



FI-3479

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|---|-------------------|--|---|---------------------|---------------------------|
| Date: 10/30/2023 | Time in: 11:40 | 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 | | 87 | |
| Establishment Name: MOD Pizza | | Contact/Owner Name: Nicholas Ritter | | | |
| Physical Address: 11650 US-380 Suite 400 | | Pest control : 10/24/23 | | | |
| | | Grease trap : 7/3/23 | | Follow-up: No | |
| 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 | | | | | |
| Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days | | | | | |
| Compliance Status O U T I N N O N A C O S Time and Temperature for Food Safety (F = degrees Fahrenheit) | | | Compliance Status O U T I N N O N A C O S Employee Health | | |
| 1. Proper cooling time and temperature <input checked="" type="checkbox"/> | | | 12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting <input checked="" type="checkbox"/> | | |
| 2. Proper Cold Holding temperature(41°F/ 45°F) <input checked="" type="checkbox"/> | | | 13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth <input checked="" type="checkbox"/> | | |
| 3. Proper Hot Holding temperature(135°F) <input checked="" type="checkbox"/> | | | Preventing Contamination by Hands | | |
| 4. Proper cooking time and temperature <input checked="" type="checkbox"/> | | | 14. Hands cleaned and properly washed/ Gloves used properly <input checked="" type="checkbox"/> | | |
| 5. Proper reheating procedure for hot holding (165°F in 2 Hours) <input checked="" type="checkbox"/> | | | 15. No bare hand contact with ready to eat foods or approved alternate method properly followed <input checked="" type="checkbox"/> | | |
| 6. Time as a Public Health Control; procedures & records <input checked="" type="checkbox"/> | | | Highly Susceptible Populations | | |
| Approved Source | | | 16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required <input checked="" type="checkbox"/> | | |
| 7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction <input checked="" type="checkbox"/> | | | Chemicals | | |
| 8. Food Received at proper temperature <input checked="" type="checkbox"/> | | | 17. Food additives; approved and properly stored; Washing Fruits & Vegetables <input checked="" type="checkbox"/> | | |
| Protection from Contamination | | | 18. Toxic substances properly identified, stored and used <input checked="" type="checkbox"/> | | |
| 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting <input checked="" type="checkbox"/> | | | Water/ Plumbing | | |
| 10. Food contact surfaces and Returnables : Cleaned and Sanitized at (see below) ppm/temperature <input checked="" type="checkbox"/> | | | 19. Water from approved source; Plumbing installed; proper backflow device <input checked="" type="checkbox"/> | | |
| 11. Proper disposition of returned, previously served or reconditioned <input checked="" type="checkbox"/> | | | 20. Approved Sewage/Wastewater Disposal System, proper disposal <input checked="" type="checkbox"/> | | |
| Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days | | | | | |
| Compliance Status O U T I N N O N A C O S Demonstration of Knowledge/ Personnel | | | Compliance Status O U T I N N O N A C O S Food Temperature Control/ Identification | | |
| 21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) <input checked="" type="checkbox"/> | | | 27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature <input checked="" type="checkbox"/> | | |
| 22. Food Handler/ no unauthorized persons/ personnel <input checked="" type="checkbox"/> | | | 28. Proper Date Marking and disposition <input checked="" type="checkbox"/> | | |
| Safe Water, Recordkeeping and Food Package Labeling | | | 29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips <input checked="" type="checkbox"/> | | |
| 23. Hot and Cold Water available; adequate pressure, safe <input checked="" type="checkbox"/> | | | Permit Requirement, Prerequisite for Operation | | |
| 24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled <input checked="" type="checkbox"/> | | | 30. Food Establishment Permit (Current and Valid) <input checked="" type="checkbox"/> | | |
| Conformance with Approved Procedures | | | Utensils, Equipment, and Vending | | |
| 25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions <input checked="" type="checkbox"/> | | | 31. Adequate handwashing facilities: Accessible and properly supplied, used <input checked="" type="checkbox"/> | | |
| Consumer Advisory | | | 32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used <input checked="" type="checkbox"/> | | |
| 26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label <input checked="" type="checkbox"/> | | | 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided <input checked="" type="checkbox"/> | | |
| Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First | | | | | |
| Compliance Status O U T I N N O N A C O S Prevention of Food Contamination | | | Compliance Status O U T I N N O N A C O S Food Identification | | |
| 34. No Evidence of Insect contamination, rodent/other animals <input checked="" type="checkbox"/> | | | 41. Original container labeling (Bulk Food) <input checked="" type="checkbox"/> | | |
| 35. Personal Cleanliness/eating, drinking or tobacco use <input checked="" type="checkbox"/> | | | Physical Facilities | | |
| 36. Wiping Cloths; properly used and stored <input checked="" type="checkbox"/> | | | 42. Non-Food Contact surfaces clean <input checked="" type="checkbox"/> | | |
| 37. Environmental contamination <input checked="" type="checkbox"/> | | | 43. Adequate ventilation and lighting; designated areas used <input checked="" type="checkbox"/> | | |
| 38. Approved thawing method <input checked="" type="checkbox"/> | | | 44. Garbage and Refuse properly disposed; facilities maintained <input checked="" type="checkbox"/> | | |
| Proper Use of Utensils | | | 45. Physical facilities installed, maintained, and clean <input checked="" type="checkbox"/> | | |
| 39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used <input checked="" type="checkbox"/> | | | 46. Toilet Facilities; properly constructed, supplied, and clean <input checked="" type="checkbox"/> | | |
| 40. Single-service & single-use articles; properly stored and used <input checked="" type="checkbox"/> | | | 47. Other Violations <input checked="" type="checkbox"/> | | |

