



MULTNOMAH COUNTY OREGON
ENVIRONMENTAL HEALTH
 3653 SE 34th Avenue
 PORTLAND, OR 97202
 (503) 988-3400; FAX (503) 988-5844

3-501.19 Time as a Public Health Control (Violation 03J)

If time only, rather than time in conjunction with temperature, is used as the public health control for a working supply of potentially hazardous food before cooking, or for ready-to-eat potentially hazardous food that is displayed or held for service for immediate consumption:

1. The food shall be marked or otherwise identified to indicate the time that is 4 hours past the point in time when the food is removed from temperature control,
2. The food shall be cooked and served, served if ready-to-eat, or discarded, within 4 hours from the point in time when the food is removed from temperature control,
3. The food in unmarked containers or packages or marked to exceed a 4 hour limit shall be discarded, and
4. Written procedures shall be maintained in the food establishment and made available to the regulatory authority upon request.

Facility Name: _____ Facility Number: _____

Address (number, street, city, zip code): _____ Ph#: () _____

Food Item(s): Pizza Salad Bar Sushi Buffet Other: _____

- Time monitored by the use of timers, notepad, dry erase board, log sheet, tags, etc.
- a) Set timer for 4 hours and start or ID food item and document time that is 4 hours past the time when it was removed from temperature control (removed from oven, removed from refrigerator, removed from heating equipment, etc.).
 - b) Discard food item(s) after the 4 hours have elapsed.

OR

- Duration of service is less than 4 hours (example: Lunch service 11:00am – 1:00pm)
- a) Food service and length of time that food was removed from temperature control is less than 4 hours.
 - b) Discard food item(s) after the 4 hours have elapsed or after food service is completed.

Describe procedure: _____

Does this plan apply to any other facility in Multnomah County? If yes, please list: _____

Food Establishment Representative: _____
 Print Name

 Signature

Date: _____

This written procedure to be used at the named Food Establishment above has been:

Approved By: _____
 Health Department Designee

Date: _____