

The Town of Cross Roads Retail Food Establishment Inspection Report

Date: 11-18-22		Time in: 1400		Time out: 1430		License/Permit #		Est. Type: Rest Low		Risk Category		Page 3 of 3	
Purpose of Inspection:				1-Compliance		2-Routine		3-Field Investigation		4-Visit		5-Other	
Establishment Name: Pizza Hut				Contact/Owner Name:				* Number of Repeat Violations: 0 * Number of Violations COS: 0				100	
Physical Address: 11970 Hwy 380				City/County: Town of Cross Roads		Zip Code:		Phone:		Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			

Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation
 Mark the appropriate points in the OUT box for each numbered item. Mark * with a checkmark in appropriate box for IN, NO, NA, COS. Mark an asterisk * in appropriate box for R

Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days												
Compliance Status						Compliance Status						
O	I	N	N	C	R	O	I	N	N	C	R	
U	N	O	A	O		U	N	O	A	O		
T						T						
Time and Temperature for Food Safety (F = degrees Fahrenheit)						Employee Health						R
		✓					✓					12. Management, food employees and conditional employees knowledge, responsibilities, and reporting
		✓					✓					13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth
		✓	✓			Preventing Contamination by Hands						
		✓					✓					14. Hands cleaned and properly washed/ Gloves used properly
		✓					✓					15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y,N)
		✓				Highly Susceptible Populations						
		✓					✓					16. Pasteurized foods used; prohibited food not offered. Pasteurized eggs used when required
			✓			Chemicals						
			✓				✓					17. Food additives, approved and properly stored; Washing Fruits & Vegetables
			✓				✓					18. Toxic substances properly identified, stored and used
Approved Source						Water/ Plumbing						
		✓					✓					19. Water from approved source; Plumbing installed; proper backflow device
		✓					✓					20. Approved Sewage/Wastewater Disposal System, proper disposal
Protection from Contamination												
		✓										
		✓										
		✓										
		✓										

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days												
Compliance Status						Compliance Status						
O	I	N	N	C	R	O	I	N	N	C	R	
U	N	O	A	O		U	N	O	A	O		
T						T						
Demonstration of Knowledge/ Personnel						Food Temperature Control/ Identification						R
		✓					✓					27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature
		✓					✓					28. Proper Date Marking and disposition
Safe Water, Recordkeeping and Food Package Labeling												29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips
		✓					✓					30. Food Establishment Permit (Current & Valid)
		✓				Permit Requirement, Prerequisite for Operation						
Conformance with Approved Procedures						Utensils, Equipment, and Vending						
			✓				✓					31. Adequate handwashing facilities: Accessible and properly supplied, used
Consumer Advisory												32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used
			✓				✓					33. Warewashing Facilities: installed, maintained, used/ Service sink or curb cleaning facility provided

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First												
Compliance Status						Compliance Status						
O	I	N	N	C	R	O	I	N	N	C	R	
U	N	O	A	O		U	N	O	A	O		
T						T						
Prevention of Food Contamination						Food Identification						R
		✓					✓					41. Original container labeling (Bulk Food)
		✓				Physical Facilities						
		✓					✓					42. Non-Food Contact surfaces clean
		✓					✓					43. Adequate ventilation and lighting; designated areas used
		✓					✓					44. Garbage and Refuse properly disposed; facilities maintained
		✓					✓					45. Physical facilities installed, maintained, and clean
Proper Use of Utensils												46. Toilet Facilities; properly constructed, supplied, and clean
		✓					✓					47. Other Violations
		✓										

Received by: <i>Jace Clayton</i> (signature)	Print: Jace Clayton	Title: Person In Charge/ Owner
Inspected by: <i>John Glover, Jr.</i> (signature)	Print: John Glover	Business Email:

Corrective Actions to Ensure Safe Food

Item No.

- 1 **Cooling**
 - TCS* food cooled from 135° F to 70° F more than 2 hours OR 135° F to 41° F (45° F) More than 6 hours; OR prepared food cooled to 41° F (45° F) more than 4 hours:
Action: Voluntary destruction, rapid reheating of cooked foods if less than 4 hours

- 2 **Cold Hold**
 - TCS food held above 41° F (45° F) more than 4 hours:
Action: Voluntary destruction

 - TCS food held above 41° F (45° F) less than 4 hours:
Action: Rapid cool (e.g. ice bath)

- 3 **Hot Hold**
 - TCS food held below 135° F more than 4 hours:
Action: Voluntary destruction

 - TCS food held below 135° F less than 4 hours:
Action: Rapid reheats to 165° F or more

- 4 **Cooking**
 - TCS food undercooked:
Action: Re-cook to proper temperature

- 5 **Rapid Reheating**
 - TCS food improperly reheated:
Action: Reheat rapidly to 165° F

- 7 **Approved Source/Sound Condition**
 - Foods from unapproved sources/unsound condition:
Action: Voluntary destruction

- 9 **Cross-Contamination of Raw/Cooked Foods**
 - Ready-To-Eat food contaminated by raw TCS food:
Action: Voluntary destruction of ready-to-eat foods

- 14 **Handwashing**
 - Food employees observed not washing hands:
Action: Instruct employees to wash hands as specified in the Rules.

- 15 **Proper Handling of Ready-to-Eat Foods**
 - Employee did not properly wash and sanitize hands before touching ready-to-eat food with Bare hands:
Action: Voluntary destruction

- 19, 23 **Water Supply**
 - Facility does not have water for washing hands, preparing food, or cleaning equipment/utensils:
Action: Voluntary suspension of food preparation

* Time/Temperature Control for Safety (TCS)

The Town of Cross Roads Retail Food Establishment Inspection Report

Establishment Name: <i>Pizza Hut</i>	Physical Address: <i>11970 Hwy 880</i>	City/State: <i>Town of Cross Roads</i>	License/Permit #	Page <i>3</i> of <i>3</i>
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TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
<i>TCS foods (Walk in)</i>	<i>41-45°F</i>				
<i>Reach-ins/Make table</i>					

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:

Received by: (signature) <i>Jace Clayton</i>	Print: <i>Jace Clayton</i>	Title: Person In Charge/ Owner
Inspected by: (signature) <i>John Glover, P.A.</i>	Print: <i>John Glover</i>	Samples: <i>Y</i> <i>N</i> # collected <i>0</i>