

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: #1 Home Parcupine Sta. Concession Owner Name: SISD

Address: 495 Pojo Dr City: Springtown Zip: 76082 Mapsco: _____

CODE	ESTAB NUM.	MONTH	DAY	YEAR	TIME	PHONE NUMBER/AC	TYPE
		08	26	10	PM	220 1700	13E

Size / Staff 8 Certified Mgr. Required _____ Actual _____ PH cards (8)

DEMERITS (5 PTS)	Food (PHF) Temperature / Time Requirements Violations Require Immediate Corrective Action	Remarks	COS
	1. Proper Cooling for Cooked / Prepared Food		
	2. Cold Hold (41°F/45°F)		
<u>X</u>	3. Hot Hold (140°F) <u>135°F in walk</u>		
	4. Proper Cooking Temperatures per PHF		
	5. Rapid Reheating (165°F in 2 Hrs)		

Food/Temperatures Chili & Cheese Sauce - 138-142°F - OK
Hot dogs in warmer unit - 91-104°F

DEMERITS (4 PTS)	Personnel / Handling / Source Requirements Violations Require Immediate Corrective Action	Remarks	COS
	6. Personnel with Infections Restricted/Excluded		
<u>X</u>	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		
	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 Violations Require Immediate Corrective Action, Not To Exceed 10 Days	Remarks	COS
	15. Equipment Adequate to Maintain Product Temperature		
	16. Handwash Facilities Adequate and Accessible		
	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		
<u>X</u>	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)		
	25. Food Contact Surfaces of Equipment and Utensils Cleaned / Sanitized / Good Repair		
<u>X</u>	26. Posting of Consumer Advisories (Heimlich / Raw Shellfish Warning / Buffet Plate)		
	27. Food Establishment Permit		

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>5</u>	<u>All page 2</u>		
4 Pts <u>3</u>			
3 Pts <u>0</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 19 Inspected by: D. Hall, R.S. Print: D. HALL

Follow-up Insp Received by: Vicky [unclear] Print: _____ Title: _____

