

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 SPEEDY MART		
NUMBER AND STREET		COUNTY		NUMBER AND STREET		COUNTY
				17 OLD YORK ROAD		Somerset
MUNICIPALITY		STATE		MUNICIPALITY	ZIP CODE	TELEPHONE NO.
				Bridgewater	08807	
ZIP CODE	COMUN. CODE			ESTABLISHMENT STATE LICENSE NO. (if appl.)	COMUN. CODE	

INSPECTION

TYPE OF ESTABLISHMENT	ESTABLISHMENT CODE	<input checked="" type="checkbox"/> INITIAL INSPECTION <input type="checkbox"/> REINSPECTION <i>(other than initial inspection)</i>		
<input checked="" type="checkbox"/> RETAIL <input type="checkbox"/> POOL <input type="checkbox"/> CAMP <input type="checkbox"/> OTHER	GOODS <input type="checkbox"/> DESTROYED <input type="checkbox"/> EMBARGOED	TIME - (2400 HOURS)		
		DATE	BEGIN	END
		1/8/2021		

EVALUATION

SATISFACTORY
 CONDITIONALLY SATISFACTORY
 UNSATISFACTORY

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 Patricia Timko-Parker R.E.H.S.
HEALTH OFFICER Kevin Sumner	INSPECTOR'S PERM. REG. NO. 31934

CONTINUATION SHEET

(for Inspections, Surveys, Audits, etc.)

Name (Individual, Facility, Establishment, etc.)

Speedy Mart

Date

1/8/2021

BRIDGEWATER TOWNSHIP

Item No.	Remarks
	NO violations at the time of inspection cool holding dairy @ 41°F
	NOTE: NO FOOD/DISH OPERATING AT THIS TIME. only coffee for self-service and pre-packaged food.
	POSTED Satisfactory

Signature of Individual Completing Form

Anna Fanto Parker

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

[Signature]