X







License/Permit # Est. Type Time in  $_{Page}\,\underline{1}\quad \mathrm{of}\,\underline{2}$ 10/16/2023 12:06 Λ SD SD Purpose of Inspection: X 1-Routine TOTAL/SCORE 2-Follow Up 4-Investigation 3-Complaint 5-CO/Construction 6-Other Establishment Name: Contact/Owner Name: Helen O'Brien Number of Repeat Violations: \_0\_ Number of Violations COS: \_0\_ Starbucks Physical Address: 11450 E University Drive Grease trap : Follow-up: Compliance Status: Out = not in compliance IN = in compliancee NO = not observed NA = not applicable COS = corrected on site R = repeat violation W = Watch Mark 'v' a checkmark in appropriate box for IN, NO, NA, COS Mark an in appropriate box for R Mark the appropriate points in the OUT box for each numbered item Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days N N C O S I N I N N O N A o s Time and Temperature for Food Safety **Employee Health** (F = degrees Fahrenheit) 1. Proper cooling time and temperature 12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting Χ X 2. Proper Cold Holding temperature(41°F/45°F) 13. Proper use of restriction and exclusion; No discharge from Χ Χ eyes, nose, and mouth 3. Proper Hot Holding temperature(135°F) Х Preventing Contamination by Hands 4. Proper cooking time and temperature 14. Hands cleaned and properly washed/ Gloves used properly X Χ 5. Proper reheating procedure for hot holding (165°F in 2 15. No bare hand contact with ready to eat foods or approved X X alternate method properly followed 6. Time as a Public Health Control; procedures & records Χ **Highly Susceptible Populations** 16. Pasteurized foods used; prohibited food not offered Χ Approved Source Pasteurized eggs used when required 7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite X Chemicals destruction 8. Food Received at proper temperature 17. Food additives; approved and properly stored; Washing Fruits Χ Х & Vegetables 18. Toxic substances properly identified, stored and used Χ **Protection from Contamination** 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting X Water/ Plumbing 10. Food contact surfaces and Returnables; Cleaned and 19. Water from approved source; Plumbing installed; proper Χ Χ Sanitized at (see below) ppm/temperature backflow device 11. Proper disposition of returned, previously served or 20. Approved Sewage/Wastewater Disposal System, proper Χ Χ reconditioned disposal Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days N O O A Demonstration of Knowledge/ Personnel Food Temperature Control/ Identification 21. Person in charge present, demonstration of knowledge, 27. Proper cooling method used; Equipment Adequate to and perform duties/ Certified Food Manager (CFM) Χ Maintain Product Temperature 28. Proper Date Marking and disposition 22. Food Handler/ no unauthorized persons/ personnel Х Χ 29. Thermometers provided, accurate, and calibrated; Chemical/ Safe Water, Recordkeeping and Food Package Labeling X Thermal test strip 23. Hot and Cold Water available; adequate pressure, safe X Permit Requirement, Prerequisite for Operation 24. Required records available (shellstock tags; parasite 30. Food Establishment Permit (Current and Valid) Х destruction); Packaged Food labeled 2 Conformance with Approved Procedures Utensils, Equipment, and Vending 25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized 31. Adequate handwashing facilities: Accessible and properly supplied, used X Х processing methods; manufacturer instructions Consumer Advisory 32. Food and Non-food Contact surfaces cleanable, properly Χ designed, constructed, and used 26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffet Plate)/ Allergen Label 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided X Χ Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First I N N O I N N A N O A Prevention of Food Contamination Food Identification 34. No Evidence of Insect contamination, rodent/other 41.Original container labeling (Bulk Food) Χ Х animals
35. Personal Cleanliness/eating, drinking or tobacco use Physical Facilities 36. Wiping Cloths; properly used and stored 42. Non-Food Contact surfaces clean Χ X 37. Environmental contamination 43. Adequate ventilation and lighting; designated areas used Χ X 38. Approved thawing method 44. Garbage and Refuse properly disposed; facilities maintained X Χ 45. Physical facilities installed, maintained, and clean Proper Use of Utensils 1 39. Utensils, equipment, & linens; properly used, stored, 46. Toilet Facilities; properly constructed, supplied, and clean Х Χ dried, & handled/ In use utensils; properly used 40. Single-service & single-use articles; properly stored 47. Other Violations

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	INSTANT INSPECTOR
	INSPECTOR
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Establishment Name:		Physical Address:			ty/State:		License/Permit #	Page of			
Starbucks		11450 E University Drive		Cross Roads, TX		s, TX	0 2 of 2				
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Item/Loc	ation	Temp	Item/Location		Temp	Item/Loca	tion	Temp			
RIF		0°F									
RIR		38°F									
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Item	AN INSPECTION OF YOUR ES		ENT HAS BEEN MADE. YOUR ATTE				HE CONDITIONS OBSER	VED AND			
Number	NOTED BELOW:		AVI III IO BEELV MILIBER TOCKTITTES		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0125 10 11	E CONDITIONS OBSERV	1201110			
10	Observed the three compar	rtment sink	sanitizer concentration at 200pp	pmC	QA.						
21	Display in public view the v	alid Certifie	ed Food Manager Certificate.								
30	The permit displayed in public view was issued in 2014. Provide and display in public view a valid Town of Cross Roads Food										
	Service Permit.										
35	Provide hair restraints to all food prep employees. Observed a male food prep employee with no hair restraint.										
45	Clean the facility floor espe			,00	prop ompi	oyoo waa	no nan rootrame.				
45	Clean the facility floor espe	cially belli	iu and under equipment.								
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Received	by:		Print:				Title: Person In Charge	Owner			
(signature)	1		Helen O'Bri	en			Manager				
Inspected	(bv: ) ) )	7 0	Print:								
(signature)	Je/1- 13	al	Jeff Babina RS/0	יםי	$\circ$		_	N 1 / A			
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