https://www.crossroadstx.gov/permits-development/pages/health-





FI-4030

				Time in:	License/Pe	ermit #						Est. Type Risk Category Page 1 of	، 2			
03/09/2024 15:36 0											_	20 20				
Purpose of Inspection: X 1-Routine 2-Follow Up 3-Complain Establishment Name: Contact/Owner N												5-CO/Construction 6-Other TOTAL/SC Number of Repeat Violations: 0 Number of Violations COS: 0	ORI			
Pizza Hut Physical Address: Pest control:												u>	?			
Physi 1197	cal /	Addre JS-3	880 880		control: lab 2-14-24							trap: No Follow-up: No	_			
Mark				tatus: Out = not in compliance IN = in points in the OUT box for each numbered item	n compliance NO							dicable $COS = corrected on site R = repeat violation W = W$ x for IN, NO, NA, COS Mark an in appropriate box for R	atc			
							re In	nmea	liate	Corr	ectiv	ve Action not to exceed 3 days				
Comp O I U N	N	ce Sta	C O	Time and Temperature for Food	d Safety	R	0	O I N N C U N O A O		C O						
T			s	(F = degrees Fahrenheit) 1. Proper cooling time and temperature			T		_		S	12. Management, food employees and conditional employees;				
X	K							X				knowledge, responsibilities, and reporting				
Х				2. Proper Cold Holding temperature(41°F/	45°F)			х				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth				
				3. Proper Hot Holding temperature(135°F)												
X	^							Х				Preventing Contamination by Hands 14. Hands cleaned and properly washed/ Gloves used properly				
_^				Proper reheating procedure for hot holdi	ing (165°F in 2							15. No bare hand contact with ready to eat foods or approved				
	X			Hours)				X				alternate method properly followed				
Х				6. Time as a Public Health Control; proced	lures & records							Highly Susceptible Populations				
				Approved Source				х				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required				
1				7. Food and ice obtained from approved so	ource; Food in											
X				good condition, safe, and unadulterated; pa destruction								Chemicals				
				8. Food Received at proper temperature				Ι		T		17. Food additives; approved and properly stored; Washing Fruits				
Х										X		& Vegetables				
				Protection from Contaminat				X				18. Toxic substances properly identified, stored and used				
х				Food Separated & protected, prevented of preparation, storage, display, and tasting	during food							Water/ Plumbing				
				10. Food contact surfaces and Returnables				T.,				19. Water from approved source; Plumbing installed; proper				
Х				Sanitized at (see below) ppm/temperature				X				backflow device				
	х			 Proper disposition of returned, previous reconditioned 	sly served or			Х				20. Approved Sewage/Wastewater Disposal System, proper disposal				
+				Priority Foundation	on Items (2 Poi	ints) v	iolat	tions	Req	uire	Corr	rective Action within 10 days				
O I N U N O			C	Demonstration of Knowledge/ Pe	ersonnel	R	U	I N	N O	N A	C O	Food Temperature Control/ Identification				
T			S	21. Person in charge present, demonstration			Т				S	27. Proper cooling method used; Equipment Adequate to				
				and perform duties/ Certified Food Manage	er (Crivi)			X				Maintain Product Temperature				
Х				22 F 1 W 1 /	./1		-	-		-	-	28. Proper Date Marking and disposition				
X				22. Food Handler/ no unauthorized persons	s/ personnel			Х				20.75				
				22. Food Handler/ no unauthorized persons Safe Water, Recordkeeping and Foo Labeling				x x				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips				
X				Safe Water, Recordkeeping and Foo	od Package							Thermal test strips				
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INSPE	CTOR

Pizza H	it	11970 U		Cross Road	le TX	0		of 2
1 1220 110	ut	113700	TEMPERATURE OBSERVA		15, 17	1 0		J1 Z
Item/Loca	ation	Temp	Item/Location	Temp	Item/Loca	ion		Temp
Item/Loca	iuon	Temp	Item/Location	Temp	Item/Loca	ion		remp
Salad		38°F	Tomatoes	40.5°F				
Tomato	es	39°F	Walk in	38°F				
Cheese		39.3°F						
Beef		38°F						
Ham		39°F						
Peppero	oni	39.2°F						
Italian sa	ausage	32.9°F						
Chicken	Chicken							
		OB	SERVATIONS AND CORRECTI	VE ACTION	NS			
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW:		NT HAS BEEN MADE. YOUR ATTEN			IE CONDITIONS OBS	ERVED AN	D
10	200 ppm QAC							
29	Metal stem Cl2 and QAC							
44	Clean area around grease	bin						
45	Drain under soda machine	has water i	n it and it is soiled. Clean regular	y to prevent	insect bre	eding area.		
Received by:			Print:			Title: Person In Char	ge/ Owner	
(signature)								
Inspected	by:	.O	Print:			·		7
(zigharhin)	my WcWo	man	Tammy McMahar	n, RS, Cl	PO		# collected	. NI/A
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