| DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION | | | INSPECTION SUMMARY - BUS SERVICE AREA SANITATION | | |
|---|--|-----|---|-------------------------|--|
| NOTE: The items marked below identify deficiencies in operations or facilities which must be corrected within a reasonable time period or by such date as may be specified by the regulatory authority. Failure to comply with any time limits for correction specified in reference to this notice may result in cessation of acceptability or your operations, service or product for use on or by interstate conveyances. | | | | | |
| OWNER/OPERATOR AND ADDRESS | | | ESTABLISHMENT NAME | | |
| | | INS | PECTION DATE | FEI NO. | |
| | | | | | |
| RFF | APPROVED PROVISIONAL (Expiration Date PORT PREPARED BY (Name and Title) |) | NOT APPROVED | | |
| | | | | | |
| DEFICIENCIES ARE INDICATED BY AN "X", NOT OBSERVED BY AN "N", SATISFACTORY BY A "S". | | | | | |
| | POTABLE WATER EMPLOYEES FACILITIES | | | | |
| 1 | Water Piping System Acceptable | | Adequate, Convenient Toilets | , Locker Rooms and | |
| 2 | No Cross Connections* | 27 | Washrooms | | |
| 3 | No Back Flow Connections* | 28 | Clean, Good Repair | | |
| 4 | Adequate Pressure | 29 | landwashing Facilities Acceptable | | |
| 5 | Hydrants Acceptable | 30 | 0 0 | Handwashing Sign Posted | |
| 6 | Location Satisfactory, Acceptable Type in Good Repair Hose Bib Protected* | 31 | Soap, Towels and Adequate Water | | |
| 7 8 | | 32 | Drinking Water, If Provided, of Safe Quality, Properly Dispensed and No Common Cups* | | |
| 8 9 | Proper Drainage Water Hose Acceptable | | OTHER | | |
| 9 | Satisfactory Material, Smooth and Quick Type Coupling, | 22 | | | |
| 10 | Where Required | 33 | Conveyance Water Operation | | |
| 11 | Satisfactory Nozzle Guard, Different Size or Shape From Waste Connection | 34 | Acceptable* Conveyance Waste Removal Operations | | |
| 12 | Hose Protected, Stored and Handled Properly | 35 | and Procedures Acceptable* | | |
| | WASTE DISPOSAL | 36 | Other Critical Areas* | | |
| 13 | Refuse Disposal Satisfactory | 37 | Other Non-Critical Areas | | |
| 14 | Handled Properly, No Spillage | OTH | THER COMPANIES SERVICED: | | |
| 15 | Satisfactory Containers, Covered and Emptied Frequently | | | | |
| 16 | Containers Clean in Good Repair | | | | |
| 17 | Toilet/Waste Disposal Satisfactory | | | | |
| 18 | Sewage Properly Removed* | | | | |
| 19 | Facilities Separate From Food/Bevarage Servicing Areas | | | | |
| 20 | Smooth, Impervious Floors, Sloped to Drain | | | | |
| 21 | Clean, Good Repair | | | | |
| 22 | Floor Hopper Acceptable | | | | |
| 23 | Flushing/Replenishment of Toilet System Acceptable | | | | |
| 24 | Separate Hose Provided | | | | |
| 25 | Hose Connection Different From Size/Shape of PW Connections* | | | | |
| 26 No Direct Connection to PW Distribution System* | | | | | |
| RE | MARKS | | | | |
| | | | | | |