.)	Princeton Theological Seminary	Date	10/03/14
Municipality	Princeton	Tel., Code or ID No.	

Item No.	General Condition	Remarks
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- Downstairs Area -

4.5	Prep sink faucet has constant leak. (Please have repaired)	
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4.5	Walk-in freezer floor has moisture build-up that <del>freezes</del> creating a slippery surface. (Please use mat for safety)	
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3.3	Ice scoops stored on top of ice machine (Scoop holder to be installed soon ✓ OK)	
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4.6	Deli meat slicer-residue build-up. Please ensure unit is cleaned every 4 hours or after it is done being used. These slicers have a high potential for bacterial growth.	
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- Upstairs Kitchen Area -

3.5	Traulsen reach-in refrigerator unit running warm - 48°. (Please ensure food product is kept at 41° to prevent bacterial growth) Gasket torn on refrigerator door	
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3.5	Traulsen unit in dining area running slightly warm (Please have repaired if needed)	
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3.3	Cloth rags seen throughout Facility not stored in sanitize buckets that were wet and soiled. (Please store these rags in sanitize solution to prevent bacterial growth)	
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Signature of Individual Completing Form	Signature of Owner of Facility, Establishment, etc., if required
Kent Jenner	[Signature]

CONTINUATION SHEET

(for Inspections, Surveys, Audits, etc.)

Name (Individual, Facility, Establishment, etc.)	Princeton Theologic Seminary	Date	10/03/14
Municipality	Princeton	Tel., Code or ID No.	

Item No.	Remarks
	<del>46</del> - Upstairs Kitchen Cont'd -
46	Residue build-up on shelving, underneath equipment and on equipment. General cleaning plan required for daily maintenance.
62	Drain Flies and regular Flies witnessed throughout facility. (Please have drains cleaned and ensure insect entry is controlled)
	- Notes -
	All other refrigeration running properly
	Freezers running properly
	Handwash sinks properly set up
	Employees use gloves and utensils when handling ready to eat foods
	Food storage proper - raw separated from finished
	Food covered and marked in walk-in units
	Dry food storage areas maintained
	Self-serve areas well maintained
	Patron areas & restrooms maintained
	Dumpster area maintained
	* Please correct violations and call for re-inspection

Signature of Individual Completing Form	Signature of Owner of Facility, Establishment, etc., if required
<i>Kent Levine</i>	<i>[Signature]</i>