

BRIDGEWATER TOWNSHIP SANITARY INSPECTION REPORT

IDENTIFICATION

OWNER INFORMATION <i>(Complete this section only if different from establishment information)</i>			ESTABLISHMENT INFORMATION		
NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT			ESTABLISHMENT TRADING NAME <i>Bridgewater Diner</i>		
NUMBER AND STREET		COUNTY	NUMBER AND STREET		COUNTY
			<i>1244 Route 22</i>		<i>Somerset</i>
MUNICIPALITY		STATE	MUNICIPALITY	ZIP CODE	TELEPHONE NO.
			<i>Bridgewater</i>	<i>08807</i>	
ZIP CODE	COMUN. CODE		ESTABLISHMENT STATE LICENSE NO. (if appl.)	COMUN. CODE	

INSPECTION

TYPE OF ESTABLISHMENT	ESTABLISHMENT CODE	<input checked="" type="checkbox"/> <i>Preoperational</i> INITIAL INSPECTION <input type="checkbox"/> REINSPECTION <i>(other than initial inspection)</i>		
<input type="checkbox"/> RETAIL				
<input type="checkbox"/> POOL	GOODS <input type="checkbox"/> DESTROYED <input type="checkbox"/> EMBARGOED	TIME - (2400 HOURS)		
<input type="checkbox"/> CAMP		DATE	BEGIN	END
<input type="checkbox"/> OTHER		<i>9/9/2022</i>		

EVALUATION

SATISFACTORY
 CONDITIONALLY SATISFACTORY
 UNSATISFACTORY

Preoperational Inspection - Pass

OFFICIAL(S)

LOCAL BOARD OF HEALTH	INSPECTING OFFICIAL
NAME, ADDRESS AND TELEPHONE NUMBER Bridgewater Township 100 Commons Way Bridgewater, N.J. 08807 908-725-5750	INSPECTOR'S NAME AND TITLE <i>Patricia Timko Parker</i> <i>R.E.H.S.</i>
	INSPECTOR'S SIGNATURE
HEALTH OFFICER <i>Kevin Sumner</i>	INSPECTOR'S PERM. REG. NO. <i>B1934</i>

CONTINUATION SHEET

(for Inspections, Surveys, Audits, etc.)

Name (Individual, Facility, Establishment, etc.)

Bridgewater Diner

Date

9/9/2022

BRIDGEWATER TOWNSHIP

Item No.	Remarks
	Preoperational Inspection after the fire + renovation.
	3 comp sink - bleach used to sanitize
	Automatic Dishwasher - chemical feed: chlorine @ 50 ppm
	* Bathrooms - need soap. Automatic hand dryers. Handwash sign etc.
	Choking Sign by both in front of kitchen
	* Exterminator to come one more time before opening
	* All equipment trained on. One fudge by end of cooking line. Tech. supposed to service today. Beverage. Air upright.
	* Downstairs walk-in. one ceiling tile hanging. Fixing ceiling tile now.
	OK - new back exit screen doors installed and kick plates to prevent rodent entry.
	* One Flip top closest to walk-ins running at 47°F. Contacted technician to adjust temp to maintain 41°F or below.
	* Thermometers for all non-digital / display units
	Preoperational - PASS
	day to bring food in + open

Signature of Individual Completing Form

Kalena Imhoff

Signature of Owner of Facility, Establishment, etc. if required

[Signature]



THE TOWNSHIP OF BRIDGEWATER

100 COMMONS WAY/BRIDGEWATER NJ 08807

908/725-6300/ FAX 908/707-1235

TDD 908/725-6300/ 908/722-4111

Satisfactory

Massage Inspection Form - Bridgewater Ord. No. 09-16 Ch 138

Date: 9/1/2022 Initial/Repeat Inspection	Business Name: A New Day Wellness	Business Address: 1966 Washington Valley RD #7 Martinsville, NJ	Business Phone #: 732-893-8014
Owner's Name: Gino Gonzales	Owner's Home Address: 2 Health Quest Blvd Apt 111A Flemington, NJ 08822	Owner's Phone #: 201-388-0213	Note: Sleeping quarters removed & lingerie gone

Requirement:	Regulation:	Yes	No
1. Does the business have a massage Therapy Permit from township?	BOH ORDINANCE NO. 138-3	✓	
2. Is there a licensed massage therapist on the premises?	BOH ORDINANCE NO.138-4	✓	
3. Are Prices for all services prominently posted in the reception area?	BOH ORDINANCE NO.138-9J	✓	
4. Are all Massage Licenses prominently displayed?	BOH ORDINANCE NO.138-7	✓	
Building Requirements:			
5. Are Massage Therapy Rooms in good repair and maintained in a clean and sanitary condition?	BOH ORDINANCE NO.138-9L	✓	
6. Are Massage Therapy Rooms private?	BOH Ordinance NO.	✓	
7. Are employee dressing rooms available?	BOH Ordinance NO.	✓	
8. Are Wet and dry heat rooms, steam or vapor rooms or steam or vapor cabinets thoroughly cleaned each day the business is in operation?	BOH ORDINANCE NO.138-9L	✓	
9. Are showers and toilet rooms kept clean and sanitary?	BOH ORDINANCE NO.138-9A	✓	
10. Are Sleeping quarters prohibited?	BOH ORDINANCE NO.138-10	✓	
11. Is there a Handwashing sink available?	BOH ORDINANCE NO.138-9D	✓	
12. Does the HW sink have Hot/ cold Water, Soap, Hand drier or paper towels?	BOH Ordinance NO. 138-9D	✓	
13. Is the rest of the facility clean, dry and in good repair?	BOH ORDINANCE NO.138-9L	✓	
Hygiene:			
14. Are employees washing their hands with soap and hot water between customers?	BOH ORDINANCE NO.138-9D	✓	
15. Are employees wearing clean outer garments that are not transparent?	BOH ORDINANCE NO.138-9E	✓	
16. Are there clean Sheets and Towels?	BOH ORDINANCE NO.138-9K	✓	
17. Are Clean Sheets and Towels stored in a sanitary manner?	BOH ORDINANCE NO.138-9K	✓	
Supplies:			
18. Are oils, creams, lotion, and other preparations used in administering massage, bodywork or somatic therapies kept clean, in closed containers or in cabinets?	BOH ORDINANCE NO.138-9M	✓	
19. Animals are prohibited (except service dogs)	BOH ORDINANCE NO.138-9N	✓	
Prohibited Activity:			
20. Has the massage therapist knowingly touched or fondled in any manner the clients' genital areas?	BOH Ordinance NO. 138-9H		
21. Has the therapist, employee or operator performed or offered to perform any act that would require the touch of the patron's sexual or genital area?	BOH Ordinance NO. 138-9I		
22. Has the owner, or manager knowingly promoted prostitution, indecency and obscenity including the display of obscene material?	BOH Ordinance NO.		

Inspector's Name: Patricia Timko Parker Signature: Patricia Timko Parker