

SOUTHERN NEVADA HEALTH DISTRICT Page 1 of 5 FOOD ESTABLISHMENT INSPECTION 280 SOUTH DECATUR BLVD + LAS VEGAS, NV + 89107 + 702-759-1258 (DIRECT PLAN REVIEW) + 702-759-1110 (DIRECT FOOD OPS + 702-759-1000 (24 HOURS)																
FACILITY INFORMATION																
PERM	RMIT # ESTABLISHMENT NAME PHONE #								ESI. S	QUARE F	OOTAGE	PRIMARY EHS				
PR00	08562	Galleria - Dairy Queen Dairy Queen				(702) 4	(702) 433-1273 750					EE7000691				
	RESS	•					RISK CAT. P.E. COD		ODE	DISTRICT		LOCATION		PERMIT STATUS		
	1300 W Sunset RD Henderson, NV 89014-6620								54	ACTIVE						
	Henderson, NV 89014-6620 NEVADA CLEAN INDOOR AIR ACT: ☑ COMPLIANCE REQUIRED ☐ EXEMPT CONTACT PERSON: Britney Kingsolver															
ic en	EHS							RAVEL M	IN INS	PECTION	N RESULT	SE	WER	WATER		
CURRENT	EE7001385 Routine Inspection 9/01/2021 2:55PM 3:55PM 19 Closed 0 C						Clo	Closed with Fees			М		М			
SPEC	SPECIAL NOTES: RPZ- BEHIND SODA DISPENSER - 3/2021															
	In = In compliance OUT = Not In compliance COS = Corrected on-site during inspection N/O = Not observed N/A = Not applicable R = Repeat violation															
A	Imminent Health Hazards-Notify SNHD and Cease Operations as Directed										OUT					
В	Interruption of electrical service										-		-	<u>.</u>	-	
С	No potable water or hot water										 		<u>.</u>	-		
D	Gross unsanitary occurrences or conditions including pest infestation											I		 	-	
E	Sewage or liquid waste not disposed of in an approved manner													 	<u> </u>	
F	Lack of adequate refrigeration													<u> </u>	<u> </u>	
		dequate employee toilets and har	ndwasning raciiii	les							<u> </u>				<u> </u>	
G	Misuse of poisonous or toxic materials									-				<u> </u>		
H	·	d foodborne illness outbreak												<u> </u>		
	Emergency such as fire and/or flood										ļ			ļ .	<u> </u>	
	J Other condition or circumstance that may endanger public health												000	370		
5 - 0	SECTION 1 - The Critical Violations listed below are to be assessed 5 demerits for each violation IN OUT COS NO NA R Verifiable time as a control with approved procedure when in use. Operational plan, waiver or variance															
		· · ·		•	•		lance				•					Ц
2	approved and followed when required. Operating within the parameters of the health permit. 2 Handwashing (as required, when required, proper glove use, no bare hand contact of ready to eat foods).															
	Foodhandler health restrictions as required.										ļ		ļ .	<u>.</u>		
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.										<u> </u>		<u> </u>	<u></u> .		
4	4 Hot and cold running water from approved source as required.								•							
5	Imminently dangerous cross connection or backflow. Waste water and sewage disposed into public sewer or approved facility.									-						
6	Food wholesome; not spoiled, contaminated, or adulterated.															
7	PHF/TCSs cooked and reheated to proper temperatures.															
8	PHF/TCSs properly cooled.															
9	PHF/TCSs at proper temperatures during storage, display, service, transport, and holding.															
SEC	TION 2 -	The Major Violations listed b	elow are to b	e assessed	3 demerits f	or each v	olation				IN	OUT	cos	NO	NA :	R
10	Food and warewashing equipment approved, properly designed, constructed and installed.									_						
11	Food pro	Food protected from potential contamination during storage and preparation.										•				
12	Food protected from potential contamination by chemicals. Toxic items properly labeled, stored and used.															
13	Food protected from potential contamination by employees and consumers.															
14	Kitchenware and food contact surfaces of equipment properly washed, rinsed, sanitized and air dried. Equipment for warewashing operated and maintained. Sanitizer solution provided and maintained as required.									-						
15	5 Handwashing facilities adequate in number, stocked, accessible, and limited to handwashing only.										■					
16	Effective pest control measures. Animals restricted as required.															
17	Hot and cold holding equipment present; properly designed, maintained and operated.															
18	18 Accurate thermometers (stem & hot/cold holding) provided and used.															
19 PHF/TCSs properly thawed. Fruits and vegetables washed prior to preparation or service.																
20	Single use items not reused or misused.															
21	Person in charge available and knowledgeable/management certification. Foodhandler card as required. Facility has an effective employee health policy.										•					
22											•					

FOOD ESTABLISHMENT INSPECTION (Cat 10) 2013 PR0008562			Facility	Facility Name: Galleria - Dairy Queen- Dairy Queen			Date: 09/01/2021		Page 2 of 5		
23	maintained and	Grade card and required signs posted conspicuously. Consumer advisory as required. Records/logs maintained and available when required. NCIAA compliant. PHFs labeled and dated as required. Food sold for offsite consumption labeled properly.									
SEC	SECTION 3 - Good Food Management Practices to Prevent Unsanitary Conditions								NA		
24	Acceptable personal hygiene practices, clean outer garments, proper hair restraints used. Living quarters and child care completely separated from food service.										
25	Non-PHF and fo when required.	•									
26	Facilities for washing and sanitizing kitchenware approved, adequate, properly constructed, maintained and operated.										
27	Appropriate sanitizer test kits provided and used. Equipment and ware washing thermometer(s) are required. Wiping cloths and linens stored and used properly.										
28	Small wares and portable appliances approved, properly designed, in good repair.										
29	Utensils, equipment, and single serve items properly handled, stored, and dispensed.										
30	Nonfood contact surfaces and equipment properly constructed, installed, maintained and clean.										
31	Restrooms, mop sink, and custodial areas maintained and clean. Premises maintained free of litter, unnecessary equipment, or personal effects. Trash areas adequate, pest proof, and clean.										
32	Facility in sound condition and maintained (floors, walls, ceilings, plumbing, lighting, ventilation, etc.).										
TEMPERATURE OBSERVATIONS											
	CT = Cooking temp. HH = Hot Holding temp. CH = Cold Holding temp. RH = ReHeat temp. TC = Time as Control temp. COOL = Cooling temp.										
Item		Location	Measurement	Commer							
Chili	<u> </u>		151.00 F	НН							
Sliced Tomatoes			37.00 F	СН							

SNHD Closure sign posted. Do not move, remove, or block closure sign. Facility is to remain closed and all food activities must remain suspended until

Facility Name: Galleria - Dairy Queen- Dairy Queen

Date:

FOOD ESTABLISHMENT INSPECTION (Cat 10) 2013

FOOD ESTABLISH PR0008562	HMENT INSPECTION	(Cat 10) 2013	Facility Name:Galleria - Dairy Queen- Dairy Que	en	Date: 09/01/2021	Page 4 of 5						
hinsen@snhd.org or at (70	02)759-1110 to s	schedule a re-inspection. A	been eliminated and this has been ver facility closure fee of \$1,400 must be p http://www.snhd.info/eh/payment and u	paid at the 280 S. Decatur Blvd SNHD	office							
		•	must result in 10 demerits or less with osed status, and/or further administrat.	•	ted.							
SNHD Re-Opening Inspec SNHD Effective Pest Cont		ninent Health Hazard Chec ovided.	klist provided.									
Food establishment regul	ations (2010) an	d educational materials ava	ilable at www.SouthernNevadaHealtl	nDistrict.org/ferl								
Section 1 Demerits	10	<u> </u>	= A (Identical consecutive critical or major violations shall be downgraded to next lower grade.)									
Section 2 Demerits	9	sooner if requested. Ins	11 to 20 demerits or identical consecutive critical or major violation = B; Re-inspection after 15 business days, or sooner if requested. Inspection must result in 10 demerits or less, with no identical repeat critical or major violations. Failure on re-inspection will result in a "C" grade with associated fee and may require a supervisory									
Total Demerits	19	conference.	on win result in a 🕠 grade with associated fee and may require a supervisory									
Initial Inspection Grade	Closed	21 to 40 demerits = C; Re-inspection after 15 business days, or sooner if requested. Inspection must result in 10 demerits or less, with no identical repeat critical or major violations. Failure on re-inspection will result in a										
☐ This grade resulted f repeat critical or maj violation.		closure of the facility v 41 or more demerits = 0 until approved by Healt	closure of the facility with associated fee and may require a supervisory conference. 41 or more demerits = Closure or Imminent Health Hazard requiring closure; All food activities must remain suspended until approved by Health Authority. Re-inspection upon operator request must result in 10 demerits or less, with no									
Reinspection Fee:	\$1,400.00	identical repeat critical or major violations. Failure on re-inspection will result in continued closed status with associated fee and may require a supervisory conference.										
Fee required to be paid wi business days or prior to r		Inspector name:	Justin Hinsen									
Received by (signature)			Received by (printed)	EHS (signature)	HS (signature)							
Cili	jel	2 m	Elijah Maddickes	Justen Dinn								
			staff	Justin Hin								
the Environmental Health offic	ce indicated on pag	ge one of this report. Until such	You may discuss the contents of this report time as a decision is rendered by this depart er email, fax, or postal delivery (of your chool	ment, the contents of this report shall rema								















The Southern Nevada Health District's

FOOD HANDLER SAFETY TRAINING PROGRAM

is now open for first-time card applicants.

All first-time Food Handler
Safety Training Card applicants
must complete testing in person
at a Health District location.
An appointment is required.

TRAINING MATERIALS

Free training books and videos are available at the link below.



TO SCHEDULE AN APPOINTMENT, CALL 702-759-0595 OR VISIT

WWW.SNHD.info/foodhandler

NOTICE OF BUSINESS CLOSURE FORM
ESTABLISHMENT FILE UPDATE FORM