

The Town of Cross Roads Retail Food Establishment Inspection Report

Date: 5-18-23	Time in: 1050	Time out: 1135	License/Permit #	Est. Type: Rest	Risk Category: Low	Page <u>1</u> of <u>3</u>	
Purpose of Inspection:		<input type="checkbox"/> 1-Compliance	<input checked="" type="checkbox"/> 2-Routine	<input type="checkbox"/> 3-Field Investigation	<input type="checkbox"/> 4-Visit	<input type="checkbox"/> 5-Other	Total Score
Establishment Name: Taco Bell		Contact Owner Name:		* Number of Repeat Violations: <u>0</u>		97	
Physical Address: 14000 Hwy 380		City/County: Town of Cross Roads		Zip Code:	Phone:		Follow-up: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Time and Temperature for Food Safety (F - degrees Fahrenheit)						Employee Health					
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
Approved Source						Preventing Contamination by Hands					
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
Protection from Contamination						Highly Susceptible Populations					
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
Chemicals						Water/Plumbing					
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Demonstration of Knowledge/Personnel						Food Temperature Control/Identification					
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
Safe Water, Recordkeeping and Food Package Labeling						Permit Requirement, Prerequisite for Operation					
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
Conformance with Approved Procedures						Utensils, Equipment, and Vending					
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
Consumer Advisory						Food Identification					
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Prevention of Food Contamination						Physical Facilities					
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
Proper Use of Utensils						Other Violations					
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>				

Received by: (signature) Moises Silva	Print: Moises Silva	Title: Person In Charge/Owner
Inspected by: (signature) John Glover Sr. A.	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)

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Establishment Name: <i>Tau Bell</i>	Physical Address: <i>14000 Hwy 380</i>	City/State: <i>Town of Cross Roads</i>	License/Permit #	Page <u>1</u> of <u>2</u>
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TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
<i>TCS food (Walk in Reach in)</i>	<i>41-45</i>				
<i>TCS food (Reach in Steam table)</i>	<i>135+</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:
<i>10</i>	<i>Food product on food contact surface of cleaned equipment.</i>

Received by: (signature) <i>Moses Silva</i>	Print: <i>Moses Silva</i>	Title: Person In Charge/ Owner
Inspected by: (signature) <i>John Glover B.A.</i>	Print: <i>John Glover</i>	Samples: Y <u>N</u> # collected <u>0</u>

Form EH-06 (Revised 09-2015)