Inspection performed on behalf of:

Town of Cross Roads



s://www.cros	ossroadstx.gov/per			<u>//pe</u>	mits-development/pages/health-inspections					INSPECTOR					FI-3449				
		ite:	/				ime in:	License	Permi	t #						Est. Type	Risk Category	Page 1 of	2
			25/2			-	8:17	0			Ŧ			_	- co/c	SD	SD		
	Es	tabl	ishn	nent	Nam		tine 2-Follow U	Contact/Owne			-Inv	/estig	gatio	n	5-CO/Cons	struction of Repeat Viol of Violations (6-Other	TOTAL/SCO	KE
	_			<u> </u>	ess		D	June Sison								of Violations (- Q7)
			al A 1 U					IA						IA	e trap :		Follow-up: NO		•
	Ма						tot in compliance IN box for each numbered	= in compliance item Mar					$\mathbf{A} = \mathbf{n}$	ot app ate bo	plicable COS	= corrected on COS Ma	site $\mathbf{R} = \text{repeat}$ urk an \mathbf{X} in appropri	violation $W = Wat$ tiate box for R	ch
							Priority Items (3			quire 1	mm	ediate	e Cor	rrect					_
	0 U	I	iance N O	N	tus C O	Time a	nd Temperature for F	ood Safety	R		Com D I J N	pliano N I O		C O		F	1		R
	T	N	0	A	s		(F = degrees Fahrenhe g time and temperature	eit)		-		0	A	s	12 Managamar		loyee Health	al amployaes	
		Х				1. I toper coom	g time and temperature				X	(knowledge, resp			iai employees,	
		v				2. Proper Cold H	Holding temperature(41	°F/ 45°F)			X	,					nd exclusion; No	discharge from	
		X										<u> </u>			eyes, nose, and	mouth			
		Х				*	olding temperature(135									-	ntamination by H		
		Х				 Proper cookir 	ng time and temperature	e			X	(Hands clea 	ned and prope	erly washed/ Glove	s used properly	
		х				5. Proper reheat Hours)	ing procedure for hot h	olding (165°F in 2			X	(15. No bare han alternate metho		n ready to eat food: llowed	s or approved	
		х				6. Time as a Put	blic Health Control; pro	cedures & records											
		^													16. Pasteurized		rohibited food not		
							Approved Source				X	(Pasteurized egg				
							obtained from approve safe, and unadulterated					-							
		Х				destruction	sare, and unadulterated	i, parasite								C	hemicals		
		~				8. Food Receive	ed at proper temperature	e			X	,			17. Food additi & Vegetables	ves; approved	and properly store	d; Washing Fruits	
		X													e		· : 1	d d	
							otection from Contam				X	X			18. Toxic subst	ances property	y identified, stored	and used	
		х				 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting 10. Food contact surfaces and Returnables ; Cleaned and Sanitized at (see below) ppm/temperature 									Water/ Plumbing 19. Water from approved source; Plumbing installed; proper				
									_		v								
		X									X	4			backflow devic				
		х				 Proper disported reconditioned 	osition of returned, prev	viously served or		3					 Approved S disposal 	Sewage/Waste	water Disposal Sys	stem, proper	
		Priority Foundation Items (2 P						oints) viol	tion	is Rei	auire	e Cor	rective Action w	vithin 10 day	\$		-	
	0 U	I N	I N N C N O A O Demonstration of Knowledge/Personnel					R		D I J N	N	N	C O S			re Control/ Identi	fication	R	
	Т				s		arge present, demonstr		,		r			S			ed; Equipment A		
	2					and perform dut	ties/ Certified Food Ma	nager (CFM)			X	(Maintain Produ			dequate to	
	2					22. Food Handle	er/ no unauthorized per	sons/ personnel			X	K			28. Proper Date	e Marking and	disposition		
			1				r, Recordkeeping and Labeling	0			X	K			29. Thermomet Thermal test st		accurate, and calib	rated; Chemical/	
	X					23. Hot and Cold Water available; adequate pressure, safe									Permit Requirement, Prerequisite for Operation				
					[24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled					X				30. Food Establishment Permit (Current and Valid)				
		-				Conform	nance with Approved	Procedures					1		1	Utensils, Eou	ipment, and Vend	ling	
						25. Compliance	with Variance, Special ariance obtained for sp	ized Process, and		1	Τ						cilities: Accessible		
		Х					nods; manufacturer inst				X				supplied, used				
							Consumer Advisor	у			×	ζ			32. Food and N designed, const		act surfaces cleana ed	ble, properly	
		Х					Consumer Advisories; ra re/Reminder/Buffet Pla				X	K					nstalled, maintaine facility provided	ed, used/	
			Core Items (Core Items (1 Point) Violations Require Corrective				t to			_	ys or Next Insp	ection , Whic	hever Comes Fir	rst	R			
	Ŭ T	N	N O	A	o s		ention of Food Contar			1	J N F	i Ö	A	C O S			Identification		
		Х				 No Evidence animals 	e of Insect contaminatio	on, rodent/other			Х	(41.Original con	tainer labeling	g (Bulk Food)		
	X 35. Person				35. Personal Cle	ersonal Cleanliness/eating, drinking or tobacco use									Phys	ical Facilities			
		Х				36. Wiping Cloths; properly used and stored] [X	(42. Non-Food C	Contact surfac	es clean		
		Х				37. Environmen	tal contamination			1	Х	(43. Adequate v	entilation and	lighting; designate	d areas used	
		X				38. Approved th	nawing method			1	X	(44. Garbage and	d Refuse prop	erly disposed; faci	lities maintained	
			1				Proper Use of Utens	ils		1	1	+			45. Physical fac	cilities installe	d, maintained, and	clean	
		v					uipment, & linens; prop	erly used, stored,		1 -		,			46. Toilet Facil	ities; properly	constructed, supp	lied, and clean	
		Х					d/ In use utensils; prop	-			X								
		х				40. Single-servi and used	ce & single-use articles	; properly stored			X	(47. Other Viola	ations			





	ment Name:	Physical A		City/State:	TV	License/Permit #	Page of				
Panda	Express	11401 US	5-380 TEMPERATURE OBSERV	Cross Roads	s, IX	0	2 of 2				
Item/Loc	ation	Temp	Item/Location	Temp	Item/Loca	tion	Temp				
WIC		40°F									
WIF		0°F									
RIR		39°F									
Fried R	ice	155°F									
Lo Meir	Noodles	155°F									
Chicker	1	165°F									
Beef		165°F									
Vegeta	bles	39°F									
Item Number 20	NOTED BELOW:	TABLISHME	SERVATIONS AND CORRECT NT HAS BEEN MADE. YOUR ATT			HE CONDITIONS OBSI	ERVED AND				
20	Provide the grease trap ticket upon request. Provide a valid Certified Food Manager on-site during all hours of operation. Display in public view the valid CFM certificate.										
22		Provide a valid Certified Food Manager on-site during all hours of operation. Display in public view the valid CFW certificate.									
45	Remove the standing water off the floor across from the mop sink in the back area of the facility.										
<u> </u>											
Received (signature)			Print: June Sison			Title: Person In Char Chef	ge/ Owner				
Inspected (signature)		ab	Print:								
			Jeff Babina RS/	070		Samples: Y N	# collected N/A				

Form EH-06 (Revised 09-2015)

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