

**PURPOSE**

Regular

Follow-Up

Complaint

Reported Illness

Other

Out-of-Business



**CONSUMER HEALTH INSPECTION REPORT**  
 CITY OF SPRINGTOWN HEALTH DEPARTMENT  
 P.O. Box 444 102 E. Second St.  
 Springtown, Texas 76082  
 Phone 817-220-4834



**PERMIT STATUS**

Current

Issued

Denied

Suspended

Revoked

Expired

Establishment Name: Mr. Jim's Pizza Owner Name: C. Blackburn  
 Address: 417 E. Hwy 179 City: Springtown Zip: 76082 Mapsco: \_\_\_\_\_

CODE	ESTAB NUM.	MONTH	DAY	YEAR	TIME	PHONE NUMBER/AC ( )	TYPE
		04	24	10	AM	5232258	FSE

Size / Staff 5 Certified Mgr. Required  Actual 5 FH cards reqd

DEMERITS (5 PTS)	Food (PHF) Temperature / Time Requirements	Remarks	COS
N/A	Violations Require Immediate Corrective Action	2 FH cards posted	
OK	1. Proper Cooling for Cooked / Prepared Food		
N/A	2. Cold Hold (41°F/45°F)	(3) emp. NEED FH cards (today)	
N/A	3. Hot Hold (140°)		
N/A	4. Proper Cooking Temperatures per PHF		
N/A	5. Rapid Reheating (165°F in 2 Hrs)		
Food Temperatures <u>meat toppings @ make-up counter 38°F - OK</u> <u>No hot pizzas to test at time of insp.</u>			

DEMERITS (4 PTS)	Personnel / Handling / Source Requirements	Remarks	COS
	Violations Require Immediate Corrective Action		
X	6. Personnel with Infections Restricted/Excluded		
X	7. Proper Adequate Handwashing		
	8. Good Hygienic Practices (Eating / Drinking / Smoking / Other)		
	9. Approved Source / Labeling		
	10. Sound Condition		
	11. Proper Handling of Ready-To-Eat Foods		
	12. Cross-Contamination of Raw / Cooked Foods / Other		
R	13. Approved Systems (HACCP Plans / Time as Public Health Control)		
	14. Water Supply - Approved Source / Sufficient Capacity / Hot and Cold Under Pressure		

DEMERITS (3 PTS)	Facility and Equipment Requirements	Remarks	COS
	Violations Require Immediate Corrective Action, Not To Exceed 10 Days		
	15. Equipment Adequate to Maintain Product Temperature		
	16. Handwash Facilities Adequate and Accessible		
X	17. Handwash Facilities with Soap and Towels		
	18. No Evidence of Insect Contamination		
	19. No Evidence of Rodents / Other Animals		
	20. Toxic Items Properly Labeled / Stored / Used		
	21. Manual Warewashing and Sanitizing at ( ) ppm / temperature		
	22. Mechanical Warewashing and Sanitizing at ( ) ppm / temperature		
	23. Approved Sewage / Wastewater Disposal System, Proper Disposal		
	24. Thermometers Provided / Accurate / Properly Calibrated (+/- 2°F)	OK	
	25. Food Contact Surfaces of Equipment and Utensils Cleaned / Sanitized / Good Repair		
	26. Posting of Consumer Advisories (Hemlich / Raw Shellfish Warning / Buffet Plate)		
	27. Food Establishment Permit	Post in consumer view	

Subtotals	Other Violations - Violations Require Corrective Action, Not To Exceed 90 Days Or The Next Inspection, Whichever Comes First	No. of Corrections	No. of Repeated Violations
5 Pts. <u>2</u>	<u>See page 2 -</u>		<u>17</u>
4 Pts. <u>3</u>			<u>3</u>
3 Pts. <u>3</u>			

Failure to correct the items noted on this inspection sheet in the times shown may result in suspension or revocation of the associated permit.

Total Demerits 11 Inspected by: D. Hall Print: D. Hall 817-995-

Follow-up Insp. 1/10/11 Received by: C. Blackburn Print: \_\_\_\_\_ Title: 8818

