#### INVOICE AUGUST 2021

September 1, 2021

TO: City of Helotes

**ATTN: Belenda Parker, Development Services** 

P.O. Box 507

Helotes, TX 78023

FROM: MK Inspections, LLC

Monty McGuffin, R. S.

## **PROFESSIONAL SERVICES FOR MONTH OF AUGUST 2021:**

Professional health services as specified in Agreement with Helotes for on-site evaluation of food service facilities, temporary food service events, consultations on new businesses, and response to health related complaints.

Professional fees to be paid monthly (\$650) to MK Inspections
Monty McGuffin
351 CR 467
Stockdale, TX 78160.

### HEALTH INSPECTION SUMMARY AUGUST 2021

#### PART ONE-FOOD SAFETY REPORT



This report provides current information on the food safety program in Helotes. The Texas Food Code is based on the principles of hazard analysis and critical control points (HACCP). In the implementation of HACCP the focus includes food manager education and professional consultation toward improvement in addition to periodic inspections. To ensure uniformity in the application of the Texas Food Establishment Rules the inspection report form is utilized. Inspections are random to ensure handling of peak times on a variety of days. The inspection report form summarizes inspectional findings with a weighted point value for each classification of inspection items. The report form which is reviewed with and signed by the food establishment management and is posted in each retail establishment. Critical items inspected are temperatures, food control surfaces, cross-contamination, etc.; other items inspected are less critical. The compliance score is the total number of demerits. (A score of "0" indicates full compliance with critical and non-critical items.)

## Copies of these reports are filed with the City of Helotes as well as posted in the individual establishments.

The compliance score is the total number of demerits. (A score of "0" indicates full compliance with critical and non-critical items.)

For ease a rating system would be

EXCELLENT 0-10 demerits
GOOD 11-20 demerits
ACCEPTABLE 21-29 demerits
POOR 30 or more demerits

Name of Establishment	Compliance Score*	Rating
Starbucks	3	EXCELLENT
Taco Bell	4	EXCELLENT
Jugo	3	EXCELLENT
Helotes Country Store	3	EXCELLENT
Burger King	3	EXCELLENT
Fink Cigars	0	EXCELLENT
Marco's Pizza	-	C of O
Marvelously Made	0	EXCELLENT
Little Cherub Children	0	EXCELLENT

# PART TWO—OTHER ACTIVITIES/SERVICES REPORT PERFORMED INSPECTIONS AT THE FOLLOWING EVENTS: ➤ Market Days 8/7/2021

This report submitted by: Monty McGuffin, R. S. City Health Inspector

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

#### **Retail Food Establishment Inspection Report**

Establishment: 576, Sucks Li	cense # RC: Date:
Purpose of Visit: Compliance Inspection Consultation	Complaint Illness Investigation Other:
(A) Cotton Front Sefety Contain (5 -4)	I COLDE
(A) Critical Food Safety Controls (5 pts)	{C} Management and Personnel (4 pts)
(Critical control violations must be corrected on the spot)	23. Manager on duty currently certified?
Cold holding temperatures / time     Hot holding temperatures / time	24. Manager demonstrates proper use of thermometer
<b>V</b> .	25. Personnel with infections restricted / excluded
	26. Proper hand washing demonstrated
Proper cooling of foods / time     Rapid reheating of foods (temperature and time)	27. Good hygienic practices observed
Food control surfaces clean and sanitized	28. Written HACCP Plans / SOPs as needed
	{D} Non-Critical (3 pts)
{ } cutting boards { } meat slicer { } food grinder 7. Potential for cross-contamination to occur	29. Food equipment construction / repair
8. RTE foods / no direct hand contact	30. Facility construction (floors / walls) / repair
9. Foods from approved sources / labeling	31. Housekeeping contributes to infestation
10. Foods protected from contamination	32. Non-food contact surfaces clean
11. Other:	33. Garbage / solid waste storage
	34. Consumer advisories posted
	35. Inspection report displayed for public
	36. Other
	{E} Corrections / Improvements Made / Comments:
C1 141 1 00 47 1 10 41	1/
Critical Temperature Verification:	F32 Peril for
Food Item and Process Temp (F°)	der had Contain
Asply 38°	Subuces To be Claimed
Mini Coula 40 /40 /40 /40	THE TOTAL PROPERTY.
Frilg. 38./38.	
Freeze O'/10	
{B} Facilities, Equipment and Food Storage (3 pts)	
12. Hand washing stations supplied and clean	
13. Dishwashing / sanitizing (3 // ppm/Temp.)	
14. Food storage area meets code	
15. Storage and use of toxic items	V
16. Evidence of insects or rodents / infestation	
17. Sewage disposal / Grease trap	
18. Thermometers provided / used 19. Plumbing / no cross-connections	
20. Water supply / hot water - / 20	
21. Sewage disposal meets code	
22. Other	
ZZ. Ouici	
As the person in charge of this facility, I understand I am response	nsible for food safety practices described in sections 229.163 (b) and
229.105 (c) of the Texas State rood Code. I understand that failure	of employees to conduct a 20 second hand wash prior to starting work, re to manage required temperature and time controls have a high risk
of causing food-borne illness. I agree to implement corrective action	s described in Part E to reduce the risk of food-horne illness
Non-Critical Food Safety Rating √	The state of the s
Area Superior Above Average Minimal	2
Average	HACCP Compliance Score =
Training	(Does not apply to consultations or follow-up visits)
Restrooms	Kado J
	Person In Charge / Manager / Owner
Housekeeping	reison in Charge / Manager / Owner
Equipment	12111
Construction	Evaluation by Registered Sanitarian

Overall Rating

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

Establishment: Jecu Bell License # RC: 3 Date: 8/5/3001					
Purpose of Vis	sit: 🔁 Com	pliance Insp	pection [	Consultation	n Complaint Illness Investigation Other:
(A) Guident	17 1 G . C . 4	0. 4. 1. //			
	Critical Food Safety Controls (5 pts) itical control violations must be corrected on the spot)				(C) Management and Personnel (4 pts)
				spot)	23. Manager on duty currently certified?
					24. Manager demonstrates proper use of thermometer
	ing temperat				25—Personnel with infections restricted / excluded
	temperature				26. Proper hand washing demonstrated
	ooling of foo				27. Good hygienic practices observed
	heating of fo			ne)	28. Written HACCP Plans / SOPs as needed
6. Food cor	ntrol surfaces	clean and s	anitized —		{D} Non-Critical (3 pts)
{ } cutti	ng boards {	} meat slice	r { } food	grinder	29. Food equipment construction / repair
7. Potential	for cross-co	ntamination	to occur		30. Facility construction (floors / walls) / repair
8. RTE foo	ds / no direct	t hand contac	et -		31. Housekeeping contributes to infestation
9. Foods fro					
10. Foods pr					32. Non-food contact surfaces clean
11. Other: _	otoctod from	Comamman	Oil		33. Garbage / solid waste storage
11. Oulei					- 34. Consumer advisories posted
	<del></del>				Inspection report displayed for public
					– 36. Other
					- {E} Corrections / Improvements Made / Comments:
					22, 1, 1
Critical Tem				(770)	\$26 Provid. for Proper
	and Process		20	Гетр (F°)	hondwoshy i
W. 11in		Clast.			
Been's		160	Fred2		P
come	160	112	Cook	58'	
{B} Facilitie				pts)	
12. Hand wa					
13. Dishwashing / sanitizing ( ppm/ Temp.)		emp.)			
14. Food storage area meets code					
15. Storage and use of toxic items					
16. Evidence of insects or rodents / infestation					
17. Sewage disposal / Grease trap —					
18. Thermometers provided / used					
19. Plumbing			_		
20. Water su	pply / hot wa	iter / 200			
21. Sewage of					
22. Other					
As the person i	n charge of	this facility.	I understan	d I am respo	onsible for food safety practices described in sections 229.163 (b) and
229.163 (c) of th	e Texas State	Food Code.	I understan	d that failure	e of employees to conduct a 20 second hand wash prior to starting work,
after handling r	aw products	or visiting th	e restroom	and that failu	ure to manage required temperature and time controls have a high risk
of causing food-	borne illness.	I agree to in	iplement coi	rective action	ns described in Part E to reduce the risk of food-borne illness.
	ical Food Saf				
Area	Superior	Above	Average	Minimal	4
		Average			HACCP Compliance Score =
Training		1			(Does not apply to consultations or follow-up visits)
Restrooms				70.0	
Housekeeping					Person In Charge / Manager / Owner
Equipment					211
Construction					Evaluation by Registered Sanitarian
Overall Rating		-			Distriction by Registered Samtanan

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023 Retail Food Establishment Inspection Report

Establishment: Juse Lice	ense # RC: 3 Date 8/3c3/
Purpose of Visit: Compliance Inspection Consultation	
(A) 0.44-18-16-6-4-1-(F-4-)	(C) Management (A - A)
(Critical control violations must be corrected on the spot)	{C} Management and Personnel (4 pts)
Cold holding temperatures / time	23. Manager on duty currently certified?
2. Hot holding temperatures / time	24. Manager demonstrates proper use of thermometer 25. Personnel with infections restricted / excluded
3. Cooking temperatures / time	
4. Proper cooling of foods / time	26. Proper hand washing demonstrated
5. Rapid reheating of foods (temperature and time)	27. Good hygienic practices observed 28. Written HACCP Plans / SOPs as needed
6. Food control surfaces clean and sanitized	
{ } cutting boards { } meat slicer { } food grinder	{D} Non-Critical (3 pts)
7. Potential for cross-contamination to occur	29. Food equipment construction / repair
8. RTE foods / no direct hand contact	30. Facility construction (floors / walls) / repair
9. Foods from approved sources / labeling	31. Housekeeping contributes to infestation
10. Foods protected from contamination	32. Non-food contact surfaces clean
11. Other:	33. Garbage / solid waste storage
11. Odioi.	34. Consumer advisories posted
	35. Inspection report displayed for public
	36. Other
The second secon	{E} Corrections / Improvements Made / Comments:
Critical Temperature Verification:	All Provide Les front ilens
Food Item and Process Temp (F°)	#1-1 ////
Per Coole 38'	- 10 by Hilly Stored
	10 00 11/1 3
Fridge 40/40°	
F16(3(1)	
{B} Facilities, Equipment and Food Storage (3 pts)	
12. Hand washing stations supplied and clean	
13. Dishwashing / sanitizing (300 ppm/Temp.)	
14. Food storage area meets code	
15. Storage and use of toxic items	
16. Evidence of insects or rodents / infestation	
17. Sewage disposal / Grease trap	
18. Thermometers provided / used	
19. Plumbing / no cross-connections	
20. Water supply / hot water	
21. Sewage disposal meets code	
22. Other	
7	
As the person in charge of this facility, I understand I am respon	sible for food safety practices described in sections 229.163 (b) and
229.163 (c) of the Texas State Food Code. I understand that failure of	of employees to conduct a 20 second hand wash prior to starting work,
	e to manage required temperature and time controls have a high risk
of causing food-borne illness. I agree to implement corrective actions	described in Part E to reduce the risk of food-borne illness.
Non-Critical Food Safety Rating √	
Area Superior Above Average Minimal Average	HACCP Compliance Score =
	(Does not apply to consultations or follow-up visits)
Training	1. Trulay Upra
Restrooms	
Housekeeping	Person In Charge / Manager / Owner
Equipment	
Construction	Evaluation by Registered Sanitarian

Overall Rating

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

Establishment: HeloTes County Ston Lice	ense # RC: Date: 8/5/202/
Purpose of Visit: Compliance Inspection Consultation	Complaint Illness Investigation Other:
{A} Critical Food Safety Controls (5 pts)	{C} Management and Personnel (4 pts)
(Critical control violations must be corrected on the spot)	23. Manager on duty currently certified?
1. Cold holding temperatures / time	24. Manager demonstrates proper use of thermometer
2. Hot holding temperatures / time	25. Personnel with infections restricted / excluded
3. Cooking temperatures / time	26. Proper hand washing demonstrated
4. Proper cooling of foods / time	27. Good hygienic practices observed
5. Rapid reheating of foods (temperature and time)	28. Written HACCP Plans / SOPs as needed
6. Food control surfaces clean and sanitized	
{ } cutting boards { } meat slicer { } food grinder	{D} Non-Critical (3 pts)
7. Potential for cross-contamination to occur	29. Food equipment construction / repair
8. RTE foods / no direct hand contact	30. Facility construction (floors / walls) / repair
9. Foods from approved sources / labeling	31. Housekeeping contributes to infestation
10. Foods protected from contamination	32. Non-food contact surfaces clean
11. Other:	33. Garbage / solid waste storage
11. Other.	34. Consumer advisories posted
	35. Inspection report displayed for public
	36. Other
	(E) Corrections / Improvements Made / Comments:
Critical Temperature Verification:	#12 Perid to handsink
Food Item and Process Temp (F°)	To be successful at all
CNalkie 38"	
	times and treet or galille
Ice Com Guero 20'	Sacy + Baser Towell's
B Facilities, Equipment and Food Storage (3 pts)	
12. Hand washing stations supplied and clean	
13. Dishwashing / sanitizing (ppm/Temp.)	
14. Food storage area meets code	
15. Storage and use of toxic items	
16. Evidence of insects or rodents / infestation	
17. Sewage disposal / Grease trap	
18. Thermometers provided / used	
19. Plumbing / no cross-connections	
20. Water supply / hot water	
21. Sewage disposal meets code	
22. Other	
As the person in charge of this facility. I understand I am respon	sible for food safety practices described in sections 229.163 (b) and
	of employees to conduct a 20 second hand wash prior to starting work,
after handling raw products or visiting the restroom and that failure	e to manage required temperature and time controls have a high risk
of causing food-borne illness. I agree to implement corrective actions	described in Part E to reduce the risk of food-borne illness.
Non-Critical Food Safety Rating √	
Area Superior Above Average Minimal	HACCD Counting of C
Average	HACCP Compliance Score =
Training	(Does not apply to consultations or follow-up visits)
Restrooms	Max //
Housekeeping	Person In Charge / Manager / Owner
Equipment	2111
Construction	Evaluation by Registered Sanitarian
Overall Pating	The state of the s

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

Establishment: Buger King Lice	ense # RC: Date:
Purpose of Visit: Compliance Inspection Consultation	Complaint Illness Investigation Other:
{A} Critical Food Safety Controls (5 pts)	{C} Management and Personnel (4 pts)
(Critical control violations must be corrected on the spot)	23. Manager on duty currently certified?
1. Cold holding temperatures / time	24. Manager demonstrates proper use of thermometer
2. Hot holding temperatures / time	25. Personnel with infections restricted / excluded
3. Cooking temperatures / time	26. Proper hand washing demonstrated
4. Proper cooling of foods / time	27. Good hygienic practices observed
5. Rapid reheating of foods (temperature and time)	28. Written HACCP Plans / SOPs as needed
6. Food control surfaces clean and sanitized	{D} Non-Critical (3 pts)
{ } cutting boards { } meat slicer { } food grinder	29. Food equipment construction / repair
7. Potential for cross-contamination to occur	30. Facility construction (floors / walls) / repair
8. RTE foods / no direct hand contact	31, Housekeeping contributes to infestation
9. Foods from approved sources / labeling	32, Non-food contact surfaces clean
10. Foods protected from contamination	33. Garbage / solid waste storage
11. Other:	34. Consumer advisories posted
	35. Inspection report displayed for public
	36. Other
	{E} Corrections / Improvements Made / Comments:
Critical Temperature Verification:	#32 Blived. for food
Food Item and Process Temp (F°)	
Beat 140° "Llore Hole"	- Tanton Charles
Chilke 140 Woon Hold	Corner Silva
Ualk-in 01/38' Franco	, ,
06/11/20/00	1 Jeanet
Carrette for the first for the	
{B} Facilities, Equipment and Food Storage (3 pts) 12. Hand washing stations supplied and clean	
13. Dishwashing / sanitizing ( ppm/Temp.)	
14. Food storage area meets code 15. Storage and use of toxic items	
16. Evidence of insects or rodents / infestation	
17. Sewage disposal / Grease trap	
18. Thermometers provided / used	
19. Plumbing / no cross-connections	
20. Water supply / hot water	
21. Sewage disposal meets code	
22. Other	
zz. Otnei	
As the person in charge of this facility. I understand I am respon	sible for food safety practices described in sections 229.163 (b) and
	of employees to conduct a 20 second hand wash prior to starting work,
after handling raw products or visiting the restroom and that failur	e to manage required temperature and time controls have a high risk
of causing food-borne illness. I agree to implement corrective actions	described in Part E to reduce the risk of food-borne illness.
Non-Critical Food Safety Rating √	
Area Superior Above Average Minimal	TIA CCD C1'
Average	HACCP Compliance Score =
Training	(Does not apply to consultations or follow-up visits)
Restrooms	
Housekeeping	Person in Charge / Manager / Owner
Equipment	19/1/h
Construction	Evaluation by Registered Sanitarian
Overall Rating	

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

Establishment: Fink Cigors License # RC: 2 Date: 8/5/2001					
Purpose of Vi	sit: 🔁 Con	pliance Ins	pection 🔲	Consultatio	n Complaint Illness Investigation Other:
(1)		100	400		
					(C) Management and Personnel (4 pts)
	(Critical control violations must be corrected on the spot)  1. Cold holding temperatures / time			spot)	23. Manager on duty currently certified?
					24. Manager demonstrates proper use of thermometer
	<ol> <li>Hot holding temperatures / time</li> <li>Cooking temperatures / time</li> </ol>				25. Personnel with infections restricted / excluded
					26. Proper hand washing demonstrated
	<ul><li>4. Proper cooling of foods / time</li><li>5. Rapid reheating of foods (temperature and time)</li></ul>				27. Good hygienic practices observed
		s clean and s		ne)	28. Written HACCP Plans / SOPs as needed
		meat slice		arinda-	{D} Non-Critical (3 pts)
7. Potential				grinder	29. Food equipment construction / repair
8. RTE foo					30. Facility construction (floors / walls) / repair
9. Foods fro					31. Housekeeping contributes to infestation
10. Foods pr					32. Non-food contact surfaces clean
11. Other: _	olocioa iron	. condiminati			33. Garbage / solid waste storage
		- 44			- 34. Consumer advisories posted
					35. Inspection report displayed for public
					- 36. Other
		8 7/1	- %		- {E} Corrections / Improvements Made / Comments:
Critical Tem	monotuno V	orifications			/ , //
	and Process		1,	P (F20)	
Food Item				Гетр (F°)	2000
77.10	2 70				
-		-			-
{B} Facilitie	c Faninma	nt and Food	Storngo (2	nto)	J
12. Hand wa	shing station	e supplied a	od clean	pis)	
13. Dishwas				lamn )	
14. Food sto			P1101	Cinp.)	
16. Evidence	<ul><li>15. Storage and use of toxic items</li><li>16. Evidence of insects or rodents / infestation</li></ul>				
17. Sewage			it contaction		
18. Thermon					
19. Plumbing					
20. Water su					
21. Sewage of					
22. Other					
As the person i	n charge of	this facility	Lunderstan	d I am resne	onsible for food safety practices described in sections 229.163 (b) and
229.163 (c) of th	e Texas State	Food Code.	I understar	d that failur	e of employees to conduct a 20 second hand wash prior to starting work,
after handling r	aw products	or visiting th	e restroom	and that fail	ure to manage required temperature and time controls have a high risk
of causing food-	borne illness.	I agree to in	plement co	rrective actio	ns described in Part E to reduce the risk of food-borne illness.
		ety Rating √			
Area	Superior	Above	Average	Minimal	IJACCD Compliance Comp
		Average			HACCP Compliance Score =
Training					(Does not apply to consultations or follow-up visits)
Restrooms					2/00
Housekeeping		-			Person In Charge/ Manager / Owner
Equipment					1/4/1/7
Construction					Evaluation by Registered Sanitarian
Overall Rating					25-qualion by Registered Sanitarian

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877
Mailing Address: P.O. Box 507, Helotes, TX 78023
Retail Food Establishment Inspection Report

Establishme	nt: //o	100'5		Lie	cense # RC: 3 Date: 8/3/202/
Purpose of Vis	sit: Com	pliance Insp	ection 🔲	Consultation	Complaint Illness Investigation Other:
{A} Critical	Food Safety	Controls (5	pts)		{C} Management and Personnel (4 pts)
(Critical contro	ol violations must be corrected on the spot)			spot)	23. Manager on duty currently certified?
	olding temperatures / time				24. Manager demonstrates proper use of thermometer
	ing temperat				25. Personnel with infections restricted / excluded
	g temperatures / time				26. Proper hand washing demonstrated
	ooling of foo				27. Good hygienic practices observed
5. Rapid re	heating of fo	ods (tempera	ture and tin	ne)	28. Written HACCP Plans / SOPs as needed
6. Food cor	ntrol surfaces	clean and sa	initized		{D} Non-Critical (3 pts)
{ } cutti	ng boards {	} meat slice	r { } food	grinder	29. Food equipment construction / repair
7. Potential	for cross-co	ntamination	to occur		30. Facility construction (floors / walls) / repair
8. RTE foo	ds / no direct	hand contac	t -		31. Housekeeping contributes to infestation
9. Foods fro	om approved	sources / lat	eling		32. Non-food contact surfaces clean
10. Foods pr	otected from	contaminati	on		33. Garbage / solid waste storage
11. Other: _		di = u	5X_7(_3)	Description	34. Consumer advisories posted
	37 = 12 031	SAL STEEN	S # = 1	-010 B	- 35. Inspection report displayed for public
TOWN THE TAX				,_# <u>#</u> #	- 36. Other
INVESTIGATION OF THE PROPERTY			CEAR IIIE	X ARIES	{E} Corrections / Improvements Made / Comments:
				==11 22 0000	(2) Corrections / Improvements wagte / Comments.
1 1031		THE THOR		21700	
Critical Tem	perature V	erification:	L W MARK	Secretary Control	10 Apperer
	and Process		Т Т	emp (F°)	
Colo/K-:	~ 38'		19-16-19	100000	C. /2 /20.2/
	ele- 36'			CONTRACTOR SHAWE	8121202
Por Cooler 36°		TOWN THE	- AMM		
	Fice				11/100
{B} Facilitie				pts)	
12. Hand wa					
13. Dishwashing / sanitizing (ppm/Temp.)			m/T	emp.)	
	14. Food storage area meets code				
	15. Storage and use of toxic items				
	16. Evidence of insects or rodents / infestation				
	17. Sewage disposal / Grease trap			* NoTe: he Could Hondsinks	
	3. Thermometers provided / used			A Jours , The Cavin Meros , AN)	
	Plumbing / no cross-connections Water supply / hot water / 20				
	21. Sewage disposal meets code 22. Other				
22. Other		KIII WOLGE			
A - 41					
As the person i	n charge of	Food Code	I understand	d that failure	nsible for food safety practices described in sections 229.163 (b) and of employees to conduct a 20 second hand wash prior to starting work,
after handling r	aw products	or visiting th	e restroom s	u mat failure and that failur	re to manage required temperature and time controls have a high risk
					as described in Part E to peduce the risk of food-borne illness.
	ical Food Saf		NEXTES:		
Area	Superior	Above	Average	Minimal	N/A
		Average	레토 네트		HACCP Compliance Score =
Training		W STAN	15/48/11 331	22	(Does not apply to consultations or follow-up visits)
Restrooms				XIII de VIA	
Housekeeping	100		1 7/		Person In Charge / Manager / Owner
Equipment				3 (1)	1/141
Construction	= = = = =				Physical Designation of the Physical Ph
				\$81	Evaluation by Registered Sanitarian
Overall Rating				111 33	

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12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

#### **Retail Food Establishment Inspection Report**

Establishment: License # RC: Date:	
Purpose of Visit: Compliance Inspection Consultation Complaint Illness Investigation Other:	
Critical Food Safety Controls (5 pts)   Critical control violations must be corrected on the spot)   Cold holding temperatures / time   Cooking temperatures / time   Cooking temperatures / time   Proper cooling of foods / time   Rapid reheating of foods (temperature and time)   Cooking temperatures / time   Proper cooling of foods (temperature and time)   Cooking temperatures / time   Proper cooling of foods / time   Cooking temperatures / time   Proper cooling of foods / time   Cooking temperatures / time   Proper cooling of foods / time   Cooking temperatures / time   Cooking temperature and time   Cooking t	
Critical Temperature Verification:  Food Item and Process  Temp (F°)	
{B} Facilities, Equipment and Food Storage (3 pts)  12. Hand washing stations supplied and clean  13. Dishwashing / sanitizing (ppm/Temp.)  14. Food storage area meets code  15. Storage and use of toxic items  16. Evidence of insects or rodents / infestation  17. Sewage disposal / Grease trap	
18. Thermometers provided / used 19. Plumbing / no cross-connections	
20. Water supply / hot water 21. Sewage disposal meets code 22. Other	
As the person in charge of this facility, I understand I am responsible for food safety practices described in sections 229.1 229.163 (c) of the Texas State Food Code. I understand that failure of employees to conduct a 20 second hand wash prior to star after handling raw products or visiting the restroom and that failure to manage required temperature and time controls have	rting work, a high risk
of causing food-borne illness. I agree to implement corrective actions described in Part E to reduce the risk of food-borne illness.  Non-Critical Food Safety Rating √	
Area Superior Above Average Minimal  Training HACCP Compliance Score = (Does not apply to consultations or follow-up visits)	

Area Superior Above Average Minimal
Training
Restrooms
Housekeeping
Equipment
Construction
Overall Rating

Above Average Minimal
HACCP Compliance Score = (Does not apply to consultations or follow-up visited present apply to c

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

Establishment: 111/2 Chears Cladification Lice	ense # RC:3 Date:8/5/2c2/
Purpose of Visit: Compliance Inspection Consultation	Complaint Illness Investigation Other:
	1000
(A) Critical Food Safety Controls (5 pts)	{C} Management and Personnel (4 pts)
(Critical control violations must be corrected on the spot)	23. Manager on duty currently certified?
Cold holding temperatures / time	24. Manager demonstrates proper use of thermometer
2. Hot holding temperatures / time	25. Personnel with infections restricted / excluded
3. Cooking temperatures / time	26. Proper hand washing demonstrated
4. Proper cooling of foods / time	27. Good hygienic practices observed
5. Rapid reheating of foods (temperature and time)	28. Written HACCP Plans / SOPs as needed
6. Food control surfaces clean and sanitized	{D} Non-Critical (3 pts)
{ } cutting boards { } meat slicer { } food grinder	29. Food equipment construction / repair
7. Potential for cross-contamination to occur	30. Facility construction (floors / walls) / repair
8. RTE foods / no direct hand contact	31. Housekeeping contributes to infestation
Foods from approved sources / labeling	32. Non-food contact surfaces clean
10. Foods protected from contamination	33. Garbage / solid waste storage
11. Other:	34. Consumer advisories posted
	35. Inspection report displayed for public
	36. Other
	{E} Corrections / Improvements Made / Comments:
Critical Temperature Verification:	1 / - 1
Food Item and Process Temp (F°)	Local 5 0000
Fridge 45°	
Ficezer 10°	
(B) Facilities, Equipment and Food Storage (3 pts)	
12. Hand washing stations supplied and clean	
13. Dishwashing / sanitizing ( ppm/ Temp.)	
14. Food storage area meets code	
15. Storage and use of toxic items	
16. Evidence of insects or rodents / infestation	
17. Sewage disposal / Grease trap	
18. Thermometers provided / used	
19. Plumbing / no cross-connections	
20. Water supply / hot water /26°	
21. Sewage disposal meets code	
22. Other	
As the person in charge of this facility I understand I am respon	sible for food safety practices described in sections 229.163 (b) and
229.163 (c) of the Texas State Food Code. I understand that failure	of employees to conduct a 20 second hand wash prior to starting work,
after handling raw products or visiting the restroom and that failure	e to manage required temperature and time controls have a high risk
of causing food-borne illness. I agree to implement corrective actions	described in Part E to reduce the risk of food-horne illness.
Non-Critical Food Safety Rating √	
Area Superior Above Average Minimal	
Average	HACCP Compliance Score =
Training	(Does not apply to consultations or follow-up visits)
	(1)00
Restrooms	h.1/3/a
Housekeeping	Person In Charge / Manager / Owner
Equipment	14/1
Construction	Evaluation by Registered Sanitarian