

SOUTHERN NEVADA HEALTH DISTRICT FOOD ESTABLISHMENT INSPECTION

Page 1 of _3

2	80 SOUTH DEC	CATL	JR BLVD • L	AS \	VEGAS	, NV •	89107	• 702-759-	1258 ([DIRECT	PLAN	IREV	(IEW)	• 702-	759-1	110 (D	IREC	TFOC	DOP	S) •	
						A STATE	控制部局	FACILITY	CONTRACTOR DESCRIPTION AND	- Contract of the Contract of	1 0 9	TO ST	No.		Sept a						
DEDMIT "											QUARE	OOTAGE	ALCOHOL: UNIVERSITY	PRIMARY EHS							
PRO121695 Inspire PUSE																					
ADDRESS 1075 Las leggs Blvd RISK CAT. P.E. Code DISTRIC											ICT L	OCATION	1	MILES							
NEVADA CLEAN INDOOR AIR ACT: COMPLIANCE REQUIRED EXEMPT CONTACT PERSON:																					
CURRENT	103Z	SERV	91b	BATE 3/15	/19	7 18	845	TIME 01	TRAVEL MIN DEMERITS			CLOSE HEALTH CARD			RESULT 86						
OPEN TIME CL			OSE TIME		CAPACITY		SEWER WATER		PERMIT	r STATUS		ACT	TION		-	DATE		ΤE			
M M ACTION										5	7										
1000	ECIAL NOTES ECIAL PROCESSES:																				
SPI	ECIAL PROCESSES:		Immin	ent	Healt	h Ha	zards -	Notify S	NHD a	nd ceas	e ()	nera	tions	as Di	recto	d see		a law exten	114 A 5 A	Donald Co.	
	Interruption of electri	cal ser	vice					Lack of adeq				Jerai	.ions	45 D		mergen	cv such	as fire a	nd/or flo	ood	
D	No potable water or I	hot wa	ter					Lack of adeq			and h	andwa	shing fa	cilities		other cor					
	Gross unsanitary occ	currenc	ce or conditions	inclu	ding pest	infestat		Misuse of poi								nay enda					
	Sewage or liquid was	ste not	disposed of in a	an ap	proved ma	anner		Suspected fo	odborne i	llness outbr	eak										
	СТ	= Coc	king temp. HH	= Ho	t Holding	temp.	CH = Cold	Holding temp	o. RH = F	ReHeat temp	p. TC =	= Time	as Con	trol temp	coc	L = Coc	ling tem	ıp.			
	ALMARAN MICH.					Maria N			eratur			t dest			NAME OF THE OWNER, OWNE	t it is		MIN.			
F	ood		Temperatu	re	Code	Food				perature Code		de	Food		M. Carrier and Control of Control of Control		Temperature		C	Code	
NO7CS																					
OBERVEI																					
0.	IN = In o	compli	ance OUT = No	ot In o	complianc	e N/O	= Not obse	erved N/A = I	Not applic	able COS :	= Corr	ected o	on-site d	uring ins	spection	R = R	epeat vi	olation			
Si	ECTION 1 - The														IN	OUT	cos	NO	NA	R	
1	Verifiable time as a control with approved procedure when in use. Operational plan, waiver or variance approve										roved	p									
2	and followed when required. Operating within the parameters of the health permit.																				
_	Foodhandler health restrictions as required.																				
3	Commercially manufactured food from approved source with required labels. Parasite destruction as required. Potentially hazardous foods/time temperature control for safety (PHF/TCS) received at proper temperature.									uired. re.	Ø										
4		Hot and cold running water from approved source as required.									4-11	10									
5	Imminently dar approved facilit	mminently dangerous cross connection or backflow. Waste water and sewage disposed into public sewer or									wer or	10									
6	Food wholeson	ne; no	ot spoiled, co	ntan	ninated,	or ad	ulterated								6						
7	PHF/TCSs coo	ked a	ind reheated	to pi	roper ter	npera	atures.	ALTERNATION OF THE PROPERTY OF													
8	PHF/TCSs prop	perly	cooled.																10		
9	PHF/TCSs at p	roper	temperature	s du	iring sto	rage,	display, s	service, trai	nsport, a	and holdin	ng.							yed/	1		
	ECTION 2 - The											h vio	lation		IN	OUT	cos		NA	R	
	Food and ware									ind install	ed.			171	16						
11		ood protected from potential contamination during storage and preparation.									M										
12	Food protected	ood protected from potential contamination by chemicals. Toxic items properly labeled, stored and used.										6									
14		ood protected from potential contamination by employees and consumers.										Ø									
14	Kitchenware and food contact surfaces of equipment properly washed, rinsed, sanitized and air dried. Equipme for warewashing operated and maintained. Sanitizer solution provided and maintained as required.									oment	P										
15	Handwashing facilities adequate in number, stocked, accessible, and limited to handwashing only.										10.00 E 2 2 2 E										
	Effective pest control measures. Animals restricted as required.										Ø										
17	Hot and cold holding equipment present; properly designed, maintained and operated.										6										
18	8 Accurate thermometers (stem & hot/cold holding) provided and used.									Ø											
19 PHF/TCSs properly thawed. Fruits and vegetables washed prior to preparation or service.														D							
20 Single use items not reused or misused.										16											
21	Person in charge available and knowledgeable/management certification. Foodhandler card as required. Facilities and the second of the second o								acility	P											
22		an effective employee health policy. kflow prevention devices and methods in place and maintained.									/	2015 5 5 5									
23		know prevention devices and methods in place and maintained. de card and required signs posted conspicuously. Consumer advisory as required. Records/logs maintaine									10										
	and available v	vhen	required. NO	CIAA	compli	ant. F	PHFs lab	eled and o	lated as	required. Re	L For	od so	main Id for	offsite	10						
	and available when required. NCIAA compliant. PHFs labeled and dated as required. Food sold for offsite consumption labeled properly.																				

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SMD FOOD ESTABLISHMENT INSPECTION Establishment Name: PRO721685	Date	08/	15/1	9 Pag	e 2 of	3							
SECTION 3 - Good Management Practices to Prevent Unsanitary Conditions	IN	OUT			NA	en lei re							
Acceptable personal hygiene practices, clean outer garments, proper hair restraints used. Living quarters and child care completely separated from food service.	Ø												
Non-PHF and food storage containers properly labeled and dated as required. Food stored off the floor when required. Non-PHF/TCS not spoiled and within shelf-life. Proper retail storage of chemicals.	Ø												
Facilities for washing and sanitizing kitchenware approved, adequate, properly constructed, maintained and operated.	6												
27 Appropriate sanitizer test kits provided and used. Equipment and ware washing thermometer(s) are required. Wiping cloths and linens stored and used properly.	16			2000									
28 Small wares and portable appliances approved, properly designed, in good repair.	1	Walter Street	A Commence	Control of									
29 Utensils, equipment, and single serve items properly handled, stored, and dispensed.	Z												
30 Nonfood contact surfaces and equipment properly constructed, installed, maintained and clean.													
Restrooms, mop sink, and custodial areas maintained and clean. Premises maintained free of litter, unnecessary	20												
equipment, or personal effects. Trash areas adequate, pest proof, and clean.	1												
Facility in sound condition and maintained (floors, walls, ceilings, plumbing, lighting, ventilation, etc.).	Þ												
Observations and Corrective Actions		ind i			No.								
Violation Corrective Ac	tion												
Imminer Health Hazald													
2 Upon arrival, customers were This PUST box is !!	O.F.	d	The.	fac	14.4	2							
observed being served open must pay SNHD \$716 and pass													
beverages and the handsink I a reinspection with	an	ap	era	610	,								
was inoperable. Multiple I hand sink that reaches MINOF in													
attempts to repair word ineffective. I order to represent	-												
1 months of the party													
	-												
54													
Comments		TALANT		K THE									
			THE WARLS										
Food octablishment regulations (2040) and a significant regulation (2040) and a significant regulation (2040) and a significant regulation (2040) and a signifi													
Food establishment regulations (2010) and educational materials available at www.SouthernNevadaHealthDistrict.org/ferl													
Section 2 Demerits 11 to 20 demerits or identical consecutive critical or major violation = B; Re-inspection	Section 1 Demerits 5 0 to 10 demerits = A (Identical consecutive critical or major violations shall be downgraded to next lower grade.) Section 2 Demerits 7 1 to 20 demerits or identical consecutive critical or major violation = B; Re-inspection after 15 days, or sooner if												
Total Demerits Total	ical or r	maior v	iolatio	ns.									
Inspection Grade 21 to 40 demerits = C; Re-inspection after 15 days, or sooner if requested. Inspection	n must	result	in 10 d	emerits	s or les	s,							
with no identical repeat critical or major violations. Failure on re-inspection will res	sult in	a closi	ure of	the fac	ility								
41 or more demerits = Closure or Imminent Health Hazard requiring closure; All food	activit	ies mu	st rem	ain sus	pended	t							
Fee required to be paid within 10 business days or prior to until approved by Health Authority. Re-inspection upon operator request must result in 10 demerits or less, with identical repeat critical or major violations. Failure on re-inspection will result in continued closed status with identical repeat critical or major violations.													
associated fee and may require a supervisory conference.	Jiiiiiu	100 CIO	Jou St	atus W	itii								
Inspector name and phone number: Jasan Kultan 75	7 mo Reviewed By:												
Received by (signature) Received by (printed) EHS (signature)													
& Cris Kline	V	l.	-										

RESTAURANT INSPECTOR

business cards? identification badge? Do they have official Does your health inspector wear an

and ask to speak to a Person-In-Charge (PIC). They wears a picture ID badge. Health District inspectors usually carry official business cards. will identify themselves, state the purpose of their visit, inspector") with the Southern Nevada Health District An Environmental Health Specialist (aka "health

routine inspection? Did you receive a phone call to schedule a

Plan Review process, our Facility Design Assessment & Permitting (FDAP) inspectors may schedule an on-site re-inspections and surveys. If you are currently in the inspections are usually follow-up activities such as Routine inspections are UNANNOUNCED. Scheduled

PIC of a facility in case of an emergency or numbers are primarily used to contact the to send inspection reports, and phone phone number. Email addresses are needed are limited to a name, email address, and card information. Personal information requests Health District inspectors will NOT ask for credit including credit card information? Did they ask for any personal information

to request information

If you are still in doubt, you can call the Southern Nevada Health District to verify information.

(702) 759-1110 Monday-Friday 8:00 a.m. - 4:30 p.m

NOTE: Health inspectors from the Southern Nevolda Health District may conduct inspections outside of normal Health District business hours.

Annual health permit fees, re-inspection fees, verified for or accept food. payments can be made. Health inspectors will not ask about paying fees online or about locations where locations. A health inspector can give you information of the Health District's Environmental Health service to the Health District, either online or in person, at any complaint fees, and closure fees are remitted directly transactions can be handled by a health inspector. Health inspectors will NOT ask for money; no financial Did they ask you for money or food? Routine inspections do not have an associated fee.

a grade card before leaving. paper form within 24 hours. If a routine inspection the PIC (or designated recipient) via email, fax, or documented on an inspection report and be sent to A health inspection (including follow-up visits) will be Did they provide an inspection report? was conducted, an inspector will provide

