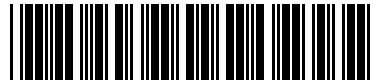




FI-4028

Date: 03/09/2024	Time in: 14:29	License/Permit # 0	Est. Type SD	Risk Category SD	Page <u>1</u> of <u>2</u>																																																																																																																																																																																																																		
Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine <input type="checkbox"/> 2-Follow Up <input type="checkbox"/> 3-Complaint <input type="checkbox"/> 4-Investigation <input type="checkbox"/> 5-CO/Construction <input type="checkbox"/> 6-Other		TOTAL/SCORE		94																																																																																																																																																																																																																			
Establishment Name: 7-Eleven		Contact/Owner Name: Tyler				Number of Repeat Violations: <u>0</u> Number of Violations COS: <u>0</u>																																																																																																																																																																																																																	
Physical Address: 2401 US-380		Pest control : Rentokil 2-21-24				Grease trap : N/A																																																																																																																																																																																																																	
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<p>Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W = Watch Mark the appropriate points in the OUT box for each numbered item Mark '✓' a checkmark in appropriate box for IN, NO, NA, COS Mark an <input checked="" type="checkbox"/> in appropriate box for R</p>																																																																																																																																																																																																																							
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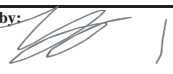

FI-4028



Establishment Name: 7-Eleven	Physical Address: 2401 US-380	City/State: Cross Roads, TX	License/Permit # 0	Page ___ of ___ 2 of 2
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TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Pico	45°F				
Onions	41°F				
Beef	142°F				
Cream cheese taquitos	152°F				
Pizza	136°F				
Front cooler	32°F				
Sandwich cooler	38.4°F				
Milk cooler	38°F				

OBSERVATIONS AND CORRECTIVE ACTIONS	
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
10	200 ppm QAC
21	Certified food manager not on site
22	Food handler cards not observed
23	No hot water at hand sink behind counter or in either restroom. 7 days to get corrected. Call a plumber.
29	Metal stem and surface

Received by: (signature) 	Print: Tyler	Title: Person In Charge/ Owner Assistant Manager
Inspected by: (signature) 	Print: Tammy McMahan, RS, CPO	Samples: Y <input checked="" type="radio"/> N # collected N/A