Bekeley COUNTY HEALTH DEPARTMENT Smoke Free Workplaces and Public Places Inspection form

FACILITY NAME	ubway Kenneysis	lle DAT	
Address _30	58A. Charlestown R	Pd. TIM	1E 10:30 am.
_ Kec,	neysulle, we 25430		
FACILITY TYPE: RESTAURANT OFFICE/MEDICAL HOTEL/MOTEL OTHER: BAR/ENTERTAINMENT RETAIL STORE DUBLIC TRANSIT			
INSPECTION TYPE:	ROUTINE D FOLLOW-UP	□ COMPLAINT	
PERSON-IN-CHARGE	Jeannine Wilner.		
BASED ON AN INSPEC COUNTY'S SMOKE FRI	TION THIS DAY, THE ITEMS M. EE REGULATION:	ARKED BELOW ARE V	IOLATIONS OF THIS
SMOKING IN PUBLIC	PLACES		
☐ Smoking observed i ☐ Person-in-charge fa	n non-smoking areas iled to inform violators of the a	appropriate provisions	s of the regulation
SMOKING IN PLACES	OF EMPLOYMENT		
	n non-smoking areas oking policy not in compliance communicated and/or supplied		ees
SMOKING IN OUTDOO	R AREAS		
4.75 m	n outdoor non-smoking areas blished closer than allowed to	entrances, exits, or fr	esh air intakes
SIGNAGE AND PARAPH	HERNALIA		
☐ "No smoking" signs ☐ Ashtrays or other s	not posted at entrances to pus not clearly and conspicuously moking paraphernalia not rem	posted in non-smoki oved from non-smoki	ng areas ng areas
COMMENTS/FINDING Air Regulation	s: Fotablishment is in	compliance.	vill Clean Fredoo
ALL VIOLATIONS M	UST BE CORRECTED WITHIN 1	O DAYS UNLESS OTH	ERWISE NOTED.