



SANITARY INSPECTION REPORT

IDENTIFICATION

OWNER INFORMATION

(Complete this section only if different from establishment information)

NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT

Manager On duty - Michael Werkheiser

NUMBER AND STREET

COUNTY

Store Manager - Violet Ireland

MUNICIPALITY

STATE

ZIP CODE

COMUN. CODE

ESTABLISHMENT INFORMATION

ESTABLISHMENT TRADING NAME

Wawa #8331

NUMBER AND STREET

COUNTY

152 Alexander Ave Mer

MUNICIPALITY

ZIP CODE

TELEPHONE NO.

Princeton

08540

ESTABLISHMENT STATE LICENSE NO. (if appl.)

COMUN. CODE

INSPECTION

TYPE OF ESTABLISHMENT

ESTABLISHMENT CODE

☒ RETAIL

☐ OTHER (Specify)

☐

☐

GOODS

☐ DESTROYED

☐ EMBARGOED

☒ INITIAL INSPECTION

☐ REINSPECTION (other than initial inspection)

TIME - (2400 HOURS)

DATE

BEGIN

END

12/30/14

EVALUATION

☒ SATISFACTORY

☐ CONDITIONALLY SATISFACTORY

☐ UNSATISFACTORY

OFFICIAL(S)

LOCAL BOARD OF HEALTH

NAME, ADDRESS AND TELEPHONE NUMBER (print)

PRINCETON HEALTH DEPARTMENT
ONE MONUMENT DRIVE
P.O. BOX 390
PRINCETON, NEW JERSEY 08542
609-497-7608

HEALTH OFFICER

David A. Henry

INSPECTING OFFICIAL

INSPECTOR'S NAME AND TITLE

Keith Levine REHS

INSPECTOR'S SIGNATURE

Keith Levine

INSPECTOR'S PERM. REG. NO.

B2257

CONTINUATION SHEET

(for Inspections, Surveys, Audits, etc.)

Name (Individual, Facility, Establishment, etc.)	Walwa	Date	12/30/14
Municipality	Princeton	Tel., Code or ID No.	

Item No.	General Condition: Excellent	Remarks
		- Notes - All refrigeration temperatures at 41° or below Bain Marie temps. at 41° or below; meats, cheeses & cut veggies checked Open showcases all at proper temps - 41° or below All dates of milk, eggs etc are current. Hot holding temperatures at 135° or higher Food storage proper in walk-in box and open units Dry food storage areas well maintained No signs of pest activity Employees use gloves and utensils when handling ready-to-eat foods All hand wash sinks properly set up with hot water soap and disposable towels Patron areas well maintained Self-serv areas provide utensils and deli tissue for patrons Sanitize bucket in use for storing cloth wiping rags & for sanitizing surfaces Restrooms & garbage area properly maintained Recycling policy in place * Remember to check identification for tobacco sales
Signature of Individual Completing Form		Signature of Owner of Facility, Establishment, etc., if required
Keith Levine		