



# 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 <b>PIC - Mike Stergio</b>			ESTABLISHMENT TRADING NAME <b>Just Subs</b>		
NUMBER AND STREET			NUMBER AND STREET <b>113 Cramer Ave</b>		
COUNTY		MUNICIPALITY <b>Green Brook</b>		ZIP CODE <b>08812</b>	
MUNICIPALITY		STATE	COUNTY <b>Somerset</b>		TELEPHONE NO. <b>732-424-8300</b>
ZIP CODE	CO/MUN. CODE		ESTABLISHMENT STATE LICENSE NO. <i>(If Appl.)</i>		CO/MUN CODE
INSPECTION					
TYPE OF ESTABLISHMENT		ESTABLISHMENT CODE		1 <input checked="" type="checkbox"/> INITIAL INSPECTION	
1 <input checked="" type="checkbox"/> RETAIL				2 <input type="checkbox"/> REINSPECTION <i>(other than initial inspection)</i>	
2 <input type="checkbox"/> OTHER <i>(Specify):</i>		GOODS		TIME - (2400 HOURS)	
3 <input type="checkbox"/>		1 <input type="checkbox"/> DESTROYED		DATE      BEGIN      END	
4 <input type="checkbox"/>		2 <input type="checkbox"/> EMBARGOED		<b>9/7/21      10am      1pm</b>	
EVALUATION					
<input type="checkbox"/> SATISFACTORY		<input checked="" type="checkbox"/> CONDITIONALLY SATISFACTORY		<input type="checkbox"/> UNSATISFACTORY	
OFFICIAL(S)					
LOCAL BOARD OF HEALTH			INSPECTING OFFICIAL		
NAME, ADDRESS AND <i>(print)</i>			NAME OF INSPECTOR <b>Shahira Morell</b>		
			TITLE <b>REHS</b>		
TELEPHONE NUMBER <b>732-968-5151</b>			INSPECTOR'S SIGNATURE <b>Shahira Morell</b>		
NAME OF HEALTH OFFICER <b>Kevin Sumner</b>			INSPECTOR'S PERM. REG. NO. <b>B-164238</b>		DATE <b>9/7/21</b>

## RISK-BASED INSPECTION REPORT

Name of Establishment <b>Just Subs</b>	City <b>Green Brook</b>	Date of Inspection <b>9/7/21</b>	Risk Type
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### FOODBORNE ILLNESS RISK FACTORS AND INTERVENTIONS

**RISK FACTORS** are improper practices identified as the most common factors resulting in foodborne illness (FBI). **INTERVENTIONS** are control measures to prevent FBI

Mark "X" in appropriate Box: IN=In Compliance; OUT=Not in Compliance; NO=Not Observed; NA=Not Applicable; COS=Corrected On-site. R in OUT Box=Repeat Violation.

MANAGEMENT AND PERSONNEL		IN	OUT	N.O.	N/A	COS	
1	PIC demonstrates knowledge of food safety principles pertaining to this operation.		X	-----	-----	-----	
2	PIC in Risk Level 3 Retail Food Establishments is a certified food protection manager.			-----		-----	
3	Ill or injured foodworkers restricted or excluded as required.				-----		
PREVENTING CONTAMINATION FROM HANDS		IN	OUT	N.O.	N/A	COS	
4	Handwashing conducted in a timely manner; prior to work, after using restroom, etc.			X			
5	Handwashing proper; duration at least 20 seconds with at least 10 seconds of vigorous lathering.			X	-----		
6	Handwashing facilities provided in toilet rooms and prep areas; convenient, accessible, unobstructed.	X		-----	-----		
7	Handwashing facilities provided with warm water; soap and acceptable hand-drying method.	X		-----	-----		
8	Direct bare hand contact with exposed, ready-to-eat foods is avoided.	X					
FOOD SOURCE		IN	OUT	N.O.	N/A	COS	
9	All foods, including ice and water, from approved sources; with proper records			-----	-----		
10	Shellfish/Seafood record keeping procedures; storage; proper handling; parasite destruction				X		
11	PHFs received at 41°F or below. <i>Except: milk, shell eggs and shellfish (45°F)</i>			X			
FOOD PROTECTED FROM CONTAMINATION		IN	OUT	N.O.	N/A	COS	
12	Proper separation of raw meats and raw eggs from ready-to-eat foods provided			-----			
13	Food protected from contamination		X	-----	-----		
14	Food contact surfaces properly cleaned and sanitized						
PHFs TIME/TEMPERATURE CONTROLS		IN	OUT	N.O.	N/A	COS	
15	<b>SAFE COOKING TEMPERATURES</b> (Internal temperatures for raw animal foods for 15 seconds) <i>Except: Foods may be served raw or undercooked in response to a consumer order and for immediate service.</i> <b>130°F for 112 minutes:</b> Roasts or as per cooking chart found under 3.4(a)2; <b>145°F:</b> Fish, Meat, Pork; <b>155°F:</b> Ground Meat/Fish; Injected Meats; or Pooled Shell Eggs; <b>165°F:</b> Poultry; Stuffed fish/meat/or pasta; Stuffing containing fish/meat.						
16	<b>PASTEURIZED EGGS:</b> substituted for shell eggs in raw or undercooked egg-containing foods, i.e. Caesar salad dressing, hollandaise sauce, tiramisu, chocolate mousse, meringue, etc.						
17	<b>COLD HOLDING:</b> PHFs maintained at "Refrigeration Temperatures" (41°F)	X					
18	<b>COOLING:</b> PHFs rapidly cooled from 135°F to 41°F within 6 hours and from 135°F to 70°F within 2 hours.						
19	<b>COOLING:</b> PHFs prepared from ingredients at ambient temperature cooled to 41°F within 4 hours.						
20	<b>REHEATING:</b> PHFs rapidly reheated (within 2 hours) in proper facilities to at least 165°F; or commercially processed PHFs heated to at least 135°F prior to hot holding.		X				
21	<b>HOT HOLDING:</b> PHFs Hot Held at 135°F or above in appropriate equipment.		X				
22	<b>TIME as a PUBLIC HEALTH CONTROL:</b> Approval; written procedures; time marked; discarded in 4 hours.						
23	<b>SPECIALIZED PROCESSING METHODS:</b> Approval; written procedures; conducted properly.						
24	<b>HIGHLY SUSCEPTIBLE POPULATIONS:</b> Pasteurized foods used; prohibited foods not offered.			-----			
GOOD RETAIL PRACTICES							
<p><b>Good Retail Practices</b> are preventative measures to control the addition of pathogens, chemicals and physical objects into foods. <i>OUT= Not in Compliance; COS=Corrected On-site; For "Repeat" Violation: Mark "R" in OUT Box</i></p>							
SAFE FOOD AND WATER / PROTECTION FROM CONTAMINATION						OUT	COS
25	Hot and cold water available; adequate pressure.						
26	Food properly labeled, original container.						
27	Food protected from potential contamination during preparation, storage, display.					X	
28	Utensils, spatulas, tongs, forks, disposable gloves provided and used properly to restrict bare hand contact.						
29	Raw fruits and vegetables washed prior to serving.						
30	Wiping cloths properly used and stored.						
31	Toxic substances properly identified, stored and used.						
32	Presence of insects/rodents minimized: outer openings protected, animals as allowed.						
33	Personal cleanliness (fingernails, jewelry, outer clothing, hair restraint).						



**RISK-BASED INSPECTION REPORT  
(CONTINUED)**

Name of Establishment		City	Date of Inspection	Risk Type	
Just Subs		Green Brook	9/7/21		
<b>FOOD TEMPERATURE CONTROL</b>				<b>OUT</b>	<b>COS</b>
34	Food temperature measuring devices provided and calibrated.			X	
35	Thin-probed temperature measuring device provided for monitoring thin foods (i.e. meat patties and fish filets).				
36	Frozen foods maintained completely frozen.				
37	Frozen foods properly thawed.				
38	Plant food for hot holding properly cooked to at least 135°F.				
39	Methods for rapidly cooling PHFs are properly conducted and equipment is adequate.				
<b>EQUIPMENT, UTENSILS AND LINENS</b>				<b>OUT</b>	<b>COS</b>
40	Materials, construction, repair, design, capacity, location, installation, maintenance.				
41	Equipment temperature measuring devices provided (refrigeration units, etc).			X	
42	In-use utensils properly stored.				
43	Utensils, single service items, equipment, linens properly stored, dried and handled.				
44	Food and non-food contact surfaces properly constructed, cleanable, used.				
45	Proper warewashing facilities installed, maintained, cleaned, used; sanitizer test strips available, used.			X	
<b>PHYSICAL FACILITIES</b>				<b>OUT</b>	<b>COS</b>
46	Plumbing system properly installed; safe and in good repair; no potential backflow or backsiphonage conditions.				
47	Sewage and waste water properly disposed.				
48	Toilet facilities are adequate, properly constructed, properly maintained, supplied and cleaned.			X	
49	Design, construction, installation and maintenance proper-floors/walls/ceilings.				
50	Adequate ventilation; lighting; designated areas used.				
51	Premises maintained free of litter, unnecessary articles, cleaning and maintenance equipment properly stored; and garbage and refuse properly maintained.				
52	All required signs (handwashing, inspection placard, etc) provided and conspicuously posted.			X	
<b>Item #</b>	<b>NJAC 8:24</b>	<b>REMARKS</b> ("R" = Repeat violation from previous inspection)			
1	2.1b	PIC shall obtain food handler certification			
		- DID NOT observe a Serv Safe certificate on site			
13		- Observed Deli Meats stored face down / cut side down on			
27		Refrigerator racks that were not covered * placed			
		directly on racks; some were rusted out / w/o coating			
		- Observed ice machine w/ thick layer of black and white			
		mold like substance * ICE IS CONSIDERED Food			
	3.3j	Foods shall only contact surfaces of equipment that			
		are cleaned and sanitized.			
Name of Inspecting Official		Signature of Inspecting Official	Name and Title of Person Receiving Copy of Report		
Shahira Morell		<i>Shahira Morell</i>			

**CONTINUATION SHEET**  
(for Inspections, Surveys, Audits, etc.)

NAME (Individual, Facility, Establishment, etc.) <u>Just Subs</u>	DATE <u>9/7/21</u>
MUNICIPALITY <u>Green Brook</u>	TEL., CODE or ID NO.

ITEM NO.	REMARKS
8:24- 3.3(5)	an ice scoop required and stored in a clean, protected location * observed plastic cup inside ice machine
34 20,21	Observed Soups heated in hot holding unit * Soups are not cooked onsite - just reheated - Chili was not to temp but at 128-130
3.3 g	(1) Foods Reheated for Hot Holding shall be reheated to at least 165°F for 15 seconds
3.5 f	(1) Foods shall be maintained at 135°F or above when Hot Holding
4.2 c	(1) Obtain a Food thermometer to ensure proper Food temp.
	- Observed open box of bread on Floor and chips <sup>boxes of</sup> stored/stacked on Floor
3.3 g	Food Storage requirements to protect from contamination * Store at least 6" off Floor, to avoid splash, dust, etc.

SIGNATURE OF INDIVIDUAL COMPLETING FORM <u>Phyllis Morell</u>	SIGNATURE OF OWNER OF FACILITY, ESTABLISHMENT, ETC., IF REQUIRED <u>[Signature]</u>
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(for Inspections, Surveys, Audits, etc.)

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MUNICIPALITY <u>Green Brook</u>	TEL., CODE or ID NO.

ITEM NO.	REMARKS
41	Observed no Thermometers inside Refrigeration unit storing potatoe, cole slaw, and macaroni salads in "snapple" refrigerator and in Refrigerators w/deli meats and cheeses
8:24	4.2 c (7) provide thermometers to ensure ambient air / Refrigeration at $\leq 41^{\circ}F$ and place toward front of Fridge which is warmest space / area
45	There are no sanitizer strips being used on-site
8:24	4.8 K - Test strips shall be provided to ensure sanitizing sol'n concentration
48	Bathroom door needs to be self-closing
8:24	6.6 (f) obtain mechanism (spring) to ensure door closes
52	Did not see inspection placard or Food Certification posted
8:24	8.12 inspection placards shall be posted near public entrance so the public may easily view it
Note/Review	- Storage of Foods in Refrigerator place eggs on bottom shelf - use wax or parchment paper for Deli Meats on shelves

SIGNATURE OF INDIVIDUAL COMPLETING FORM <u>[Signature]</u>	SIGNATURE OF OWNER OF FACILITY, ESTABLISHMENT, ETC., IF REQUIRED <u>[Signature]</u>
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(for Inspections, Surveys, Audits, etc.)

NAME (Individual, Facility, Establishment, etc.) <b>Just Subs</b>	DATE <b>9/7/21</b>
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ITEM NO.	REMARKS
8:24 6.5(i), 6.5(f)	Map + Broom Storage : maps placed to allow to air dry Brooms, etc stored in orderly manner

Equipment / facility

8:24 6.5 ; Premises shall be free of items that are unnecessary to the operation / maintenance of establishment

- Provide trash can in area around Hand sink for disposal of paper towels

- Ensure Proper sanitizing soln is used for wiping down tables and chairs

————— ISSUED —————  
CONDITIONAL

will Be turn in 2 wks

SIGNATURE OF INDIVIDUAL COMPLETING FORM

*Shawn A. Orell*

SIGNATURE OF OWNER OF FACILITY, ESTABLISHMENT, ETC., IF REQUIRED

*[Signature]*