



FI-3382

Date: 10/10/2023	Time in: 13:09	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		96	
Establishment Name: Salad and Go		Contact/Owner Name: Aliza Perez		Number of Repeat Violations: <u>0</u> Number of Violations COS: <u>1</u>	
Physical Address: 11150 US-380		Pest control : 9/18/23	Grease trap : 5/2023	Follow-up: No	
<p><b>Compliance Status:</b> 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>					
<b>Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days</b>					
<b>Compliance Status</b>			<b>Compliance Status</b>		
O U T	I N	N O	N A	C O S	R
<b>Time and Temperature for Food Safety</b> (F = degrees Fahrenheit)			<b>Employee Health</b>		
			<input checked="" type="checkbox"/>		
1. Proper cooling time and temperature			12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting		
	<input checked="" type="checkbox"/>				
2. Proper Cold Holding temperature(41°F/ 45°F)			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)			<b>Preventing Contamination by Hands</b>		
		<input checked="" type="checkbox"/>			
4. Proper cooking time and temperature			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)			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			<b>Highly Susceptible Populations</b>		
			<input checked="" type="checkbox"/>		
<b>Approved Source</b>			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			<b>Chemicals</b>		
			<input checked="" type="checkbox"/>		
8. Food Received at proper temperature			17. Food additives; approved and properly stored; Washing Fruits & Vegetables		
	<input checked="" type="checkbox"/>				
<b>Protection from Contamination</b>			18. Toxic substances properly identified, stored and used		
	<input checked="" type="checkbox"/>				
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting			<b>Water/ Plumbing</b>		
	<input checked="" type="checkbox"/>				
10. Food contact surfaces and Returnables : Cleaned and Sanitized at (see below) ppm/temperature			19. Water from approved source; Plumbing installed; proper backflow device		
	<input checked="" type="checkbox"/>				
11. Proper disposition of returned, previously served or reconditioned			20. Approved Sewage/Wastewater Disposal System, proper disposal		
	<input checked="" type="checkbox"/>				
<b>Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days</b>					
O U T	I N	N O	N A	C O S	R
<b>Demonstration of Knowledge/ Personnel</b>			<b>Food Temperature Control/ Identification</b>		
	<input checked="" type="checkbox"/>				
21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)			27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature		
	<input checked="" type="checkbox"/>				
22. Food Handler/ no unauthorized persons/ personnel			28. Proper Date Marking and disposition		
				<input checked="" type="checkbox"/>	
<b>Safe Water, Recordkeeping and Food Package Labeling</b>			29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips		
	<input checked="" type="checkbox"/>				
23. Hot and Cold Water available; adequate pressure, safe			<b>Permit Requirement, Prerequisite for Operation</b>		
	<input checked="" type="checkbox"/>				
24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled			30. Food Establishment Permit (Current and Valid)		
<b>Conformance with Approved Procedures</b>			<b>Utensils, Equipment, and Vending</b>		
	<input checked="" type="checkbox"/>				
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions			31. Adequate handwashing facilities: Accessible and properly supplied, used		
				<input checked="" type="checkbox"/>	
<b>Consumer Advisory</b>			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			33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided		
	<input checked="" type="checkbox"/>				
<b>Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First</b>					
O U T	I N	N O	N A	C O S	R
<b>Prevention of Food Contamination</b>			<b>Food Identification</b>		
	<input checked="" type="checkbox"/>				
34. No Evidence of Insect contamination, rodent/other animals			41. Original container labeling (Bulk Food)		
	<input checked="" type="checkbox"/>				
35. Personal Cleanliness/eating, drinking or tobacco use			<b>Physical Facilities</b>		
	<input checked="" type="checkbox"/>				
36. Wiping Cloths; properly used and stored			42. Non-Food Contact surfaces clean		
				<input checked="" type="checkbox"/>	
37. Environmental contamination			43. Adequate ventilation and lighting; designated areas used		
	<input checked="" type="checkbox"/>				
38. Approved thawing method			44. Garbage and Refuse properly disposed; facilities maintained		
	<input checked="" type="checkbox"/>				
<b>Proper Use of Utensils</b>			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			46. Toilet Facilities; properly constructed, supplied, and clean		
	<input checked="" type="checkbox"/>				
40. Single-service & single-use articles; properly stored and used			47. Other Violations		
	<input checked="" type="checkbox"/>				



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Establishment Name: <b>Salad and Go</b>	Physical Address: <b>11150 US-380</b>	City/State: <b>Cross Roads, TX</b>	License/Permit # <b>0</b>	Page __ of __ <b>2 of 2</b>
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TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Chicken	37°F				
Steak	35°F				
Chopped lettuce	38°F				
Diced tomatoes	36°F				
Corn	35°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:
10	200ppm QAC observed.
20	5/27/23 250gal LES
21	CFM Aliza Perez on site during inspection
28	Expired dressing removed during inspection. Dressing labeled good until 10/9/23
29	Test strips thermometers on site.
34	Explain 9/18/23, no observations during inspection.
42	Maintain inside of cooler clean/free of water accumulation. Observed RTE foods in bagged stored in contact with water condensation. No evidence of cross contamination observed.
45	Repair cooler leak and maintain floors clean/free of standing water.

Received by: <small>(signature)</small> 	Print: Aliza Perez	Title: Person In Charge/ Owner CFM
Inspected by: <small>(signature)</small> 	Print: Bradley Strange, REHS/RS/C...	Samples: Y <input checked="" type="radio"/> N # collected N/A