

Food Establishment Inspection Report

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EMAIL

NAME OF ESTABLISHMENT: Tienda y Carniceria Los Guerrero III ADDRESS OR LOCATION: 525 E. College Way CITY: MV

MEALS SERVED: B L D A O PURPOSE OF INSPECTION:  Routine  Preoperational  Reinspection  Illness Investigation  Temporary  Complaint ESTABLISHMENT TYPE: pkg, meat, bakery RISK CATEGORY: 1, 1, 1

MEALS OBSERVED: B L D A O DATE: 1/30/18 TIME IN: 1:30p ELAPSED TIME: 40 TOTAL POINTS: 48 RED POINTS: 45 REPEAT RED:  PHONE:

RED HIGH RISK FACTORS

High Risk Factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Circles indicate compliance status (IN, OUT, N/O, N/A) for each item.

IN = In Compliance OUT = Not In Compliance N/O = Not Observed N/A = Not Applicable CDI = Corrected During Inspection R = Repeat Violation

#	Compliance Status	Description	CDI	R	PTS
<b>Demonstration of Knowledge</b>					
1	IN	PIC certified by accredited program, or compliance with Code, or correct answers	<input type="checkbox"/>	<input type="checkbox"/>	5
2	IN	Food Worker Cards current for all food workers; new food workers trained	<input type="checkbox"/>	<input type="checkbox"/>	5
<b>Employee Health</b>					
3	IN	Proper ill worker and conditional employee practices; no ill workers present; proper reporting of illness	<input type="checkbox"/>	<input type="checkbox"/>	25
<b>Preventing Contamination by Hands</b>					
4	IN	Hands washed as required	<input type="checkbox"/>	<input type="checkbox"/>	25
5	IN	Proper barriers used to prevent bare hand contact with ready-to-eat foods	<input type="checkbox"/>	<input type="checkbox"/>	25
6	IN	Adequate handwashing facilities	<input type="checkbox"/>	<input type="checkbox"/>	10
<b>Approved Source, Wholesome, Not Adulterated</b>					
7	IN	Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>	15
8	IN	Water supply, ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	10
9	IN	Proper washing of fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	10
10	IN	Food in good condition, safe and unadulterated; approved additives	<input type="checkbox"/>	<input type="checkbox"/>	10
11	IN	Proper disposition of returned, previously served, unsafe, or contaminated food	<input type="checkbox"/>	<input type="checkbox"/>	10
12	IN	Proper shellstock ID; wild mushroom ID; parasite destruction procedures for fish	<input type="checkbox"/>	<input type="checkbox"/>	5
<b>Protection from Cross Contamination</b>					
13	IN	Food contact surfaces and utensils used for raw meat thoroughly cleaned and sanitized; no cross contamination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	15
14	IN	Raw meats below or away from ready-to-eat food; species separated	<input type="checkbox"/>	<input type="checkbox"/>	5
15	IN	Proper handling of pooled eggs	<input type="checkbox"/>	<input type="checkbox"/>	5

#	Compliance Status	Description	CDI	R	PTS
<b>Potentially Hazardous Food Time and Temperature</b>					
16	IN	Proper cooling procedures	<input type="checkbox"/>	<input type="checkbox"/>	25
17	IN	Proper hot holding temperatures (5 pts if 130°F to 134°F)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25 (5)
18	IN	Proper cooking time and temperature; proper use of noncontinuous cooking	<input type="checkbox"/>	<input type="checkbox"/>	25
19	IN	No room temperature storage; proper use of time as a control	<input type="checkbox"/>	<input type="checkbox"/>	25
20	IN	Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	15
21	IN	Proper cold holding temperatures (5 pts if 42°F to 45°F)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	10 (5)
22	IN	Accurate thermometer provided and used to evaluate temperature of PHFs	<input type="checkbox"/>	<input type="checkbox"/>	5
<b>Consumer Advisory</b>					
23	IN	Proper Consumer Advisory posted for raw or undercooked foods	<input type="checkbox"/>	<input type="checkbox"/>	5
<b>Highly Susceptible Populations</b>					
24	IN	Pasteurized foods used as required; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>	10
<b>Chemical</b>					
25	IN	Toxic substances properly identified, stored, used	<input type="checkbox"/>	<input type="checkbox"/>	10
<b>Conformance with Approved Procedures</b>					
26	IN	Compliance with risk control plan, variance, plan of operation; valid permit; approved procedures for noncontinuous cooking	<input type="checkbox"/>	<input type="checkbox"/>	10
27	IN	Variance obtained for specialized processing methods (e.g., ROP)	<input type="checkbox"/>	<input type="checkbox"/>	10

Red Points

BLUE LOW RISK FACTORS

Low Risk Factors are preventive measures to control the addition of pathogens, chemicals, and physical objects into foods. Circled points indicate items not in compliance.

#	Description	CDI	R	PTS
<b>Food Temperature Control</b>				
28	Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>	5
29	Adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>	5
30	Proper thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>	3
<b>Food Identification</b>				
31	Food properly labeled	<input type="checkbox"/>	<input type="checkbox"/>	5
<b>Protection from Contamination</b>				
32	Insects, rodents, animals not present; entrance controlled	<input type="checkbox"/>	<input type="checkbox"/>	5
33	Potential food contamination prevented during delivery, preparation, storage, display	<input type="checkbox"/>	<input type="checkbox"/>	5
34	Wiping cloths properly used, stored; proper sanitizer	<input type="checkbox"/>	<input type="checkbox"/>	5
35	Employee cleanliness and hygiene	<input type="checkbox"/>	<input type="checkbox"/>	3
36	Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>	3
<b>Proper Use of Utensils</b>				
37	In-use utensils properly stored	<input type="checkbox"/>	<input type="checkbox"/>	3
38	Utensils, equipment, linens properly stored, used, handled	<input type="checkbox"/>	<input type="checkbox"/>	3
39	Single-use and single-service articles properly stored, used	<input type="checkbox"/>	<input type="checkbox"/>	3

#	Description	CDI	R	PTS
<b>Utensils and Equipment</b>				
40	Food and nonfood surfaces properly used and constructed; cleanable	<input type="checkbox"/>	<input type="checkbox"/>	5
41	Warewashing facilities properly installed, maintained, used; test strips available and used	<input type="checkbox"/>	<input type="checkbox"/>	5
42	Food-contact surfaces maintained, cleaned, sanitized	<input type="checkbox"/>	<input type="checkbox"/>	5
43	Nonfood-contact surfaces maintained and clean	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3
<b>Physical Facilities</b>				
44	Plumbing properly sized, installed, and maintained; proper backflow devices, indirect drains; no cross-connections	<input type="checkbox"/>	<input type="checkbox"/>	5
45	Sewage, wastewater properly disposed	<input type="checkbox"/>	<input type="checkbox"/>	5
46	Toilet facilities properly constructed, supplied, cleaned	<input type="checkbox"/>	<input type="checkbox"/>	3
47	Garbage, refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>	3
48	Physical facilities properly installed, maintained, cleaned; unnecessary persons excluded from establishment	<input type="checkbox"/>	<input type="checkbox"/>	2
49	Adequate ventilation, lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>	2
50	Posting of permit; mobile establishment name easily visible	<input type="checkbox"/>	<input type="checkbox"/>	2

Blue Points

Use the following blank lines to write comments.

*Handwritten comment: No longer need carry any 3 permit. Nevermind. Want to keep this permit. Also needed for jamales.*

Person In Charge (Signature): Juan Fernandez Date: 1/30/18

Regulatory Authority (Signature): Jeanne King Follow-up Needed?  Yes  No

DOH 332-035A (Revised January 2015)



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EMAIL

NAME OF ESTABLISHMENT <i>Tienda y Carnicerías Generales III</i>		ADDRESS OR LOCATION <i>525 E. Colfax WY</i>		CITY <i>MV</i>	
MEALS SERVED B <input type="checkbox"/> D/S <input type="checkbox"/> O <input type="checkbox"/>	PURPOSE OF INSPECTION	<input checked="" type="checkbox"/> Routine	<input type="checkbox"/> Preoperational	<input type="checkbox"/> Reinspection	ESTABLISHMENT TYPE
MEALS OBSERVED B <input type="checkbox"/> D/S <input type="checkbox"/> O <input type="checkbox"/>	<input type="checkbox"/> Illness Investigation	<input type="checkbox"/> Other:	<input type="checkbox"/> Temporary	<input type="checkbox"/> Complaint	RISK CATEGORY
DATE <i>1/30/18</i>	TIME IN <i>1:30P</i>	ELAPSED TIME <i>40</i>	TOTAL POINTS <i>48</i>	RED POINTS <i>45</i>	REPEAT RED
					PHONE
					<i>pkg, meat, bakery 1,1,1</i>

TEMPERATURE OBSERVATIONS

Food	Location	Temp (°F)	Food	Location	Temp (°F)
<i>meats (various)</i>	<i>display</i>	<i>41-45</i>	<i>(middle refrigeration)</i>	<i>45° F</i>	
<i>walk-in</i>	<i>36°</i>		<i>(smells bad)</i>		
<i>display (dairy)</i>	<i>in mkt</i>	<i>41°, 41°</i>	<i>Tamales top</i>	<i>89° bottom</i>	<i>145°</i>
			<i>Tamales front (hot holder)</i>	<i>150°</i>	

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames specified.	Points
<i>21</i>	<i>All cold holding must be 41°F or less. See above. CDTI Adjusted</i>	<i>5</i>
<i>17</i>	<i>Tamales found on stove in large pot. Top tamales not hot enough. Hot hold same # of tamales in 2 pots so all are hot. Tamales in front 150°F. CDTI</i>	<i>25</i>
<i>13</i>	<i>Meat cutters have meat bits all over it. Meat cutters must be disassembled, cleaned and sanitized every 4 hours. - Meat display case (middle) smells bad. Clean and sanitize. - CDTI -</i>	<i>15</i>
<i>43</i>	<i>Clean floor and shelves of walk-in. Meat drippings. - CDTI -</i>	<i>3</i>

Comments  
*Package Food (grocery) Meat market and Bakery (And tamales)*

Person In Charge (Signature) <i>Maria Fernandez</i>	Person In Charge (Print Name) <i>MARIA FERNANDEZ</i>	Date <i>1/30/18</i>
Regulatory Authority (Signature) <i>Jamie King</i>	Regulatory Authority (Print Name) <i>Jamie King</i>	Follow-up Needed? <input checked="" type="radio"/> Yes <input type="radio"/> No