

Texas Department of State Health Services

Retail Food Establishment Inspection Report

Date:		Time IN:		Time OU	T: Permit	#		Est. Type				Risk Categ	isk Category		of _	_	
Purpose of Insp		pection: 1 - Complia		nce 2	2 - Routine 3	3 - Field Inves		estig	gation 4 - Visit		sit	5 - Other					
Establishment Name Contact/ Owner Name:									•	Numbe	er of Repea	t Violation	s:				
											1	nber of Viol		<u>}: </u>			
Physical Address City/ County:											Zip Code:		Phone:				
		FO	ODBORN	E ILLN	ESS RISK FACT	rors /	ANI	D PI	JBLIC	HEAL	TH INTE	RVENTI	ONS				
		-	•		N/O, N/A) for each nu							box for COS					
	IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable Compliance Status cos R																
Supervision Cos k								Time/ Temperature Control for Safety									
1		Person in charge present, demonstrates knowledge, and performs duties						18 IN OUT N/A N/O Proper cooking time & temperatures									
1a	IN OUT N/A	Permit to Operate								•	ating proced				-		
2	IN OUT N/A	Certified Food Protection Manager / Food Handler Certification										nolding temp					
	1		Employe									holding tem					
3	IN OUT	Management, food employee and conditional employee; knowledge, responsibilities and reporting				e;				Ť		marking an					
	IN OUT	Proper use of restriction and exclusion						24	IN OUT N/	/A N/O	Time as a purecords	ublic health c	control: proc	edures &			
5 IN OUT Procedures for responding to vomiting & diarrheal events																	
6	Good Hygienic Practices 6 IN OUT N/O Proper eating, tasting, drinking, or tobacco use																
7	-	•	rge from eyes,								Const	umer Advis	ory				
		Prev	enting Conta	mination	by Hands			25	IN OUT N	/Λ	Consumer a	dvisory pro	vided for ra	iw /			
8	IN OUT N/O		an and proper	<u> </u>					111 001 117		undercooke						
9	IN OUT N/A N/O		and contact wi procedure prop		ood or apre-approved wed			26	IN OUT N/			ceptible Pop foods used;		foods not	:		
10	IN OUT	Adequate			supplied & accessible	٤					offered				\perp	Щ	
11	IN OUT	Food obtoi		d Source				27	IN OUT N/			ives and To					
			ined from app ived at proper			-		_	IN OUT N			ves: approve nces properl		•		-	
	N/O										used				\perp	丄	
	IN OUT N/A		ood condition,		nadulterated tock tags, parasite			29		Conf		ith Approve			-	_	
1		destruction		ne. silelis	tock tags, parasite			23	IN OUT N	/A	/ HACCP	with varian	ce/specializ	ed proces	S		
	TIN OUT NA NAO		tection from (nation			R	isk factors	are imr	ortant practic	es or procedu	res identified	as the mos	t		
		Food separated and protected Food-contact surfaces: cleaned & sanitized						Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury.									
	IN OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food							Public health interventions are control measures to prevent foodborne illness or injury.								
		recondition	ieu, & unsaie	1000	GOOD F	RETAIL	_ PI	RAC	TICES								
	Good	d Retail Pra	actices are pre	ventative	measures to contro					jens, ch	emicals, and	d physical ol	bjects into	foods.			
Compliance Status cos R							R		Complia	nce St	atus				cos	R	
			Safe Food								Proper	Use of Ute	nsils				
			ed eggs used v						IN OUT			properly sto					
	IN OUT N/A		l ice from appr						IN OUT	handle	ed	nt & linens; service articl			'		
32	IN OUT N/A				cessing methods				IN OUT	used	s used prope		es; property	storea,			
33	IN OUT		Food Temper		equate equipment fo)r		40	IN OUT			ipment and	l Vendina		+	┢	
		temperatu	-	useu, au	equate equipment it	"		47	IN OUT			l-contact su		nable,	Т		
			properly cook	ed for ho	t holding						, ,	l, constructe	•				
35	IN OUT N/A N/O	Approved	thawing meth	ods used				48	IN OUT	Warev test st	-	ities, installe	d, maintaine	ed, used,			
36	IN OUT	Thermome	eters provided			\perp		49	IN OUT	Non-f		surfaces cle					
Food Identification 37 IN OUT Food properly labeled; original container								E0 -	IN OUT	Hot o		ical Facilitie		proceura			
3/	TIN OOT		erly labeled; ovention of Foo						IN OUT			er available; d; proper ba				\vdash	
38	IN OUT		dents, and ani						IN OUT			e water proj				\vdash	
	IN OUT				od preparation, stora	ge &			IN OUT		facilities: pr	roperly cons					
40	IN OUT	Personal c	leanliness					54	IN OUT	Garba	ige/refuse p	roperly disp	osed; facilit	ties			
41	IN OUT	Wipina clo	ths; properly	used and	stored	-		55	IN OUT	maint Physi		installed, m	aintained.	and clean		+	
	IN OUT		ruits and vege						IN OUT		uate ventilat	tion and ligh					

Establishment Name:		Permit	: #:	Date:	Page of					
			TEMPERATURE OBSERVA	ATIONS						
Item/Lo	cation	Temp	Item/Location	Temp	Item/Location	Т				
Item	AN INSPECTION OF VOLD		SERVATIONS AND CORRECT			TIONS OR	SEDVED.			
Number	M AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSER mber AND NOTED BELOW:									
Received (signature	by:		Print:		Title: Person In Charge/ Ov	vner				
	spected by:		Print:	Business Email:						