	□Failed □Closed □IHH State of Maine Health Inspection Report Page 1 of 5																
	Establishment Name As Authorized by 22 MRSA § 2496					Critical Violations Non-Critical Violations Certified Food Protection Manager							2	Dat			2/201
													5 Y	1		1:15 2:15	
	License Expiry Date/EST. ID# Address					_		4 1 1	otec	Zuon Mana	gei	Zip Code	T	_	ephone	<u> </u>	<u> FIVI</u>
11/14/2018 / 18159 70 LINCOLN ST					1 -					04240-779	22		-piiolie 7-333-3	663			
License Type Owner Name										License Pos		ٺ	Risk Cate				
MUN - EATING PLACE HOSPSERV INC						Regular											
							_			BLIC HE	AI TH INTER	 VENTIONS	1				
	FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS																
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable Mark"X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat									R =repeat vio	olation							
Со	mplian	ce Statu	s		cos	R		C	omp	liance Stat	tus						cos R
				upervision	Potentially Hazardous Food Time/Temperature 16 IN Proper cooking time & temperatures												
1	I	IN	PIC present, demonstra performs duties	ates knowledge, and			17			IN IN	Proper cooking				oldina		\vdash
			•	oyee Health			18	_		IN	Proper cooling	• •			Juliy		
2		IN	Management awarenes		\perp	Ш	19	_		IN	Proper hot hold						
3		IN		, restriction & exclusion		Щ	20			OUT	Proper cold ho	lding tempera	atures				х
4	ı	IN		drinking, or tobacco use	Т	П	2	1		IN	Proper date ma	arking & disp	osition				
5		IN IN	No discharge from eyes		丄	口	22	2		IN	Time as a publi	c health cont	rol: pr	oced	lures & re	ecord	
				mination by Hands				Ţ			1	mer Advisory					
6		IN	Hands clean & properly			Ш	Consumer advisory provided for raw or					r					
7		_{IN}		vith RTE foods or approved				-			undercooked fo		**				
8		INI I	alternate method properly followed		+	Н		٠			Highly Susce Pasteurized for			1 foo	de not		
ů		IN	Adequate handwashing facilities supplied & accessible Approved Source			Ц	24	4		IN	offered	ous useu, pro	ilibitet	100	us not		
9		IN			$\overline{}$	П						Chemical					
10			Food obtained from app		+	Н	25	5		IN	Food additives	: approved &	prope	rly us	sed		
11		IN IN	Food received at prope	•	+	Н	26	6		IN	Toxic substance	es properly i	dentifi	ed, s	tored & u	sed	
Н		IIN I		ood in good condition, safe, & unadulterated equired records available: shellstock tags		Н			Conformance with Approved Procedures								
12		IN	parasite destruction				27	丌		IN	Compliance wi	th variance, s	pecial	ized	process,		
Н			Protection fr	om Contamination	_		ìĽ			IIN	& HACCP plan						
13 IN Food separated & protected						П	[-	Diek (Factors	are improper prac	ctices or proces	durae id	lontifi	ad as the r	noet	
14 IN Food-contact surfaces: cleaned and sanitized										outing factors of f	-						
15	I	IN	Proper disposition of reconditioned, & unsafe	eturned, previously served, e food							control measure						
				GOOD	RET/	AIL I	PR/	AC	TIC	ES							
			Good Retail Practices are	preventative measures to control the	additio	on of	path	noge	ens,	chemicals,	and physical obje	cts into foods.					
Ма	rk "X" in	n box if nu	umbered item is not in com	pliance Mark "X" in appropriate	e box f	or C0	OS a	and/	or R	COS	=corrected on-site	e during inspec	tion	R=r	epeat viol	ation	
					cos	R											cos F
			Safe Food and	Water							Proper Us	e of Utensils					
28	IN Pa	asteurize	d eggs used where requ	ired	\top	П	4	1 11	v I i	n-use uten:	sils: properly sto	ored					
-		ater & ic	e from approved source		\top	П	42	2 11	_		uipment, & line		tored,	drie	d, & hand	lled	\sqcap
30	IN Va	ariance o	btained for specialized p	processing methods		П	43	3 11	v s	Single-use	& single-service	articles: pro	perly s	tore	d & used		
	Food Temperature Control						44	4 11	V C	Gloves use	d properly						
31	IIN I	•	oling methods used; ade	quate equipment for				ļ			Utensils, Equip	ment and Ven	ding				
	ter		re control			Ш	45	5 X	. I		-food contact su						\
32			properly cooked for hot	holding	_	Ш	\vdash	+			signed, constru						$\vdash \vdash$
33		•	thawing methods used		+	\vdash	46 X Warewashing facilities: installed, maintained, & used; test strips						$\vdash \vdash$				
34	IN Th	ermome	ters provided and accur			Щ	47	7 X	1	lon-food co	ontact surfaces						Ш
	Food Identification Physical Facilities																
35	IN Fo		erly labeled; original con				48	-	-		water available;						\vdash
-	ν I.		Prevention of Food Cont		T		49	-			stalled; proper						$\vdash\vdash$
36 X Insects, rodents, & animals not present 37 IN Contamination prevented during food preparation, storage & display						Н	50 N Sewage & waste water properly disposed					\vdash					
37 N Contamination prevented during food preparation, storage & display 38 N Personal cleanliness					+	\vdash	51 IN Toilet facilities: properly constructed, supplied, & cleaned 52 IN Garbage & refuse properly disposed; facilities maintained					\vdash					
-							53	-	-		refuse properly cilities installed,	•			пашев		\vdash
-							54	_	-		entilation & ligh				sed		\vdash
70	445	uorning if	and a vegetables	V A Marie	+		<u>ٿ</u>	* "	٠ ۱ ۴	rucyuale V	citulation & ligh	ung, ucaigila	cou di t	as u	JEU		
Per	son in (Charge (Signature)	x () Mario								Date:	12/12/	2017			
Hea	lth Insp	pector (S	ignature)	mo Qo	7	~	5	and the same of	and the same	Follow-u	ıp: YES	NO D	ate of F	Follo	w-up:		

	State of	Maine He	ealth Inspect	tion Repo	ort	Page 2 of 5
Establishment Name FISH BONES AMERICAN GRILL		As Authorized L	Date 12/12/2017			
icense Expiry Date/EST. ID# 1/14/2018 / 18159	Address 70 LINCOLN ST	г	City / State LEWISTON	/ ME	Zip Code 04240-7792	Telephone 207-333-3663
	Te	emperatu	ire Observat	ions		
Location	Temperature	1		Notes		
wash cycle	160					
dessert cake	37					
hot water	110plus					
sandwich bar	40					
beef	37	walk-in				
sundried tomato butter	60plus					
schrimp	44					
rinse cycle	145					
walkin cooler	40					
soup	170	hot holding				
cooler	39					

Person in Charge (Signature)

Sus- Ogra-

Date: 12/12/2017

Health Inspector (Signature)

State of Maine Health Inspection Report

Page 3 of 5 12/12/2017

Establishment Name

11/14/2018

FISH BONES AMERICAN GRILL

/18159

License Expiry Date/EST. ID# **Address 70 LINCOLN ST**

City / State LEWISTON

Zip Code 04240-7792

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

20: 3-501.16.(A).(2): C: PHF not maintained at 41 F or less.

INSPECTOR NOTES: corrected on site-discarded item

36: 6-501.112: N: Dead or trapped birds, rodents, or insects not removed from control devices and the premises at a frequency that prevents their accumulation, decomposition, or the attraction of pests.

INSPECTOR NOTES: one mouse found dead in trap (was removed by PIC) see note section for more information

45: 4-204.12: N: Equipment openings, closures and deflectors are improperly designed and constructed.

INSPECTOR NOTES: repace split door seals sandwich bars

46: 4-501.15: N: Ware washing machines not properly operated.

INSPECTOR NOTES: need 180 temp for final rinse cycle PIC contacted Nason refrigeration co. to repair

47: 4-602.13: N: Non-food contact surfaces are not cleaned at a frequency necessary to preclude accumulation of soil residues.

INSPECTOR NOTES: clean door seal walk-in cooler door.

49: 5-205.15: C: Plumbing system not properly maintained in good repair.

INSPECTOR NOTES: Handsink by ice machine is leaking water underneath the sink onto the floor

53: 6-501.12: N: The physical facilities are not clean.

INSPECTOR NOTES: clean edges of floors- some walls need cleaning

Person in Charge (Signature)

Health Inspector (Signature)

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Page 3 of 5

Date: 12/12/2017

	Page 4 of 5					
Establishment Name					Date	12/12/2017
FISH BONES AMERICAN GRILL						
License Expiry Date/EST. ID# 11/14/2018 / 18159	Address 70 LINCOLN ST	City / State LEWISTON	ME	Zip Code 04240-7792		

Inspection Notes

RED FOLDER-EMPLOYEE HEALTH POLICY

Employee Health Policy left and explained the policy with the PIC. Please retain information as you will be asked next year during your inspection to provide the employee Health Policy information which was left with the PIC.

Certified Food Protection Manager

Unless directed otherwise, all Eating Establishments are required to submit a copy of their Certified Food Protection Manager (CFPM) certificate. A CFPM must be hired within 90 days of a new eating establishment opening or when a CFPM leaves employment. For a list of CFPM courses and trainers go to http://www.maine.gov/healthinspection/training.htm

Please provide a copy of this certification(s) to your inspector [Susan Reny] by emailing to [sreny@lewistonmaine.gov] or faxing to 207-795-5071. A copy may also be sent to Carol Gott, Health Inspection Program, 286 Water St. 3rd Floor, Augusta, ME 04333 or carol.gott@maine.gov.

Please include the name of your establishment and the establishment ID# with your certification(s).

2013 Maine Food Code Adoption

The Maine Food Code was adopted in October of 2013. Please refer to our website for a copy, http://www.maine.gov/healthinspection. Following are a few of the major changes:

- No Bare Hand Contact with Ready-To-Eat Food. Handlers are required to use gloves, utensils, deli papers, etc., to avoid bare hand contact with ready-to-eat food;
- Establishments must have clean-up procedures for employees to follow following vomiting and diarrheal events;
- Responsibilities of the person in charge for ill employees (exclusions and restrictions); and,
- Date marking of Ready-to-eat potentially hazardous foods.

Violation Correction Timeframe

Critical violations should be corrected on site, but in any event, within 10 days. The licensee must contact the inspector when the critical violation has been addressed at 207-(513-3125 Ext 3224) or email (sreny@lewistonmaine.gov). Non-critical violations must be corrected within 30 days. Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department to include fines and penalties, which are outlined in Sections 7, 8 and 9 of the Rules Relating to the Administration and Enforcement of Establishments Licensed by the Health Inspection Program available at http://www.maine.gov/healthinspection. License renewals can be denied if violations are not corrected within the noted timeframes.

C= Critical violation and NC= Non-critical violation

"Critical violation" means a provision of the Food Code that, if in non-compliance, is more likely than other violations to contribute to food contamination, illness or environmental health hazard.

Additional Inspection Fee

License fees provide for two inspections per year. When additional inspections are required, the Department may charge an additional \$100 fee to cover the costs of each additional inspection or visit.

Document Retention/Posting

Pursuant to the Maine Food Code, the establishment's current license must be displayed. In addition, a sign or placard must be posted in a conspicuous area notifying consumers that a copy of the most recent inspection report is available upon request. CFPM certificates must be posted in a conspicuous area and must be available to the Department upon request.

CFPM Paul Landry exp 10/5/2021 cert# 14273533

Pine State Pest Solutions is coming in weekly for pest management control per the PIC, several traps noted throughout facility- no other signs of rodents noted during inspection.

Person in Charge (Signature)

Date: 12/12/2017

Health Inspector (Signature)

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	Pag	ge 5 of 5				
Establishment Name					D <u>ate</u>	12/12/2017
FISH BONES AMERICAN GRILL						
License Expiry Date/EST. ID# 11/14/2018 / 18159	Address 70 LINCOLN ST	City / State LEWISTON	ME	Zip Code 04240-7792		

Inspection Notes

Health Inspector (Signature)

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Date: 12/12/2017

Person in Charge (Signature)