

**State of Ohio**  
**Standard Inspection Report**

Authority: Chapters 3717 and 3715 Ohio Revised Code

|  |   |                                |                                  |
|--|---|--------------------------------|----------------------------------|
| Name of facility<br><i>Kenyon College Philanders Pub</i>   | Check one<br><input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE | License number<br><i>153</i>   | Date<br><i>11/14/2012</i>        |
| Address<br><i>Peirce Hall, Kenyon College</i>  | Category/Descriptive<br><i>C35</i>  |                                |                                  |
| License holder<br><i>Kenyon College</i>  | Inspection time (min)<br><i>3060</i>  | Travel time (min)<br><i>15</i> | Other<br><i>260</i>              |
| Type of visit (check)<br><input checked="" type="checkbox"/> Standard <input type="checkbox"/> Follow up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 day<br><input type="checkbox"/> Complaint <input type="checkbox"/> Prelicensing <input type="checkbox"/> Consultation <input type="checkbox"/> Other specify | Follow-up date (if required)<br><i>pending</i>                                    |                                | Sample date/result (if required) |

**3717-1 OAC Violation Checked**

**Management and Personnel**

|   |
|---|
| <input type="checkbox"/> 2.1 Employee health      |
| <input type="checkbox"/> 2.2 Personal cleanliness |
| <input type="checkbox"/> 2.3 Hygienic practices   |
| <input type="checkbox"/> 2.4 Supervision          |

|  |
|--|
| <input checked="" type="checkbox"/> 4.4 Maintenance and operation          |
| <input checked="" type="checkbox"/> 4.5 Cleaning of equipment and utensils |
| <input type="checkbox"/> 4.6 Sanitizing of equipment and utensils          |
| <input type="checkbox"/> 4.7 Laundering                                    |
| <input type="checkbox"/> 4.8 Protection of clean items                     |

**Poisonous or Toxic Materials**

|  |
|--|
| <input type="checkbox"/> 7.0 Labeling and identification           |
| <input type="checkbox"/> 7.1 Operational supplies and applications |
| <input type="checkbox"/> 7.2 Storage and display separation        |

**Food**

|   |
|---|
| <input type="checkbox"/> 3.0 Safe, unadulterated and honestly presented               |
| <input type="checkbox"/> 3.1 Sources, specifications and original containers          |
| <input checked="" type="checkbox"/> 3.2 Protection from contamination after receiving |
| <input type="checkbox"/> 3.3 Destruction of organisms                                 |
| <input checked="" type="checkbox"/> 3.4 Limitation of growth of organisms             |
| <input type="checkbox"/> 3.5 Identity, presentation, on premises labeling             |
| <input type="checkbox"/> 3.6 Discarding or reconditioning unsafe, adulterated         |
| <input type="checkbox"/> 3.7 Special requirements for highly susceptible populations  |

**Water, Plumbing, and Waste**

|   |
|---|
| <input type="checkbox"/> 5.0 Water                                    |
| <input checked="" type="checkbox"/> 5.1 Plumbing system               |
| <input type="checkbox"/> 5.2 Mobile water tanks                       |
| <input type="checkbox"/> 5.3 Sewage, other liquid waste and rainwater |
| <input type="checkbox"/> 5.4 Refuse, recyclables, and returnables     |

**Special Requirements**

|   |
|---|
| <input type="checkbox"/> 8.0 Fresh juice production                       |
| <input type="checkbox"/> 8.1 Heat treatment dispensing freezers           |
| <input type="checkbox"/> 8.2 Custom processing                            |
| <input type="checkbox"/> 8.3 Bulk water machine criteria                  |
| <input type="checkbox"/> 8.4 Acidified white rice preparation criteria    |
| <input type="checkbox"/> 9.0 Facility layout and equipment specifications |
| <input type="checkbox"/> 20 Existing facilities and equipment             |

**Equipment, Utensils, and Linens**

|  |
|--|
| <input type="checkbox"/> 4.0 Materials for construction and repair |
| <input type="checkbox"/> 4.1 Design and construction               |
| <input type="checkbox"/> 4.2 Numbers and capacities                |
| <input type="checkbox"/> 4.3 Location and installation             |

**Physical Facilities**

|   |
|---|
| <input type="checkbox"/> 6.0 Materials for construction and repair  |
| <input type="checkbox"/> 6.1 Design, construction, and installation |
| <input type="checkbox"/> 6.2 Numbers and capacities                 |
| <input type="checkbox"/> 6.3 Location and placement                 |
| <input checked="" type="checkbox"/> 6.4 Maintenance and operation   |

**Administrative**

|                                      |
|--------------------------------------|
| <input type="checkbox"/> 901:3-4 OAC |
| <input type="checkbox"/> 3701-21 OAC |

**Violation(s)/Comment(s)**

5.1 - At time of inspection, no water was present at hand wash sink located in back kitchen area. Provide hot/cold water for proper handwashing.

3.4 - Time/temperature controlled for safety foods (TCS) not being kept at 41°F or below in Transcon refrigeration unit. At time of inspection sliced Turkey breast was 55°F and cream cheese 56°F. Cease use of product and discard immediately.

|  |                           |                                   |
|--|---------------------------|-----------------------------------|
| Inspected by<br><i>Lynn L. Heller, R</i> | R.S./SIT #<br><i>2084</i> | Licenser<br><i>Knox County HD</i> |
| Received by<br><i>Frank Linn</i>         | Title                     | Phone                             |

11/14/2012



# State of Ohio Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

|   |                                       |
|---|---------------------------------------|
| Facility name<br><i>Keyon College Philander's Pub</i> | Type of inspection<br><i>Standard</i> |
|---|---------------------------------------|

Violation(s)/Comment(s)

4.4 - Provide proper maintenance for Traulsen unit to maintain TCS food product at 41°F or below. Outside temperature draft on unit is reading high temperature concern.

4.5 - Equipment located in bar area not clear and sanitary. Pop/debris build-up located inside hand sink and beverage storage areas. Properly clean.

6.4 - Insects (fruit flies) located around beverage equipment and hand sink in bar area. Properly clean spilled pop/beer spills to eliminate insect problem.

6.4 - Items not 6" off the floor in back kitchen area - All food items - supplies - equipment must be 6" off floor to allow proper cleaning.

3.2 - Chemical stored on drain board of three-compartment. Only soap/approved sanitizer may be stored on drainboard and above three compartment sink. Remove to prevent contamination

|  |                           |                                |
|--|---------------------------|--------------------------------|
| Inspected by<br><i>Jerry J. Walker (R)</i> | R.S./SIT #<br><i>2084</i> | Licenser<br><i>Knox County</i> |
| Received by<br><i>Fred Linn</i>            | Title                     | Phone                          |

11/14/2012



# State of Ohio Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

|  |                                       |
|--|---------------------------------------|
| Facility name<br><i>Rayon College Philanders Pub</i> | Type of inspection<br><i>Standard</i> |
|--|---------------------------------------|

Violation(s)/Comment(s)

*Ensure all food equipment and surfaces are properly wash - rinsed - sanitize.*

- metal stem probe thermometer present*
- Approved sanitizer (Chlorine) present.*
- Panini sandwich makers located under Exhaust hood.*

*Correct critical violations immediately.*

*A re-inspection shall be required before kitchen may open to the public. A person-in-charge (PIC) must be present for re-inspection.*

*Contact Health Dept for re-inspection.*

|  |                           |                                   |
|--|---------------------------|-----------------------------------|
| Inspected by<br><i>Jenni L. Helker, DS</i> | R.S./SIT #<br><i>2084</i> | Licenser<br><i>Lnox County HD</i> |
| Received by<br><i>Fred Linder</i>          | Title                     | Phone                             |