



FI-4041

Date: 03/12/2024	Time in: 11:51	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		77																																																																																																																																																																																																																			
Establishment Name: Rice Pot Express		Contact/Owner Name: Shao Ma																																																																																																																																																																																																																					
Physical Address: 12000 US-380 #104		Pest control : 2/29/24	Grease trap : 2/3/24			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>																																																																																																																																																																																																																							
Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																																																																																																																																																																																																																							
<table border="1"> <thead> <tr> <th colspan="5">Compliance Status</th> <th rowspan="2">R</th> </tr> <tr> <th>O</th> <th>I</th> <th>N</th> <th>N</th> <th>C</th> </tr> <tr> <th>U</th> <th>N</th> <th>O</th> <th>A</th> <th>O</th> </tr> <tr> <th>T</th> <th></th> <th></th> <th></th> <th>S</th> </tr> </thead> <tbody> <tr> <td colspan="5" style="text-align: center;">Time and Temperature for Food Safety (F = degrees Fahrenheit)</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td>1. Proper cooling time and temperature</td> </tr> <tr> <td>3</td> <td></td> <td></td> <td></td> <td></td> <td>2. Proper Cold Holding temperature(41°F/ 45°F)</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>3. Proper Hot Holding temperature(135°F)</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>4. Proper cooking time and temperature</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>5. Proper reheating procedure for hot holding (165°F in 2 Hours)</td> </tr> <tr> <td></td> <td></td> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td>6. Time as a Public Health Control; procedures & records</td> </tr> <tr> <td colspan="5" style="text-align: center;">Approved Source</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>8. Food Received at proper temperature</td> </tr> <tr> <td colspan="5" style="text-align: center;">Protection from Contamination</td> <td></td> </tr> <tr> <td>3</td> <td></td> <td></td> <td></td> <td></td> <td>9. Food Separated & protected, prevented during food preparation, storage, display, and tasting</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>10. Food contact surfaces and Returnables : Cleaned and Sanitized at (see below) ppm/temperature</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>11. Proper disposition of returned, previously served or reconditioned</td> </tr> </tbody> </table>			Compliance Status					R	O	I	N	N	C	U	N	O	A	O	T				S	Time and Temperature for Food Safety (F = degrees Fahrenheit)									<input checked="" type="checkbox"/>		1. Proper cooling time and temperature	3					2. Proper Cold Holding temperature(41°F/ 45°F)		<input checked="" type="checkbox"/>				3. Proper Hot Holding temperature(135°F)		<input checked="" type="checkbox"/>				4. Proper cooking time and temperature		<input checked="" type="checkbox"/>				5. Proper reheating procedure for hot holding (165°F in 2 Hours)				<input checked="" type="checkbox"/>		6. Time as a Public Health Control; procedures & records	Approved Source							<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"/>				8. Food Received at proper temperature	Protection from Contamination						3					9. Food Separated & protected, prevented during food preparation, storage, display, and tasting		<input checked="" type="checkbox"/>				10. Food contact surfaces and Returnables : Cleaned and Sanitized at (see below) ppm/temperature		<input checked="" type="checkbox"/>				11. Proper disposition of returned, previously served or reconditioned	<table border="1"> <thead> <tr> <th colspan="5">Compliance Status</th> <th rowspan="2">R</th> </tr> <tr> <th>O</th> <th>I</th> <th>N</th> <th>N</th> <th>C</th> </tr> <tr> <th>U</th> <th>N</th> <th>O</th> <th>A</th> <th>O</th> </tr> <tr> <th>T</th> <th></th> <th></th> <th></th> <th>S</th> </tr> </thead> <tbody> <tr> <td colspan="5" style="text-align: center;">Employee Health</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth</td> </tr> <tr> <td colspan="5" style="text-align: center;">Preventing Contamination by Hands</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>14. Hands cleaned and properly washed/ Gloves used properly</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>15. No bare hand contact with ready to eat foods or approved alternate method properly followed</td> </tr> <tr> <td colspan="5" style="text-align: center;">Highly Susceptible Populations</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required</td> </tr> <tr> <td colspan="5" style="text-align: center;">Chemicals</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>17. Food additives; approved and properly stored; Washing Fruits & Vegetables</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>18. Toxic substances properly identified, stored and used</td> </tr> <tr> <td colspan="5" style="text-align: center;">Water/ Plumbing</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>19. Water from approved source; Plumbing installed; proper backflow device</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>20. Approved Sewage/Wastewater Disposal System, proper disposal</td> </tr> </tbody> </table>			Compliance Status					R	O	I	N	N	C	U	N	O	A	O	T				S	Employee Health							<input checked="" type="checkbox"/>				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting		<input checked="" type="checkbox"/>				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	Preventing Contamination by Hands							<input checked="" type="checkbox"/>				14. Hands cleaned and properly washed/ Gloves used properly		<input checked="" type="checkbox"/>				15. No bare hand contact with ready to eat foods or approved alternate method properly followed	Highly Susceptible Populations							<input checked="" type="checkbox"/>				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	Chemicals							<input checked="" type="checkbox"/>				17. Food additives; approved and properly stored; Washing Fruits & Vegetables		<input checked="" type="checkbox"/>				18. Toxic substances properly identified, stored and used	Water/ Plumbing							<input checked="" type="checkbox"/>				19. Water from approved source; Plumbing installed; proper backflow device		<input checked="" type="checkbox"/>				20. Approved Sewage/Wastewater Disposal System, proper disposal
Compliance Status					R																																																																																																																																																																																																																		
O	I	N	N	C																																																																																																																																																																																																																			
U	N	O	A	O																																																																																																																																																																																																																			
T				S																																																																																																																																																																																																																			
Time and Temperature for Food Safety (F = degrees Fahrenheit)																																																																																																																																																																																																																							
			<input checked="" type="checkbox"/>		1. Proper cooling time and temperature																																																																																																																																																																																																																		
3					2. Proper Cold Holding temperature(41°F/ 45°F)																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				3. Proper Hot Holding temperature(135°F)																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				4. Proper cooking time and temperature																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				5. Proper reheating procedure for hot holding (165°F in 2 Hours)																																																																																																																																																																																																																		
			<input checked="" type="checkbox"/>		6. Time as a Public Health Control; procedures & records																																																																																																																																																																																																																		
Approved Source																																																																																																																																																																																																																							
	<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"/>				8. Food Received at proper temperature																																																																																																																																																																																																																		
Protection from Contamination																																																																																																																																																																																																																							
3					9. Food Separated & protected, prevented during food preparation, storage, display, and tasting																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				10. Food contact surfaces and Returnables : Cleaned and Sanitized at (see below) ppm/temperature																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				11. Proper disposition of returned, previously served or reconditioned																																																																																																																																																																																																																		
Compliance Status					R																																																																																																																																																																																																																		
O	I	N	N	C																																																																																																																																																																																																																			
U	N	O	A	O																																																																																																																																																																																																																			
T				S																																																																																																																																																																																																																			
Employee Health																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth																																																																																																																																																																																																																		
Preventing Contamination by Hands																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				14. Hands cleaned and properly washed/ Gloves used properly																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				15. No bare hand contact with ready to eat foods or approved alternate method properly followed																																																																																																																																																																																																																		
Highly Susceptible Populations																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required																																																																																																																																																																																																																		
Chemicals																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				17. Food additives; approved and properly stored; Washing Fruits & Vegetables																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				18. Toxic substances properly identified, stored and used																																																																																																																																																																																																																		
Water/ Plumbing																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				19. Water from approved source; Plumbing installed; proper backflow device																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				20. Approved Sewage/Wastewater Disposal System, proper disposal																																																																																																																																																																																																																		
Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days																																																																																																																																																																																																																							
<table border="1"> <thead> <tr> <th colspan="5">Compliance Status</th> <th rowspan="2">R</th> </tr> <tr> <th>O</th> <th>I</th> <th>N</th> <th>N</th> <th>C</th> </tr> <tr> <th>U</th> <th>N</th> <th>O</th> <th>A</th> <th>O</th> </tr> <tr> <th>T</th> <th></th> <th></th> <th></th> <th>S</th> </tr> </thead> <tbody> <tr> <td colspan="5" style="text-align: center;">Demonstration of Knowledge/ Personnel</td> <td></td> </tr> <tr> <td>2</td> <td></td> <td></td> <td></td> <td></td> <td>21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>22. Food Handler/ no unauthorized persons/ personnel</td> </tr> <tr> <td colspan="5" style="text-align: center;">Safe Water, Recordkeeping and Food Package Labeling</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>23. Hot and Cold Water available; adequate pressure, safe</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled</td> </tr> <tr> <td colspan="5" style="text-align: center;">Conformance with Approved Procedures</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions</td> </tr> <tr> <td colspan="5" style="text-align: center;">Consumer Advisory</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label</td> </tr> </tbody> </table>			Compliance Status					R	O	I	N	N	C	U	N	O	A	O	T				S	Demonstration of Knowledge/ Personnel						2					21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)		<input checked="" type="checkbox"/>				22. Food Handler/ no unauthorized persons/ personnel	Safe Water, Recordkeeping and Food Package Labeling							<input checked="" type="checkbox"/>				23. Hot and Cold Water available; adequate pressure, safe		<input checked="" type="checkbox"/>				24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled	Conformance with Approved Procedures							<input checked="" type="checkbox"/>				25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions	Consumer Advisory							<input checked="" type="checkbox"/>				26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label	<table border="1"> <thead> <tr> <th colspan="5">Compliance Status</th> <th rowspan="2">R</th> </tr> <tr> <th>O</th> <th>I</th> <th>N</th> <th>N</th> <th>C</th> </tr> <tr> <th>U</th> <th>N</th> <th>O</th> <th>A</th> <th>O</th> </tr> <tr> <th>T</th> <th></th> <th></th> <th></th> <th>S</th> </tr> </thead> <tbody> <tr> <td colspan="5" style="text-align: center;">Food Temperature Control/ Identification</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature</td> </tr> <tr> <td></td> <td>2</td> <td></td> <td></td> <td></td> <td>28. Proper Date Marking and disposition</td> </tr> <tr> <td></td> <td>2</td> <td></td> <td></td> <td></td> <td>29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips</td> </tr> <tr> <td colspan="5" style="text-align: center;">Permit Requirement, Prerequisite for Operation</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>30. Food Establishment Permit (Current and Valid)</td> </tr> <tr> <td colspan="5" style="text-align: center;">Utensils, Equipment, and Vending</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>31. Adequate handwashing facilities: Accessible and properly supplied, used</td> </tr> <tr> <td></td> <td>2</td> <td></td> <td></td> <td></td> <td>32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used</td> </tr> <tr> <td></td> <td>2</td> <td></td> <td></td> <td></td> <td>33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided</td> </tr> </tbody> </table>			Compliance Status					R	O	I	N	N	C	U	N	O	A	O	T				S	Food Temperature Control/ Identification							<input checked="" type="checkbox"/>				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature		2				28. Proper Date Marking and disposition		2				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips	Permit Requirement, Prerequisite for Operation							<input checked="" type="checkbox"/>				30. Food Establishment Permit (Current and Valid)	Utensils, Equipment, and Vending							<input checked="" type="checkbox"/>				31. Adequate handwashing facilities: Accessible and properly supplied, used		2				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used		2				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided																																																
Compliance Status					R																																																																																																																																																																																																																		
O	I	N	N	C																																																																																																																																																																																																																			
U	N	O	A	O																																																																																																																																																																																																																			
T				S																																																																																																																																																																																																																			
Demonstration of Knowledge/ Personnel																																																																																																																																																																																																																							
2					21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				22. Food Handler/ no unauthorized persons/ personnel																																																																																																																																																																																																																		
Safe Water, Recordkeeping and Food Package Labeling																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				23. Hot and Cold Water available; adequate pressure, safe																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled																																																																																																																																																																																																																		
Conformance with Approved Procedures																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions																																																																																																																																																																																																																		
Consumer Advisory																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label																																																																																																																																																																																																																		
Compliance Status					R																																																																																																																																																																																																																		
O	I	N	N	C																																																																																																																																																																																																																			
U	N	O	A	O																																																																																																																																																																																																																			
T				S																																																																																																																																																																																																																			
Food Temperature Control/ Identification																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature																																																																																																																																																																																																																		
	2				28. Proper Date Marking and disposition																																																																																																																																																																																																																		
	2				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips																																																																																																																																																																																																																		
Permit Requirement, Prerequisite for Operation																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				30. Food Establishment Permit (Current and Valid)																																																																																																																																																																																																																		
Utensils, Equipment, and Vending																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				31. Adequate handwashing facilities: Accessible and properly supplied, used																																																																																																																																																																																																																		
	2				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used																																																																																																																																																																																																																		
	2				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																																																																																																																																																																																																																							
<table border="1"> <thead> <tr> <th colspan="5">Compliance Status</th> <th rowspan="2">R</th> </tr> <tr> <th>O</th> <th>I</th> <th>N</th> <th>N</th> <th>C</th> </tr> <tr> <th>U</th> <th>N</th> <th>O</th> <th>A</th> <th>O</th> </tr> <tr> <th>T</th> <th></th> <th></th> <th></th> <th>S</th> </tr> </thead> <tbody> <tr> <td colspan="5" style="text-align: center;">Prevention of Food Contamination</td> <td></td> </tr> <tr> <td>1</td> <td></td> <td></td> <td></td> <td></td> <td>34. No Evidence of Insect contamination, rodent/other animals</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td>35. Personal Cleanliness/eating, drinking or tobacco use</td> </tr> <tr> <td>1</td> <td></td> <td></td> <td></td> <td></td> <td>36. Wiping Cloths; properly used and stored</td> </tr> <tr> <td>1</td> <td></td> <td></td> <td></td> <td></td> <td>37. Environmental contamination</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>38. Approved thawing method</td> </tr> <tr> <td colspan="5" style="text-align: center;">Proper Use of Utensils</td> <td></td> </tr> <tr> <td>1</td> <td></td> <td></td> <td></td> <td></td> <td>39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>40. Single-service & single-use articles; properly stored and used</td> </tr> </tbody> </table>			Compliance Status					R	O	I	N	N	C	U	N	O	A	O	T				S	Prevention of Food Contamination						1					34. No Evidence of Insect contamination, rodent/other animals						35. Personal Cleanliness/eating, drinking or tobacco use	1					36. Wiping Cloths; properly used and stored	1					37. Environmental contamination		<input checked="" type="checkbox"/>				38. Approved thawing method	Proper Use of Utensils						1					39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used		<input checked="" type="checkbox"/>				40. Single-service & single-use articles; properly stored and used	<table border="1"> <thead> <tr> <th colspan="5">Compliance Status</th> <th rowspan="2">R</th> </tr> <tr> <th>O</th> <th>I</th> <th>N</th> <th>N</th> <th>C</th> </tr> <tr> <th>U</th> <th>N</th> <th>O</th> <th>A</th> <th>O</th> </tr> <tr> <th>T</th> <th></th> <th></th> <th></th> <th>S</th> </tr> </thead> <tbody> <tr> <td colspan="5" style="text-align: center;">Food Identification</td> <td></td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>41. Original container labeling (Bulk Food)</td> </tr> <tr> <td colspan="5" style="text-align: center;">Physical Facilities</td> <td></td> </tr> <tr> <td></td> <td>1</td> <td></td> <td></td> <td></td> <td>42. Non-Food Contact surfaces clean</td> </tr> <tr> <td></td> <td>1</td> <td></td> <td></td> <td></td> <td>43. Adequate ventilation and lighting; designated areas used</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>44. Garbage and Refuse properly disposed; facilities maintained</td> </tr> <tr> <td></td> <td>1</td> <td></td> <td></td> <td></td> <td>45. Physical facilities installed, maintained, and clean</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>46. Toilet Facilities; properly constructed, supplied, and clean</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td>47. Other Violations</td> </tr> </tbody> </table>			Compliance Status					R	O	I	N	N	C	U	N	O	A	O	T				S	Food Identification							<input checked="" type="checkbox"/>				41. Original container labeling (Bulk Food)	Physical Facilities							1				42. Non-Food Contact surfaces clean		1				43. Adequate ventilation and lighting; designated areas used		<input checked="" type="checkbox"/>				44. Garbage and Refuse properly disposed; facilities maintained		1				45. Physical facilities installed, maintained, and clean		<input checked="" type="checkbox"/>				46. Toilet Facilities; properly constructed, supplied, and clean		<input checked="" type="checkbox"/>				47. Other Violations																																																												
Compliance Status					R																																																																																																																																																																																																																		
O	I	N	N	C																																																																																																																																																																																																																			
U	N	O	A	O																																																																																																																																																																																																																			
T				S																																																																																																																																																																																																																			
Prevention of Food Contamination																																																																																																																																																																																																																							
1					34. No Evidence of Insect contamination, rodent/other animals																																																																																																																																																																																																																		
					35. Personal Cleanliness/eating, drinking or tobacco use																																																																																																																																																																																																																		
1					36. Wiping Cloths; properly used and stored																																																																																																																																																																																																																		
1					37. Environmental contamination																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				38. Approved thawing method																																																																																																																																																																																																																		
Proper Use of Utensils																																																																																																																																																																																																																							
1					39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				40. Single-service & single-use articles; properly stored and used																																																																																																																																																																																																																		
Compliance Status					R																																																																																																																																																																																																																		
O	I	N	N	C																																																																																																																																																																																																																			
U	N	O	A	O																																																																																																																																																																																																																			
T				S																																																																																																																																																																																																																			
Food Identification																																																																																																																																																																																																																							
	<input checked="" type="checkbox"/>				41. Original container labeling (Bulk Food)																																																																																																																																																																																																																		
Physical Facilities																																																																																																																																																																																																																							
	1				42. Non-Food Contact surfaces clean																																																																																																																																																																																																																		
	1				43. Adequate ventilation and lighting; designated areas used																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				44. Garbage and Refuse properly disposed; facilities maintained																																																																																																																																																																																																																		
	1				45. Physical facilities installed, maintained, and clean																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				46. Toilet Facilities; properly constructed, supplied, and clean																																																																																																																																																																																																																		
	<input checked="" type="checkbox"/>				47. Other Violations																																																																																																																																																																																																																		



FI-4041



Establishment Name: Rice Pot Express	Physical Address: 12000 US-380 #104	City/State: Cross Roads, TX	License/Permit # 0	Page <u> </u> of <u> </u> 2 of 2
---	--	--------------------------------	-----------------------	---------------------------------------

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
rice (discarded)	55°F				
chicken (discarded)	65°F				
raw chicken	38°F				
prep cooler vegetables	34°F				
walk in cooler	33°F				
walk in freezer	-3°F				

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:
2	Observed TCS foods held above 41F; Do not store cold foods on counter tops when not in use to prevent food from exceeding above 41F.
9	Maintain foods in storage containers covered when not in use. Do not store food inside preparation coolers above the "fill line".
21	CFM required on site during operational hours. Certify additional staff to ensure coverage of all shifts. CFM training can be found on the states website: https://www.dshs.texas.gov/licensing-certified-food-manager-training-programs
28	Date label temperature controlled foods with numerical date, not to exceed 7 days from preparation date.
29	Maintain probe thermometers, and chemical test strips on site. CL sanitizer strips provided to manager.
32	Remove wooden handles utensils, resurface rusted metal tables in back of house. Resurface cutting boards on main prep line. Deep cuts prevent the food contact surface from being properly sanitized. Remove all cardboard from kitchen.
33	Observed dishes stacked tightly together causing water to be trapped. Stack dishes separately to allow for proper air flow. Maintain 3 compartment sink clean and free of debris build up.
35	Do not store personal items in the kitchen.
36	Store sanitizing cloths stored in sanitizer buckets at proper concentrations. Observed cloths stored throughout counters in kitchen.
37	All food and equipment shall be stored a minimum of 6 inches off the floor to allow for cleaning.
39	Clean utensil storage containers, do not store utensils in unclean surfaces.
42	Clean storage containers, storage racks, exterior of equipment, inside cooler equipment of food debris. Observed moderate/heavy food debris build up in areas around the facility.
43	Replace the dead light bulbs in kitchen. Clean the ventilation inside the walk in cooler. Heavy grease build up at vent hood above grill/fry area - clean within 10 days.
45	Clean floors under equipment. Clean walls around equipment. Observed moderate/heavy food debris build up in some areas. Maintain dry storage area organized so that cleaning can occur.
47	No insect activity observed during inspection. Increased cleaning required to prevent build up. A re-inspection of facility will occur in 30 days to verify compliance with the following items: 1. Obtain CFM license for employee on site during operation hours. 2. Clean vent hood above grill of heavy grease build up. 3. Deep clean all equipment and floors around equipment. Please contact me at 469-209-9055 if you have any questions or need clarity.

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