SOUTHERN NEVADA HEALTH DISTRICT

SND outhern Nevelda Health District

FOOD ESTABLISHMENT INSPECTION

280 SOUTH DECATUR BLVD • LAS VEGAS, NV • 89107 • 702-759-1258 (DIRECT PLAN REVIEW) • 702-759-1110 (DIRECT FOOD OPS • '

	O SOUTH DEC	OF THE STATE OF		TEO 10				OR HUNDRED THE	MANAGEMENT OF THE PARTY OF THE		No. of Street, or other party of the								
PER	MIT#	NELE CARE	ESTABLISHMENT NAME				FACILITY INFORM						ST. SQUARE FOOTAGE			PRIMARY EHS			
PRODUCTOR Sammy's food Truck #40												P							
ADDRESS 4585 COMMERCIAL Way RISKCAT. P.E. Code DISTRI							TRICT	T LOCATION			MILES								
NEV	ADA CLEAN INDOOF		The state of the s		No. of the last of	KEMPT			CONTACT F	PERSON:	7/2								
=014	EM EHS SERVICE DATE TIME IN TIME OUT TRAVEL MIN DEPERITS GRADE								DE HEA	LTH CARD	S RESI	JLT 124	,						
SERVICE 1215		0		12/20		1145		1319	200			1600			8	87 86			
0	PEN TIME	CLOSE TI	ME	CAPACIT	ITY SEWER		WATER	PERMI	T STATUS		TO ACTION ACTION		ION		DATE		E		
						M	M				ACT	51							
	SPECIAL NOTES																		
SPE	CIAL PROCESSES:		Immine	nt Health	Haz	ards -	Notify S	SNHD a	nd ceas	e Ope	eratio	ns as	Direct	ed					
□ In	nterruption of electr	ical service				The second second	Lack of ade	THE RESERVE AND DESCRIPTION OF	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN		TO CHARLES			Emergen	cy such	as fire a	nd/or flo	ood	
	o potable water or						Lack of ade	equate emp	oloyee toilets	and har	dwashir	ng facilitie	es 🗆	Other co	A CONTRACTOR OF THE PARTY OF TH			hat	
□G	ross unsanitary oc	currence or o	conditions in	cluding pest i	nfestati				and toxic ma					may end	anger pu	blic neal	tn		
□s	ewage or liquid wa	ste not dispo	osed of in an	approved ma	anner		Suspected	foodborne	illness outbr	reak									
	Ci	Γ = Cooking t	temp. HH =	Hot Holding	temp.	CH = Cold	Holding te	mp. RH =	ReHeat tem	p. TC = 7	Time as	Control te	emp. CO	OL = Co	oling tem	p.			
							Ten	nperatu											
2. 1. 7	ood		mperature		Food			Tem	perature	Code	F	ood			Temp	erature	Co	ode	
	CUID .	-	00°F	414	-	+													
, ,	IN = In compliance OUT = Not In compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation																		
9:	CTION 1 - The												IN	STATE OF STATE OF STREET	COS	NAME OF STREET	NA	R	
1	Verifiable time	Section and Section 1	The Paris Property of	SEASON TO THE REAL		A STATE OF THE PARTY OF THE PAR	And the Party of t	STATE OF THE PERSON NAMED IN			_								
										ci oi va	Harloc	арріот							
2								s). 🔽											
3	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.																			
4																			
5	Imminently dangerous cross connection or backflow. Waste water and sewage disposed into public sewer approved facility.						or V												
6 Food wholesome; not spoiled,		oiled, cont	contaminated, or adulterated.							V									
7 PHF/TCSs cooked ar		oked and re	eheated to proper temperatures.																
8 PHF/TCSs properly cooled.			and the same of th												VO				
9	PHF/TCSs at proper temperatures during storage, display, service, transport, and holding. ECTION 2 - The Major Violations listed below are to be assessed 3 demerits for each violation							-	VO										
	THE RESERVE AND ADDRESS OF THE PARTY.		THE RESERVE OF THE PARTY OF THE	CANADA SINA AND AND AND AND AND AND AND AND AND A	A STATE OF THE		THE RESERVE AND PARTY.		A SHARRAMAN AND AND AND AND AND AND AND AND AND A	THE RESIDENCE OF THE PERSON NAMED IN	viola	tion	IN		cos		NA	R	
	Food and ware					7.0.000			and instal	led.			VO						
11 12	Food protected								dy Joholod	latoro	l and u	nood()	100						
13	Food protected			STATE OF THE PARTY	THE RESIDENCE	Section by the second			ly labeled	, stored	anu	Seuch	XIII	VO	79				
-	Kitchenware a								sanitized a	and air o	tried F	quinme	ALCOHOL: NAME OF PERSONS	STATE OF THE PERSON					
	for warewashin											Ченрине		4					
15	Handwashing	facilities ad	dequate in	number, s	tocke	d, acces	sible, and	d limited t	o handwa	shing c	nly.		V						
	Effective pest	control me	asures. Ar	nimals rest	ricted	as requi	ired.					04	N/E	70					
1)7	Hot and cold h								perated.					, NO					
18	Accurate them		A SHARE THE REAL PROPERTY.			CALL BROWNING CO.	MALA SUL CIDA SOLUTION		THE PARTY.					-					
19	PHF/TCSs pro				ables	washed	prior to p	reparatio	n or servi	ce.			00000	and the same of		VO			
20	Single use iter		The state of the s	A TOPAN TOPAN							LINE RO			A					
2)	Person in char has an effective				e/man	agemen	t certifica	tion. Foo	unandler c	card as	require	d. Facil	ity 🗆	MO					
22	Backflow prevent				place	and mai	intained.	et de la				The same	10						
	Grade card an				1000			sory as r	equired. R	ecords	/logs m	naintain		THE PARTY NAMED IN					
	and available	when requ	uired. NCI														- 1		
	consumption la	abeled pro	perly.											1			FIIZ.		

				176			-			
S	FOOD ESTABLISHMENT INSPECTION Establishment Name:	Date:	120)	Pag	e 2 of	3			
g	ECTION 3 - Good Management Practices to Prevent Unsanitary Conditions	IN	OUT			NA				
100000	Acceptable personal hygiene practices, clean outer garments, proper hair restraints used. Living quarters and child care completely separated from food service.	D								
25	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.	9								
26	Facilities for washing and sanitizing kitchenware approved, adequate, properly constructed, maintained and operated.	0								
27		9								
28		D								
29	Utensils, equipment, and single serve items properly handled, stored, and dispensed.	V								
30	, , , , , , , , , , , , , , , , , , ,	VZ.								
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.	P								
32	P Facility in sound condition and maintained (floors, walls, ceilings, plumbing, lighting, ventilation, etc.).	VID.								
	Observations and Corrective Actions									
	Violation Corrective Ac	tion								
1		00	100	mer	111 0	too	1			
B	A Little 150 total Others of the State of th	(1)	1111	1710	2-	501				
ex	returne danger zone measured between 41°FCZ belows a 135°F and	1 (1)	non	CKE	9.0	3 1				
5	50°F - 79°F Such as but not limited	-			-					
6	2: Shredded Cheese. = 79°F, My shelled									
01	Pas = GDF, delisticed ham = 59°E									
0	sliced tieting = 50°F COS: all forces dis-									
0	arded by DIC.									
(12	DEMPlayer yedications and hand - Stone all chanicals &	- Store all Mexicals & employee medication								
10	similare stored above from for squirate and away for	servicate and away from find for customly								
2	ustrajers inside extense ire bin on below (reg. Ch.	7)								
4	works unit cas, all products relocated									
(2	Employees personal toods good - stone all personal toods	Ce	DONC	He,	awa	ey,	and			
1	aside ice bin us food for customers below food for customers	, (RO	9.	3 - 2	07)	J				
0	Ds. Daspart food relocated									
12	sanitize pucket wisolution Stored in - Store chanicals auxula b	ele	N Fo	od 1	FOR C	usto	med			
	Comments									
2	emspection must be conducted at sNHD Main office 280 S. Dreat	ur pr	10R	to 1	1/23	120				
Fo	ood establishment regulations (2010) and educational materials available at www.SouthernNevadaHealthDistrict.org/f									
5	Section 1 Demerits 5 0 to 10 demerits = A (Identical consecutive critical or major violations shall be down			-						
5	Section 2 Demerits 11 to 20 demerits or identical consecutive critical or major violation = B; Re-inspection requested. Inspection must result in 10 demerits or less, with no identical repeat critical or major violation = B; Re-inspection must result in 10 demerits or less, with no identical repeat critical or major violation = B; Re-inspection must result in 10 demerits or less, with no identical repeat critical or major violation = B; Re-inspection = B; Re-inspec	on after	15 da	ys, or s	sooner	if				
L	Failure on re-inspection will result in a "C" grade with associated fee and may									
1	nspection Grade 21 to 40 demerits = C; Re-inspection after 15 days, or sooner if requested. Inspection						ss,			
	with no identical repeat critical or major violations. Failure on re-inspection will rewith associated fee and may require a supervisory conference.	sultin	a clos	ure of	tne fac	ility				
	epeat critical or major violation. 41 or more demerits = Closure or Imminent Health Hazard requiring closure; All foo	d activi	ties mu	ust rem	ain sus	pende	d			
201	until approved by Health Authority. Re-inspection upon operator request must result in 10 demerits or less, with no 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. Inspector name and phone number:			Re	viewed	By:	1			
	Received by (signature) Received by (printed) Received by (printed) Received by (printed)			SELECTION OF THE PERSON OF THE	5/4/5/D	5415182				
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	arolinay. (6.									



SOUTHERN NEVADA HEALTH DISTRICT

SUPPLEMENTAL INSPECTION REPORT
280 SOUTH DECATUR BLVD • LAS VEGAS, NV 89107 • 702-759-1110 (DIRECT) • 702-759-1000 (24 HOURS)

FACILITY INFORMATION							
PERMIT#	ESTABLSIHMENT NAME	DATE					
PRODUIOS	Sammy's Food Truck # 10	11/2/20					

Observations an	d Corrective Actions
Violation	Corrective Action
action @ 7585 Commercial Way	
Pric observed manually ware-	- Peror to Start of Manual warewashing,
washing dishes at 3 compartment	3 comperement sink must be properly
sink that was not properly setup	Setup (leg. 4.4)
3 ,	
10 3 large windows for ceiling of	Provide screened windows to prevent
mobile, unit observed open without	Entry of pests (Req. 6-202)
SCREENS; 3 of 3 service windows	
w/o Gereens	
A Cold plate unit the obscered	- Repaire could plate to hold refrigeration
partially thanked, blower unit	at 410 F or below as Required
operating at 52°F per min/max	(Reg. 4-2)
thermonicter	
FX Note: Any additional rold holding	
violations due to madequate re-	
frangeration will require the cold	
plate to be changed out with	
Commercial grade NSF or equivalent	
noteigeration. prope	
(4) NO functioning thermometer avail-	Provide projectly collibrated and function
able to onece to food temperatu	
	mours (2eg. 4-302.15)
dis ying 20°F while. Min/Max	replace, retrinerator thermometer
thermometer read & S2°F	Ensure regnigerator thermometer is
	Property function
	- Provide enployee Health Policy ENSUM
health policy to Health Authority	to know symptoms related to
related to ford were inness	Preventing food borne inness outbreak
altoneak prevention	(lg. 2-2)