Radnor Township

301 IVEN AVENUE WAYNE, PA 19087 610-688-5600

# **Retail Food Facility Inspection Report**

Facility: VIC & DEAN'S Facility ID: 74822 Owner: PIERTO AMATO Address: 409 W WAYNE AV City/State: WAYNE PA

Zip: 19087 County: Delaware Region: Region 7

Insp. ID: 830764 Insp. Date: 11/30/2020 Insp. Reason: Regular No. of Risk Factors: 1 No. of Repeat Risk Factors: 0

### Phone: Overall Compliance: IN FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS Risk Factors are important practices and procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Intervention are control measures to prevent foodborne illness or injury. IN = In Compliance, OUT = Out of Compliance, N/O = Not Observed, N/A = Not Applicable, C = Corrected On Site, R = Repeat Violation Supervision **Protection From Contamination** 1. Person in charge present, demonstrates knowledge, & 14. Food separated & protected ln performs duties 15. Food-contact surfaces: cleaned & sanitized In **Employee Health** 16. Proper disposition of returned, previously served, In 2. Management, food employee & conditional food employee reconditioned, & unsafe food In knowledge, responsibilities & reporting Time/Temperature Control for Safety 3. Proper use of restriction & exclusion In 17. Proper cooking time & temperatures In 4. Procedure for responding to vomiting & diarrheal events In 18. Proper reheating procedures for hot holding N/A **Good Hygienic Practices** 19. Proper cooling time & temperatures N/A 5. Proper eating, tasting, drinking, or tobacco use N/O 20. Proper hot holding temperatures N/A 6. No discharge from eyes, nose, & mouth 21. Proper cold holding temperatures ln In **Preventing Contamination by Hands** 22. Proper date marking & disposition In 23. Time as a public health control: procedures & records 7. Hands clean & properly washed In In 8. No bare hand contact with RTE food or a pre-approved Consumer Advisory ln alternate method properly followed 24. Consumer advisory provided for raw / undercooked foods N/A 9. Adequate handwashing sinks properly supplied & accessible Out, C **Highly Susceptible Population Approved Source** 25. Pasteurized foods used; prohibited foods not offered In 10. Food obtained from approved source Food/Color Additives & Toxic Substances 11. Food received at proper temperature N/O 26. Food additives: approved & properly used In 12. Food in good condition, safe, & unadulterated ln 27. Toxic substances properly identified, stored & used; held for In 13. Required records available: shellstock tags, parasite N/A retail sale, properly stored destruction Conformance with Approved Procedures 28. Compliance with variance, specialized process, reduced N/A oxygen packaging criteria or HACCP plan **GOOD RETAIL PRACTICES** Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Safe Food & Water Proper Use of Utensils 29. Pasteurized eggs used where required In 42. In-use utensils: properly stored ln 30. Water & ice from approved source In 43. Utensils, equipment & linens: properly stored, dried & In 31. Variance obtained for specialized processing methods In 44. Single-use/single-service articles: properly stored & used ln **Food Temperature Control** 45. Gloves used properly ln 32. Proper cooling methods used; adequate equipment for In Utensils, Equipment & Vending temperature control 33. Plant food properly cooked for hot holding ln 46. Food & non-food contact surfaces cleanable, properly ln 34. Approved thawing methods used designed, constructed, & used In 47. Warewashing facilities: installed, maintained & used; test ln 35. Thermometers provided & accurate In strips Food Identification 48. Non-food contact surfaces clean In 36. Food properly labeled; original container In Physical Facilities **Prevention of Food Contamination** 49. Hot & cold water available; adequate pressure ln 37. Insects, rodents & animals not present ln 50. Plumbing installed; proper backflow devices In 38. Contamination prevented during food preparation, storage & In 51. Sewage & waste water properly disposed ln display 52. Toilet facilities: properly constructed, supplied, cleaned In 39. Personal cleanliness ln 53. Garbage/refuse properly disposed; facilities maintained ln 40. Wiping cloths: properly used & stored ln 54. Physical facilities installed, maintained, & clean ln 41. Washing fruit & vegetables In 55. Adequate ventilation & lighting; designated areas used In FOOD EMPLOYEE CERTIFICATION Certified Food Employee Certificate 56. Certified Food Employee employed; acts as PIC; accessible 57. Certified food manager certificate: valid & properly displayed ln In Visit Date Person in Charge Person In Charge Sanitarian Signature Time Out Signature 11/30/2020 Vito Amato (No Sign 11/30/2020 Marie Carbonara 11/30/2020 11:00 AM 11:45 AM Marie Carlone Policy)



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Insp. ID: 830764 Insp. Date: 11/30/2020 Insp. Reason: Regular No. of Risk Factors: 1 No. of Repeat Risk Factors: 0 Overall Compliance: IN

			TEMPER	RATURE OBSERVAT	IONS		·	
Iter	ı L	Location Temp	Item	Location	Temp	Item	Locatio	n Temp
Cheese	Prep	Area 40°F	Other	Walk-In Cooler	36°F	sliced tomotoes	Bain Marie	40°F
				IS AND CORRECTIVE t must be corrected with				
Item Number	Violation of Code	Comment				Cor	ect By Date Repeat Violation	
9.	6 - 301.11	Paper towel dispenser emp	ty at the handwash	sink in the kitchen area	-cos			\$ :

# **PUBLISHED COMMENTS**

The compliance status of this facility and a copy of this inspection report will be posted on the PA Department of Agriculture website.



# Radnor Township

301 IVEN AVENUE WAYNE, PA 19087 610-688-5600

## COVID-19 Inspection Report Self Certification ID:

Facility: VIC & DEAN'S Facility ID: 74822 Owner: PIERTO AMATO Address: 409 W WAYNE AV

City/State: WAYNE PA
Zip: 19087 County: Delaware Region: Region 7
Phone:

License Type:

Insp. ID: 830762 Insp. Date: 11/30/2020 Insp. Reason: Covid-19
Overall Compliance: IN
# COVID-19 Violations: 0
# COVID-19 Repeat Violations: 0

# **COVID-19 TRANSMISSION MITIGATION CHECKLIST**

The measures as outlined in the April 15th, 2020 Order of the Secretary of the Pennsylvania Department of Health Directing Public Health Safety Measures for Business Permitted to Maintain In-person Operations and the July 16, 2020 Order of the Governor of the Commonwealth of Pennsylvania Directing Targeted Mitigation Measures are mandatory to inhibit transmission of the virus through your workforce and the general population.

	HEALTH SAFETY MEASU	RES FOR BUSINESSES			Applicable, C = Corrected On Customer seating			
SA cle	usinesses ENCOURAGED TO AFETY MEASURE SELF-CEF ear view of CUSTOMERS.	RTIFICATION SIGNAGE in	N/A	PAF	OOR / OUTDOOR TABLES SPAC RTIES and/or PHYSICAL BARRIE omers where booths are arranged	RS TO SEPERATE	ln	
	usinesses MUST DISPLAY CO	∃ In	13. INDOOR / OUTDOOR seating AT BAR IS CLOSED.			N/A		
3. 00	GNAGE in clear view of custo CCUPANCY is limited to 50%	ln ln	14. LIVE PAT	EAST 6 FEET from	N/A			
	maximum.  4. Employees MUST wear MASKS during their time at the			Capacity limits				
bu	isiness, except WHILE ON BE	REAK to eat or drink.	ln .	15. IND	OOR seating capacity is limited to maximum for restaurants and ba	50% of posted fire	ln	
FE	JSINESS MUST MAINTAIN A S SET BETWEEN CUSTOMER: es.	ln	16. INDo	INDOOR discrete event or gathering capacity is limited to 25 people (including staff) with social distancing.				
6. SE	EPARATE CASHIERS from C HYSICAL BARRIERS (plexigla	ln	17. OUT 250	DOOR discrete event or gathering capacity is limited to people (including staff) with social distancing.				
RE	STAURANT, BARS, AND S	PECIAL EVENT FACILITIES	ot to the first of the control of th					
The Competition	Food service	operations		1				
7. Fa	7. Facility offering dine-in / take-out food.			1				
8. Fa	Facility offering alcohol for consumption ONLY with a meal WHILE SEATED.      Facility offering take-out alcoholic beverages.							
9. Fa								
10. Fa	cility offering bar service.	and the second s	N/A					
11. Fa	icility stops serving alcohol at	11pm.	N/A					
isit Date	Person In Charge	Person In Charge Signature	Sig. Date	Sanitarian	Sanitarian Signature	Sig. Date Time In	Time	
/30/2020	0 Vito Amato (No Sign		1/30/2020 Mar	rie Carbonara	Mr. Palasen	11/30/2020 11:15 AM	1 11:45	

Visit Date	Person In Charge	Person In Charge Signature	Sig. Date	Sanitarian	Sanitarian Signature	Sig. Date	Time In	Time Out
	Vito Amato (No Sign Policy)	and 2-6-min mass 22000 and a sea on a management and an angular of an ing in any sea of the sea of	11/30/2020	Marie Carbonara	ManuCarloser	11/30/2020	11:15 AM	11:45 AM