



**THE CITY OF ENGLEWOOD
DEPARTMENT OF HEALTH**

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RETAIL FOOD INSPECTION REPORT

Activity Type: **CHAPTER 24**

Evaluation: **CONDITIONAL**

Name of Owner(s),Partnership or Corporation XUE JIANG CHEN		Trade Name DONG FUNG INC FAR EAST RESTAURANT		Reinspection ON or After:	
Establishment Location (Street Address) 7 W HUDSON AVE		City/State/Zip ENGLEWOOD, NJ 07631		County Bergen	Co/Mun Code 0215
Establishment Mailing Address(if different)		Telephone No		E-mail Address	
Name of Inspecting Official JF		REHS Lic # B-102424	Name of Health Officer JAMES FEDORKO		Risk Type 3
License No. A-100607					

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

Date	Code	Began	Ended	Date	Code	Began	Ended	Date	Code	Began	Ended
01/28/2016		11:30 AM	12:50 PM								

FOOD BORNE 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 & PERSONNEL *****							IN	OUT	NON	NAC	COS	
1.	PIC demonstrates knowledge of food safety principles pertaining to this operation.						<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	PIC in Risk Level 3 Retail Food Establishments is certified by January 2, 2013.						<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<input type="checkbox"/>	
***** PREVENTING CONTAMINATION FROM HANDS *****							IN	OUT	NON	NAC	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"/>	<input type="checkbox"/>	
5.	Handwashing proper; duration at least 20 seconds with at least 10 seconds of vigorous lathering.						<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Handwashing facilities provided in toilet rooms and prep areas, convenient, accessible,and unobstructed.						<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7.	Handwashing facilities provided with warm water; soap & acceptable hand drying method.						<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	
***** FOOD SOURCE *****							IN	OUT	NON	NAC	COS	
9.	All foods, including ice and water, from approved sources with proper records.						<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	
11.	PHFs received at 41F or below. Except milk, shell eggs and shellfish (45F).						<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
***** FOOD PROTECTED FROM CONTAMINATION *****							IN	OUT	NON	NAC	COS	
12.	Proper separation of raw meats and raw eggs from ready-to-eat foods provided.						<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
13.	Food protected from contamination.						<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14.	Food contact surfaces properly cleaned and sanitized.						<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
***** PHFs TIME/TEMPERATURE CONTROLS *****							IN	OUT	NON	NAC	COS	
15.	SAFE COOKING TEMPERATURES(Internal temperatures for raw animal foods for						<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

***** EQUIPMENT, UTENSILS & LINENS *****		IN	OUT	NON	NAC	COS
40.	Materials, construction, repair, design, capacity; location, installation, maintenance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41.	Equipment temperature measuring devices provided (refrigeration units, etc).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42.	In-use utensils properly stored.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43.	Utensils, single service items, equipment, linens properly stored, dried, and handled.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44.	Food and non-food contact surfaces properly constructed, cleanable, used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45.	Proper warewashing facilities installed, maintained, cleaned, used; sanitizer test strips available.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
***** PHYSICAL FACILITIES *****		IN	OUT	NON	NAC	COS
46.	Plumbing system properly installed; safe and in good repair; no potential backflow or back siphonage conditions.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47.	Sewage & waste water properly disposed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48.	Toilet facilities are adequate, properly constructed, properly maintained, supplied and cleaned.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49.	Design, construction, installation & maintenance proper.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50.	Adequate ventilation; lighting; designated areas used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52.	All required signs (handwashing, inspection placard, etc) provided and conspicuously posted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Item#	NJAC 8:24	REMARKS
6	6.7n	observed hand wash sink blocked by dishware. (Cos) Providing obstruction for employees to wash hands. (RV) Employee in charge removed dishware.
46	5.2a	Observed same hand wash sink with a leak. Must be repaired.
45	4.2b2	Observed employee finish working with raw chicken and did not wash rinse and sanitize sink after. Employee corrected when I told them to do so. (Cos)
27	3.3q	Observed inside walk in box food items (cabbage) stored on the floor.
27	3.3c1vii	Food item inside refrigerator must be covered to prevent cross contamination. Observed raw chicken. (RV)
12	3.3c1i	Observed raw chicken above cooked shrimp providing potential for contamination.
30	4.1e	Observed sponges at the sink. Sponges are prohibited due to bacterial growth.
43	4.11e	Knives cannot be stored in between counters.
14	4.6fs	Observed Bain Marie with old food debris. Must be washed and sanitized frequently to prevent old food accumulation and bacterial growth.
28	3.3a2	Observed container as a scoop for rice . Must use a scoop with a handle.
4.5	4.8	No sanitizer test kit for chlorine sanitizer.
7	4.8b	Observed employee rinse hands at the 3 compartment sink without soap and proceeded to dry hands with towel. 7/6.7k 7/6.7i
Note:		Food Manager Yu Zhang exp. 9/2020
Note:		Receipts of foods must be kept.
Note:		Employee requires training on food safety.
Name of Inspecting Official	Signature of Inspecting Official	Name and Title of Person Receiving Copy of Report
JF		