



Food Facility Inspection Report



PENNSYLVANIA DEPARTMENT OF AGRICULTURE 2301 N CAMERON ST HARRISBURG, PA 17110 Phone: (717) 787-4737	No. of Risk Factor/Intervention Violations	0	Date	11/15/2006
	No. of Repeat Risk Factor/Intervention Violations	0	Time In	12:45 PM
	Overall Compliance Status	IN	Time Out	01:45 PM

Food Facility FIORE RESTORANTE ITALIANO BAR & PIZZERIA	Address 401 MAIN ST	City/State SHOEMAKERSVILLE, PA	Zip Code 19555-1529	Telephone (610) 562-2929
Registration # R001103	Owner	Purpose of Inspection Complaint	License Type Permanent E&D	Risk Category High

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable

COS=corrected on-site during inspection R=repeat violation

Compliance Status		COS	R
Demonstration of Knowledge			
1	IN	Certification by accredited program, compliance with Code, or correct responses	
Employee Health			
2	IN	Management awareness; policy present	
3	IN	Proper use of reporting; restriction & exclusion	
Good Hygienic Practices			
4	IN	Proper eating, tasting, drinking, or tobacco use	
5	IN	No discharge from eyes, nose, and mouth	
Preventing Contamination by Hazards			
6	IN	Hands clean & properly washed	
7	IN	No bare hand contact with RTE foods or approved alternate method properly followed	
8	IN	Adequate handwashing facilities supplied & accessible	
Approved Source			
9	IN	Food obtained from approved source	
10	IN	Food received at proper temperature	
11	IN	Food in good condition, safe, & unadulterated	
12	IN	Required records available: shellstock tags, parasite destruction	
Protection From Contamination			
13	IN	Food separated & protected	
14	IN	Food-contact surfaces: cleaned & sanitized	
15	IN	Proper disposition of returned, previously served, reconditioned, & unsafe food	

Compliance Status		COS	R
Potentially Hazardous Food Time/Temperature			
16	IN	Proper cooking time & temperature	
17	IN	Proper reheating procedures for hot holding	
18	IN	Proper cooling time & temperature	
19	IN	Proper hot holding temperature	
20	IN	Proper cold holding temperature	
21	IN	Proper date marking & disposition	
22	IN	Time as a public health control; procedures & record	
Consumer Advisory			
23	IN	Consumer advisory provided for raw or undercooked foods	
Highly Susceptible Population			
24	IN	Pasteurized foods used; prohibited foods not offered	
Chemical			
25	IN	Food additives: approved & properly used	
26	IN	Toxic substances properly identified, stored & used	
Conformance with Approved Procedure			
27	IN	Compliance with variance, specialized process, & HACCP plan	

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Compliance Status		COS	R
Safe Food and Water			
28	IN	Pasteurized eggs used where required	
29	IN	Water & ice from approved source	
30	IN	Variance obtained for specialized processing methods	
Food Temperature Control			
31	IN	Proper cooling methods used; adequate equipment for temperature control	
32	IN	Plant food properly cooked for hot holding	
33	IN	Approved thawing methods used	
34	IN	Thermometer provided & accurate	
Food Identification			
35	IN	Food properly labeled; original container	
Prevention of Food Contamination			
36	IN	Insects, rodents & animals not present; no unauthorized persons	
37	IN	Contamination prevented during food preparation, storage & display	
38	IN	Personal cleanliness	
39	IN	Wiping cloths: properly used & stored	

Compliance Status		COS	R
Proper Use of Utensils			
41	IN	In-use utensils: properly stored	
42	IN	Utensils, equipment & linens: properly stored, dried & handled	
43	IN	Single-use & single-service articles: properly stored & used	
44	IN	Gloves used properly	
Utensils, Equipment and Vending			
45	IN	Food & non-food contact surfaces cleanable, properly designed, constructed, & used	
46	IN	Warewashing facilities: installed, maintained, & used; test strips	
47	IN	Non-food contact surfaces clean	
Physical Facilities			
48	IN	Hot & cold water available; adequate pressure	
49	IN	Plumbing installed; proper backflow devices	
50	IN	Sewage & waste water properly disposed	
51	IN	Toilet facilities: properly constructed, supplied, & cleaned	
52	IN	Garbage & refuse properly disposed; facilities maintained	
53	IN	Physical facilities installed, maintained, & clean	

40	IN	Washing fruit & vegetables			54	IN	Adequate ventilation & lighting; designated areas used		
Person in Charge (Signature)					Date:				
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Inspector (Signature) Judith Torrens					Date: 11/15/2006				
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Food Establishment Inspection Report



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Registration #	Owner	Purpose of Inspection Complaint	License Type Permanent E&D	Risk Category High

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
Remarks	Dishes are done by hand, however a sanitizer is used in the final step. Sanitizer is sterimine. Very clean facility. No further followup on this matter.

Person in Charge (Signature) 	Date:
Inspector (Signature) Judith Torrens 	Date: 11/15/2006