□Failed □Closed □IHH State of Maine Health Inspection Report Page 1 of 4																
_						Critical Violations							Date		1/17/2	
Establishment Name As Authorized by 22 MRSA § 2 LEGENDS SPORT BAR & GRILL							tical Violations d Food Protection Manager					_	Time II		1:15 F 3:00 F	
										Zip Code	<u> </u>	Teleph		<u> </u>	IVI	
License Expiry Date/EST. ID# Address 10/16/2020 / 19799 4 MOLLISON WAY						1 -			04240		204-2		051			
License Type Owner Name									License Pos	ted		k Cate				
MUN - EATING PLACE MAINE BILLARDS LEAGUE II							•		•		Yes	8			• •	
							<u> </u>									
	FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS															
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark"X" in appropriate box for COS and/or R 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 Compliance Status Supervision Potentially Hazardous Food Time/Temperature											ļ	cos R				
1 IN PIC present, demonstrates knowledge, and						П	16 IN Proper cooking time & temperatures							\top		
·	_	11.4	performs duties		17 IN Proper reheating procedu				ng procedure	es for hot holding						
2		IN	Management awarenes	loyee Health	$\overline{}$	18 IN Proper cooling time & tem										
3		IN		g, restriction & exclusion	& exclusion							-				
				jienic Practices			21	20 IN Proper cold holding tempe 21 IN Proper date marking & dis								+
<u>4</u>		IN IN	Proper eating, tasting, No discharge from eyes	drinking, or tobacco use		Н	22		IN		<u> </u>				\dashv	
Ť		11.4		mination by Hands					Time as a public health control: procedures & record							
6		IN	Hands clean & properly		Т	П	Consumer advisory provided for raw or								\top	
7		INI	No bare hand contact with RTE foods or approved			П	23 IN undercooked			foods					\perp	
		IN	alternate method prope	erly followed		Ц				ptible Populations						
8		IN	Adequate handwashing facilities supplied & accessible				Pasteurized foods used; prohibited foods not									
				ved Source	<u> </u>	\dashv				offered	Chemical					
9		IN	Food obtained from app			Ц	25		IN	Food additives		nrone	rly used	1	Т	$\overline{}$
10		IN	Food received at prope	•	+	Н	26		IN	Toxic substance					sed	_
11		IN	Food in good condition		+	Н	Н		114	Conformance with	<u> </u>			<u> </u>	.000	
12		IN	Required records avail parasite destruction	able: shellstock tags			77	П	18.1	Compliance wi				ocess.		\top
			<u> </u>	om Contamination			27		IN	& HACCP plan		, p 0 0 .a.	ou p	,		
13		IN	Food separated & prote		Т	П	$\overline{}$	-	l. 6 1			d 1 a		41		7
14	IN Food-contact surfaces: cleaned and sanitized					П			k Factors	are improper pra	•					
15	IN Proper disposition of returned, previously served, prevalent contributing factors of foodborne illness or injury Interventions are control measures to prevent foodborne ill															
			reconditioned, & unsaf			Ш										
			0 10 1 10 11	GOOD F				_								
				preventative measures to control the												
Ma	rk ">	(" in box if n	umbered item is not in com	ppliance Mark "X" in appropriate	_	т т)S an	nd/or	R C	COS=corrected on-site	e during inspec	ction	R=repe	eat viol		
					cos	R	\perp								ď	OS R
			Safe Food and							Proper Us	e of Utensils					
28 IN Pasteurized eggs used where required						Ш	41 N In-use utensils: properly stored									
29	IN 		e from approved source		+	Ш	42 IN Utensils, equipment, & linens: properly s								+	
30	N Variance obtained for specialized processing methods						43 IN Single-use & single-service articles: properly stored & used								+	
	ı	Duan - : -	Food Temperature				44	IN	Gloves	used properly	mont and V	dina				
31	IN	Proper cod temperatu	oling methods used; ade re control	quate equipment for					Food &	non-food contact su					T	
32	IN	· ·	properly cooked for hot	holding	+	\forall	45	Х		y designed, constru						×
33	IN		thawing methods used		+	H	46	IN	· · ·	ashing facilities: ins			& used:	test st	rips	\dashv
34			eters provided and accur	rate		П	47	-		d contact surfaces						
			Food Identificati							Physic	al Facilities					
35	IN	Food prop	erly labeled; original cor				48	IN	Hot & co	old water available;		essure				
			Prevention of Food Cont	tamination			49	IN	Plumbin	ng installed; proper	backflow dev	ices				
36	IN	Insects, ro	dents, & animals not pro	esent			50	IN	Sewage	& waste water pro	perly dispose	d				
37	IN Contamination prevented during food preparation, storage & display					\Box	51 IN Toilet facilities: properly constructed, supplied, & cleaned									
38 IN Personal cleanliness						Ш	52 IN Garbage & refuse properly disposed; facilities maintained									
39 X Wiping cloths: properly used & stored							53	-		l facilities installed,						\bot
40 N Washing fruits & vegetables 54 N Adequate ventilation & lighting; designated a									ted are	eas used	t					
Melinda of oncell Melinda Saul																
Person in Charge (Signature) Health Inspector (Signature) LOUIS LACHANCE Date: 1/17/2020 Follow-up: YES NO Date of Follow-up:																
Hea	lth I	nspector (S	ignature)	\mathcal{A} \mathcal{L}						_						
LO	LOUIS LACHANCE Follow-up: YES VNO Date of Follow-up:															

	State of	Maine	Health Inspect	ion Rep	ort	Page 2 of 4			
stablishment Name EGENDS SPORT BAR & GRILL			As Authorized by 22 MRSA § 2496						
icense Expiry Date/EST. ID# 0/16/2020 /19799	VAY	City / State LEWISTON	Zip Code 04240	Telephone 204-241-0051					
		empera	ture Observat						
Location	Temperature			Notes					
Chlorine solution	50-99 ppm	Sanitizer bu	ucket						
Hard boiled egg	34*	Reach in #2	2 (bottom)						
Air temp	40*	40* 3 door bar cooler							
Hi temp dish machine	148*/180*+	Wash/rinse	,						
Water	112*	Hand wash sink (restroom)							
Mac n cheese	39*	Coke coole	ır						
Water	114	Hand wash	sink (kitchen)						
Ground beef	36*	Walk in cod	oler						
Blue cheese	35*	Reach in #2	2 (top)						
Jalapeno	41*	Reach in (to	ор)						

Person in Charge (Signature)

Health Inspector (Signature) LOUIS LACHANCE Hows Lawhur

State of Maine Health Inspection Report Establishment Name LEGENDS SPORT BAR & GRILL License Expiry Date/EST. ID# Address City / State Zip Code 10/16/2020 / 19799 4 MOLLISON WAY LEWISTON ME 04240

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

39: 3-304.14.(B).(1): N: Wiping cloths used for wiping counters and other equipment surfaces not held between uses in a chemical sanitizer.

INSPECTOR NOTES: Multiple soiled wiping cloths held on food contact surfaces. Store wiping cloths in chemical sanitizer. *COS

45: 4-101.19: N: Nonfood contact surfaces of equipment that requires frequent cleaning not constructed of a corrosion-resistant, nonabsorbent, and smooth material.

INSPECTOR NOTES: **REPEAT** Wood surface at bar unsealed and is retaining spilt liquids that can harbor bacteria. Seal to be smooth and easily cleanable.

45: 4-204.16: N: Beverage tubing and/or cold plate improperly installed in contact with stored ice.

INSPECTOR NOTES: Ice as drink ingredient in contact with beverage tubing and hoses. Use food grade container to seperate beverage ice and cooling ice.

Person in Charge (Signature)

Health Inspector (Signature)
LOUIS LACHANCE

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Date: 1/17/2020

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Establishment Name					Date 1/17/2020
LEGENDS SPORT BAR & GRILL					
License Expiry Date/EST. ID# 10/16/2020 / 19799	Address 4 MOLLISON WAY	City / State LEWISTON	ME	Zip Code 04240	

Inspection Notes

Certified Food Protection Manager: Andrew Walton exp. 9/2/2020

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 at the time of a new eating establishment opening or within 60 days of 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 Carol Gott, Health Inspection Program, 286 Water St. 3rd Floor, Augusta, ME 04333, carol.gott@maine.gov or faxing to 207-287-3165.

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

Employee Health Policy:

The Health Inspection Program has implemented an educational public health initiative on Employee Health on March 1, 2017. The policy handouts will be provided to you by your inspector and reviewed during inspection for compliance. They are also available on the Program's website: http://www.maine.gov/healthinspection

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. * Establishments must have clean-up procedures for employees to follow following vomiting and diarrheal events. * 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 Louis Lachance when the critical violation has been addressed at 207-513-3125 extension 3224 or at llachance@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. 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.

Person in Charge (Signature)

Health Inspector (Signature)

LOUIS LACHANCE

Date: 1/17/2020

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