The Town of Cross Roads Retail Food Establishment Inspection Report

Date			-		Time in:	Establ		CIII	1113	spe	Cti)II 1	IXC	1			
5-3-22				-	Time in: Time out: License/Permit #									Est. Type Risk Category Page of	3		
Pur	Purpose of Inspection: 1-Compliance 2-Routine						3-Field Investigation					4-Visit 5-Other Total Sco	re				
Esta	blishm	ent Na	me: +a	6	urgen	Contact/Owner N	lame:							* Number of Repeat Violations: V Number of Violations COS:			
Phys	Physical Address: 11250 Hury 380 Contact/Owner Name: Contact/Owner Name: Contact/Owner Name: Contact/Owner Name: Contact/Owner Name: Contact/Owner Name: Contact/Owner Name:									Zip Code: Phone:			hone:	Follow-up: Yes			
77				C	ompliance Status: Out = not in con	npliance IN = in compliance NO = not obs	erved NA	= not a	pplicabl	le CO)S = co	rrected	on site	No R = repeat violation			
		IVIHIK	the at	propria	te points in the OUT box for each mun	Priority Items (3 Poir								for IN, NO, NA, COS Mark an asterisk' * 'in appropriate box for R			
	plian	e Stan	us			,		10.00.70	30000000		ance S	************	cuon i	nos to exceed 5 days			
U T	N N	O	A	C O S		Temperature for Food Safety = degrees Fahrenheit)		R	U		N O	N A	0	Employee Health	R		
		~			Proper cooling time and temperature				V	7		S	12. Management, food employees and conditional employees.				
	~	2. Proper Cold Holding temperature (41°F/45°F)					knowledge, responsibilities, and reporting 13. Proper use of restriction and exclusion; No discharge from										
	-	3. Proper Hot Holding temperature(135°F)									eyes, nose, and mouth Preventing Contamination by Hands						
	1	4. Proper cooking time and temperature					-	1			14. Hands cleaned and properly washed/ Gloves used properly						
	~	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 (APPROVED Y_N) Highly Susceptible Populations						
	6. Time as a Public Health Control; procedures & records																
						Approved Source				1				 Pasteurized foods used; prohibited food not offered. Pasteurized eggs used when required 			
	1				Food and ice obtained from appreau good condition, safe, and unadulter.									Chemicals			
			-		8. Food Received at proper tempera	ature				1				17. Food additives; approved and properly stored; Washing Fruits			
					Protection from	Contamination				1				& Vegetables 18. Toxic substances properly identified, stored and used	-		
	1				Food Separated & protected, prev preparation, storage, display, and ta									Water/ Plumbing			
					10. Food contact surfaces and Retur Sanitized atpp	rnables ; <u>Cleaned</u> and om/temperature				~	7			19. Water from approved source; Plumbing installed; proper backflow device			
					11. Proper disposition of returned, preconditioned	previously served or								20. Approved Sewage/Wastewater Disposal System, proper	-		
					reconditioned	Priority Foundation	Items (2 Po	sinter so	t at arious	. D				disposal			
O U	I N	N O	N A	C O	Demonstration of Kno		ALLES (L. FL	R	0	1	N	N	С		R		
T				S					U T	N	0	A	0 8	Food Temperature Control/ Identification			
			-	_	21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)				1				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature				
				Food Handler/ no unauthorized persons/ personnel Safe Water, Recordkeeping and Food Package				H		,	\dashv	-	28. Proper Date Marking and disposition 29. Thermometers provided, accurate, and calibrated; Chemical/				
				Labeling 23. Hot and Cold Water available; adequate pressure, safe					~				Thermal test strips				
			+	+	24. Required records available (shellshock tags; parasite							Т		Permit Requirement, Prerequisite for Operation			
					destruction); Packaged Food labeled	estruction); Packaged Food labeled			-	11			30. Food Establishment Permit (Current & Valid)				
	П		T			Conformance with Approved Procedures ompliance with Variance, Specialized Process, and							Utensils, Equipment, and Vending				
			1		HACCP plan; Variance obtained for manufacturer instructions						-			31. Adequate handwashing facilities: Accessible and properly supplied, used			
						er Advisory							1	32. Food and Non-food Contact surfaces cleanable, properly			
		1	7		26. Posting of Consumer Advisories; foods (Disclosure/Reminder/Buffet F							+	+	designed, constructed, and used 33. Warewashing Facilities; installed, maintained, used/			
					loods (Disclosule/Relillinger/Buriet F	Core Items (1 Point) Violations Require	Corrective		N		1007			Service sink or curb cleaning facility provided			
O U	I N	N O	N A	C	Prevention of Food		F	R	0	1	N	N	C	uspection , Whichever Comes First	R		
T	_			o s	34. No Evidence of Insect contamina				T	N	0	A	o s	Food Identification			
1	1			_		Committee and the committee an				4				41.Original container labeling (Bulk Food)			
	2	1			 Personal Cleanliness/eating, drink Wiping Cloths; properly used and 		-	+			-			Physical Facilities 42. Non-Food Contact surfaces clean			
-			-	_	37. Environmental contamination		1				43. Adequate ventilation and lighting; designated areas used						
		*			38. Approved thawing method Proper Use of Utensils 39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used	e of Utensils		-	\vdash			+	Garbage and Refuse properly disposed; facilities maintained Physical facilities installed, maintained, and clean				
												6. Toilet Facilities; properly constructed, supplied, and clean					
					40. Single-service & single-use article				\forall	-			-	47. Other Violations			
Receive	ed by:	·	1	1	and used) ~		p.	rint:	1	1		(
-	(signature)						N	(0	V	1	a Avila Title: Person In Charge/Owner Manager Business Email:						
(signatu	signature) If once I leaven ou, o,							rint:	I	oh	v n	, ,	Glover Business Email:				
Form	EH-0	6/R	evis	ed 0	9-2015)							-					

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 <u>less than</u> 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 A	ddress:	City/State: 7	TO WALL	License/Permit#	Dago 7 of 7		
Whataburger	1125	0HV14380	101055 1	Para da	License/Termit#	Page 3 of 3		
	,	TEMPERATURE OBSE	RVATIONS	City/State: Toww of License/Permit#				
Item/Location	Temp		Temp	Item/Locat	ion			
Testoods (Melk In Reson Tus) Tus foods (Malk In Freezer treach In Freezer) Testoods (Prepline)	211-45	zoem, zoem on	Temp	Item/Local		Temp		
Iws)	. /							
Tes toods (Walk In	2-32							
Freezer Riow who I'm								
Freeza'r)								
TCStoodslPrenline)	135-15							
			7					
	OF	SERVATIONS AND CORRE	CTIVE ACTION	I C				
Item AN INSPECTION OF YOUR EST		NT HAS BEEN MADE. YOUR AT			E COMPLETONS OPER			
Number NOTED BELOW:	ADLISTIVIL	INT HAS BEEN MADE. TOUR A	TENTION IS DIKE	CIED IO IH	E CONDITIONS OBSER	VED AND		
40								
Received by:)	Print://	(1)	7	Title: Person In Charge/	Owner		
(signature)	1	MUVIC	HV. 10	7	War Lage	Y		
Inspected by: John Mlover (signature)	66. A.	Printi-John 61		S	Samples: Y.N. # collect	cted &		