The Town of Cross Roads Retail Food Establishment Inspection Report

Establishment I	nspection Report	- 1 200
Date: Time in: Time out: License/Permit # 5-4-23 1/00 1/28		Risk Category Page of 3
Purpose of Inspection: 1-Compliance 2-Routine	3-Field Investigation 4-Visi	
Establishment Name: Contact/Owner Name:	* Number of Repea ✓ Number of Viol	
Bukers Dozen Pownts Physical Address: 1200 Hul 380 # 112 City/County: Torum st. Lucy Koonds	Zip Code: Phone:	Follow-up: Yes 96
Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not app	licable COS = corrected on site	No. R = repeat violation
Mark the appropriate points in the OUT box for each numbered item Mark 'V' a	checkmark in appropriate box for IN, NO, NA, COS	Mark an asterisk' ★ in appropriate box for R
	e Immediate Corrective Action not to exceed 3 days Compliance Status	
Compliance Status	0 I N N C U N O A O	Employee Health R
T S (F = degrees Fahrenheit)	T S	ployees and conditional employees.
Proper cooling time and temperature	knowledge, responsibilitie	1 245
2. Proper Cold Holding temperature (41°F/45°F)	eyes, nose, and mouth	
3. Proper Hot Holding temperature(135°F) 4. Proper cooking time and temperature		perly washed/ Gloves used properly
5. Proper reheating procedure for hot holding (165°F in 2 Hours)		with ready to eat foods or approved followed (APPROVED Y_N)
6. Time as a Public Health Control; procedures & records		Highly Susceptible Populations I: prohibited food not offered.
Approved Source	Pasteurized eggs used wh	
Food and ice obtained from approved source: Food in good condition, safe, and unadulterated: parasite destruction		Chemicals
8. Food Received at proper temperature	17. Food additives; appro	ved and properly stored; Washing Fruits
Protection from Contamination	& Vegetables 18. Toxic substances pro	perly identified, stored and used
9. Food Separated & protected, prevented during food		Water/ Plumbing
preparation, storage, display, and tasting 10. Food contact surfaces and Returnables ; Cleaned and	19. Water from approved backflow device	source; Plumbing installed; proper
Sanitized atppm/temperature 11. Proper disposition of returned, previously served or	20. Approved Sewage/W	astewater Disposal System, proper
reconditioned Belaufe Foundation Items (2 Points)	disposal iolations Require Corrective Action within 18 days	
O I N N C Demonstration of Knowledge/ Parsonnel R	O I N N C	mperature Control/ Identification R
T S Demonstration of Knowledge Personnet 21. Person in charge present, demonstration of knowledge.	T S	d used: Equipment_Adequate to
21. Ferson in charge present, demonstration of Norways. and perform duties? Certified Food Manager (CFM) 22. Food Handler/ no unauthorized persons/ personnel	Maintain Product Temper 28. Proper Date Marking	
Safe Water, Recordkeeping and Food Package		ded, accurate, and calibrated; Chemical/
Labeling 23. Hot and Cold Water available; adequate pressure, safe		irement, Prerequisite for Operation
24. Required records available (shellshock tags; parasite	30. Food Establishmen	Permit (Current & Valid)
destruction); Packaged Food labeled Conformance with Approved Procedures	U	tensils, Equipment, and Vending
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods;	31. Adequate handwash	ng facilities: Accessible and properly supplied, used
manufacturer instructions Consumer Advisory	32. Food and Non-food	Contact surfaces cleanable, properly
	designed, constructed, a	d used ies; installed, maintained, used/
26. Posting of Consumer Advisories; raw or undercooked foods (Disclosure/Reminder/Buffet Plate)/ AllergenLabel	Service sink or curb clea	ning facility provided
Core Isems (I Point) Violations Require Corrective Actic	n Not to Exceed 90 Days or Next Inspection , Whichever Con	R
O I N N C Prevention of Food Contamination	U N O A O S	Food Identification
34. No Evidence of Insect contamination, rodent/other animals	41.Original container la	
35. Personal Cleanliness/eating, drinking or tobacco use 36. Wiping Cloths; properly used and stored	42. Non-Food Contact	
37. Environmental contamination	43. Adequate ventilation and lighting; designated areas used 44. Garbage and Refuse properly disposed; facilities maintained	
38. Approved thawing method Proper Use of Utensils	45. Physical facilities in	stalled, maintained, and clean
39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used	46. Toilet Facilities; pn	operly constructed, supplied, and clean N d = 1 5 1 5 W
40. Single-service & single-use articles; properly stored and used	47. Other Violations	•
Received by:	Print: Sun a	Title: Person In Charge/ Owner
(signature) Inspected by:	Print Toku blover	Business Email:
(signature) John I haven SU, 14.	- oun placer	

Form EH-06 (Revised 09-2015)

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:	Physical Address:	City/State: T		Page 3 of 3
Bakers Rozan Rowats	12000 HIMY 380, #1/2	CN095 K	s pape	
	TEMPÉRATURE	OBSERVATIONS	1 x / 7	Т
Item/Location	Temp Item/Location	Temp	Item/Location	Temp
TC5 +00 Q3 (D:3 polary	4/15-45			
	OBSERVATIONS AND	CORRECTIVE ACTIO	NS	
tem AN INSPECTION OF YOUR ES	STABLISHMENT HAS BEEN MADE. Y			SSERVED AND
Number NOTED BELOW:				
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10 Protect clea	in food conta	et sunter	es fue me uno	44 6067
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Received by:	Print:	ι.Λ	Title: Person In C	harge/ Owner
(signature)	(1			

(signature) Form EH-06 (Revised 09-2015)