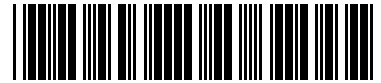




FI-3372

Date: 10/09/2023	Time in: 12:01	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		90																																																																																																																																																																																																																			
Establishment Name: Circle K (HWY 377)		Contact/Owner Name: Jason Claiborne				Number of Repeat Violations: <u>0</u> Number of Violations COS: <u>0</u>																																																																																																																																																																																																																	
Physical Address: 7500 US-377		Pest control : 8/3/23				Grease trap : NA																																																																																																																																																																																																																	
Follow-up: No																																																																																																																																																																																																																							
<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-3372



Establishment Name: Circle K (HWY 377)	Physical Address: 7500 US-377	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
Pizza	136°F				
Sausage roller	142°F				
Storage cooler	35°F				
Walk in freezer	17°F				
Walk in cooler	36°F				
Bacon croissant	38°F				
Pizza freezer	-11°F				
Ice cream storage	-14°F				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Observations
	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
7	Observed cut fruit container on display for sale with compromised packaged, observed frozen foods stored in cooler with product containers open leaving the product open for potential contamination. Store all product in containers with lids.
21	CFM required on site during operational hours. Certify additional staff to ensure coverage of all shifts. Manager on duty state he has license but cannot present the license. Email proof of license to bradley@instantinspector.com within 15 days.
22	All food handling employees shall complete a Texas accredited food handler certification within first 30 days of employment.
25	State manufacturing license posted by rest rooms valid until June 5 2023.
37	All food and containers shall be stored a minimum of 6 inches off the ground. Observed back stock stored on the floor in the preparation area.
42	Detail kitchen storage racks/containers of food debris build up. Clean storage bins/handles of food residue where utensils are stored in kitchen.
45	Repair damaged cove base seal under hand washing sink. Maintain floors around soda syrup station and 3 compartment sink clean of debris build up and spilled food.

Received by: (signature)	Print: Jason Claiborne	Title: Person In Charge/ Owner Manager
Inspected by: (signature)	Print: Bradley Strange, REHS/RS/C...	Samples: Y <input checked="" type="radio"/> N <input type="radio"/> # collected N/A