

# CITY OF ENGLEWOOD

73 SOUTH VAN BRUNT STREET  
 ENGLEWOOD, NJ 07631  
 TEL: # (201) 568-3450

## RETAIL FOOD INSPECTION REPORT

Activity Type:  
**CHAPTER 24**

Evaluation:  
**SATISFACTORY**

Inspection Date: **2/26/2013** Reinspection ON or After: **6/26/2013**

OWNER NAME: **POMPTONIAN FOOD MARK VIDOVICH-**  
 LOCATION (STREET ADDRESS): **55 DEMAREST AVE**  
 MAILING ADDRESS: **55 DEMAREST AVE**  
 INSPECTING OFFICIAL: **FAUSTO GARCIA JR** LICENSE #:**B-2425**

TRADE NAME: **DMEIS- ALTERNATE PROGRAM**  
 CITY: **ENGLEWOOD** ZIP CODE: **07631**  
 PHONE: E-MAIL:  
 HEALTH OFFICER: **NELSON XAVIER CRUZ** LICENSE # **A-602**  
**RISK TYPE: 3**

**Time/Activity**

Date: **2/26/2013** Start Time -1 : **12:05** End Time: **12:05** Date: **2/26/2013** Start Time-2: End Time:

### FOODBORNE ILLNESS RISK FACTORS AND INTERVENTIONS

**RISK FACTOR** are improper practices identified as the most common factors resulting in foodborne illness **INTERVENTIONS** are control measures to prevent FBI.

"X" Marked in appropriate Boxes

IN=In Compliance - OUT=Not in Compliance - NO=Not Observed - NA=Not Applicable - COS=Corrected On-site - R=Repeat Violation

\*\*\*\*\* MANAGEMENT & PERSONNEL \*\*\*\*\*

IN	OUT	RV	NO	NA	COS	
0	****	FOODBORNE ILLNESS RISK FACTORS & INTERVENTIONS				****
0	****	MANAGEMENT & PERSONNEL				****
1		X				
2		X				
3				X		
4	****	PREVENTING CONTAMINATION FROM HANDS				****
4		X				
5		X				
6		X				
7		X				
8		X				
9	****	FOOD SOURCE				****
9		X				
10				X		
11				X		
12	****	FOOD PROTECTED FROM CONTAMINATION				****
12			X		X	
13		X				
14		X				
15	****	PHFs TIME/TEMPERATURE CONTROLS				****
15				X		
16					X	
17		X				
18				X		
19				X		
20				X		
21		X				
22				X		
23				X		
24				X		
25	****	SAFE FOOD & WATER/PROTOACTION FROM CONTAMINATION				****
25						
26			X			
27						
28						
29						

Name of Inspecting Official	Signature of Inspecting Official	Name and Title of Person Receiving Copy of Report
FAUSTO GARCIA JR		

\*\*\*\*\* MANAGEMENT & PERSONNEL \*\*\*\*\*

IN OUT RV NO NA COS

30	Wiping cloths properly used and stored.		X				
31	Toxic substances properly identified, stored and used.						
32	Presence of insects/rodents minimized; outer openings protected, animals are allowed.						
33	Personal cleanliness (fingernails, jewelry, outer clothing, hair restraint).						
34	**** FOOD TEMPERATURE CONTROL ****						
34	Food temperature measuring devices provided and calibrated.						
35	Thin-probed temperature measuring device provided for monitoring thin foods (i.e. meat patties and fish fillets).						
36	Frozen foods maintained completely frozen.						
37	Frozen foods properly thawed.						
38	Plant food for hot hot holding properly cooked to at least 135F.						
39	Methods for rapidly cooling PHFs are properly conducted and equipment is adequate.						
40	**** EQUIPMENT, UTENSILS & LINENS ****						
40	Materials, construction, repair, design, capacity; location, installation, maintenance.						
41	Equipment temperature measuring devices provided (refrigeration units, etc).						
42	In-use utensils properly stored.						
43	Utensils, single service items, equipment, linens properly stored, dried and handled.		X				
44	Food and non-food contact surfaces properly constructed, cleanable, used.						
45	Proper warewashing facilities installed, maintained, cleaned, used; sanitizer test strips available, used.						
46	**** PHYSICAL FACILITIES ****						
46	Plumbing system properly installed; safe and in good repair; no potential backflow or back siphonage conditions.						
47	Sewage & waste water properly disposed.						
48	Toilet facilities are adequate, properly constructed, properly maintained, supplied and cleaned.						
49	Design, construction, installation & maintenance proper.						
50	Adequate ventilation; lighting; designated areas used.		X				
51	Premises maintained free of litter, unnecessary articles, cleaning and maintenance equipment properly stored; and garbage and refuse properly maintained.						
52	All required signs (handwashing, inspection placard, etc) provided and conspicuously posted.						

--	--	--

Name of Inspecting Official	Signature of Inspecting Official	Name and Title of Person Receiving Copy of Report
FAUSTO GARCIA JR		

Retail Food Establishment Inspection Report  
CITY OF ENGLEWOOD

**RETAIL FOOD INSPECTION REPORT  
(CONTINUED)**

2/26/2013 DMEIS- ALTERNATE PROGRAM

Item # NJAC 8:24 REMARKS

---

OK Handsink stocked and operational with hotwater, soap and paper towels  
OK Freezer 2°F products frozen solid  
OK Beverage air refrigerator 39°F  
OK Snapple refrigerator 40°F  
COS eggs should be stored under ready to eat food to prevent cross contamination; PIC moved to bottom of refrigerator  
OK Hot hold 142°F carrots  
OK Hot hold 140°F pepperoni pizza  
OK Beverage air refrigerator 41°F  
(26) 3.3D condiment bottles must be labeled  
OK CFM Annette Wroten Serv Safe exp 2/15/15  
OK Pest control through Western Pest Control last visit 1-14-13 1 time a month  
OK Milk powers refrigerator 38°F  
OK Fruits thoroughly washed before serving  
OK Employee demonstrated proper use of 3 compartment sink  
OK thin-probe thermometer available for cooking temperatures  
(50) 6.3A light bulb in hood suppression system is burned out; must be replaced  
(43) 4.11f single serve utensils must be held with handle up  
(30) 3.3m in use wiping cloth on table; must be stored in sanitizing solution

Note: surge protectors used; may be a fire hazard will contact dave from pomptonian and fire inspector to advise.

Satisfactory Posted

Name of Inspecting Official	Signature of Inspecting Official	Name and Title of Person Receiving Copy of Report
FAUSTO GARCIA JR		