



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

Table with facility information including permit # (PR0009492), establishment name (Baskin Robbins Ice Cream #4359), phone # ((702) 564-7482), est. square footage (700), primary EHS (EE7001385), address (510 S Boulder HWY, Henderson, NV 89015-7512), risk cat. (2), P.E. code (1006), district (21), location, permit status (ACTIVE), and contact person (Jennifer Holloway).

Table with current service details: EHS (EE7001385), service (Routine Inspection), date (2/19/2021), time in (11:05AM), time out (12:25PM), demerits (16), final grade (Closed), travel min (35), inspection result (Closed with Fees), sewer (M), water (M).

SPECIAL NOTES: NSD
In = In compliance OUT = Not in compliance COS = Corrected on-site during inspection N/O = Not observed N/A = Not applicable R = Repeat violation

Table for Imminent Health Hazards-Notify SNHD and Cease Operations as Directed. Columns include hazard type (A-J) and compliance status (IN, OUT, COS, NO, NA, R). Hazard F (Lack of adequate employee toilets) is marked with a black square.

SECTION 1 - The Critical Violations listed below are to be assessed 5 demerits for each violation. Table with 7 columns (IN, OUT, COS, NO, NA, R) and 9 rows of violations (1-9).

SECTION 2 - The Major Violations listed below are to be assessed 3 demerits for each violation. Table with 7 columns (IN, OUT, COS, NO, NA, R) and 12 rows of violations (10-22).

|    |  |   |                          |                          |                          |                          |                          |
|----|--|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 23 | 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. | ■ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|----|--|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|

| SECTION 3 - Good Food Management Practices to Prevent Unsanitary Conditions |  | IN | OUT | NA |  |  |  |
|---|--|----|-----|----|--|--|--|
|---|--|----|-----|----|--|--|--|

|    |   |                          |                          |                          |                          |                          |                          |
|----|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 24 | Acceptable personal hygiene practices, clean outer garments, proper hair restraints used. Living quarters and child care completely separated from food service.  | ■                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 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. | ■                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26 | Facilities for washing and sanitizing kitchenware approved, adequate, properly constructed, maintained and operated.  | ■                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 27 | Appropriate sanitizer test kits provided and used. Equipment and ware washing thermometer(s) are required. Wiping cloths and linens stored and used properly.   | ■                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28 | Small wares and portable appliances approved, properly designed, in good repair.  | ■                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29 | Utensils, equipment, and single serve items properly handled, stored, and dispensed.  | ■                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 30 | Nonfood contact surfaces and equipment properly constructed, installed, maintained and clean.   | <input type="checkbox"/> | ■                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 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.             | ■                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 32 | Facility in sound condition and maintained (floors, walls, ceilings, plumbing, lighting, ventilation, etc.).  | ■                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| 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 | Comment |
| Milk  |          | 35.00 F     | CH      |

| VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS |
|---|
|---|

| Item No | Observations & Corrective Actions  |
|---------|--|
| F       | Lack of adequate employee handwashing facilities. (5-502.12, 204.11) SEE VIOLATIONS #2, 15   |
| 2       | Violation: Lack of proper hand washing observed because no convenient hand sink is available or installed. SEE VIOLATION F, 15<br>Inspector Observation: Facility sole hand washing sink in the food handling area not operational.<br>Corrective Action: Provide properly stocked hand sink(s) where required and approved by SNHD Plan Review department. (2-2; 2-3; 3-301.11; 3-304)  |
| 6       | Violation: Metal cans with critical or major defects.<br>Inspector Observation: 1 large can of carmel topping on prep table and 1 large can of chocolate topping on shelf in dry storage with major dents on top/bottom seam.<br>COS: Cans removed from service to be returned/discarded.<br>Corrective Action: Maintain foods free from adulteration. Adulterated foods shall not be offered for sale or human consumption. Remove defective cans from use/storage, return or discard. (1-202; 3-101.11; 3-202.12)                                  |
| 13      | Violation: Employee open drinks or food stored on or over food or food contact surfaces.<br>Inspector Observation: Employee uncovered drink stored in reach in cooler near hand sink above food for the establishment.<br>COS: Drink moved to bottom shelf and covered.<br>Corrective Action: Protect food from contamination. Store all employee food or drink under and away from food and food contact surfaces. Provide drinks in containers that prevent mouth/hand contamination such as a cup with lid and straw. (2-401; 3-306; 3-304.11; 3) |
| 15      | Violation: Hand sink not operational due to disrepair. SEE VIOLATION F, 2<br>Inspector Observation: Sole hand sink in food area in disrepair and not operational; staff report sink has been backing up and have been using the restroom hand sink. A plumber was called but has not arrived to fix the drain.<br>Corrective Action: Repair and maintain all hand sinks functional when facility is in operation. (5-202)  |
| 30      | Violation: Nonfood contact surfaces of equipment are not maintained clean and kept in good repair.<br>Inspector Observation: Surfaces under gaskets of non-operational counter reach-in freezer door dirty; surface around ice cream carton cutter stand bear food debris and not sealed to counter.<br>Corrective Action: Maintain clean and in good repair; seal. (4-410; 4-2)   |

**Overall Inspection Comments:**  
 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 corrective action has been taken and the imminent health hazard has been eliminated and this has been verified by SNHD. Contact Justin Hinsen at [hinsen@snhd.org](mailto:hinsen@snhd.org) or at (702) 759-1110 to schedule a re-inspection. A facility closure fee of \$1,400 must be paid at the 280 S. Decatur Blvd SNHD office prior to re-inspection. The invoice may also be paid online by visiting <http://www.snhd.info/eh/payment> using the invoice number: IN0263187.

The Imminent health hazard must be corrected and the inspection must result in 10 demerits or less with all critical and major violations corrected. Failure on the re-inspection may result in additional fees, continued closed status, and/or further administrative action.

Re-Opening Inspection after an Imminent Health Hazard Checklist provided.

The Southern Nevada Health District has instituted changes to operations in compliance with recent directives announced by Governor Steve Sisolak. Food Handler card services are temporarily unavailable at this time. Please visit [www.snhd.info](http://www.snhd.info) for news and updates regarding planned re-opening. During the closure, first time Food Handler Card applicants, renewing clients regardless of expiration date, and those needing duplicate Food Handler Cards are able to work until June 30, 2021. Please call (702) 759-1000 with any questions.



Current Health Permits can be printed here after any applicable fees have been paid:


<https://www.southernnevadahealthdistrict.org/permits-and-regulations/environmental-health-invoice-payment/environmental-health-print-permit/>

You can stay up to date on any SNHD guidance for food establishments and various posters by visiting [www.snhd.info/reopen](http://www.snhd.info/reopen). There you can sign up for updates by providing your e-mail address.

Due to social distancing requirements of COVID-19, this form was reviewed, but not signed by the person in charge (PIC).

Food establishment regulations (2010) and educational materials available at [www.SouthernNevadaHealthDistrict.org/ferl](http://www.SouthernNevadaHealthDistrict.org/ferl)

|   |            |  |
|---|------------|--|
| Section 1 Demerits  | 10         | <p>0 to 10 demerits = A (Identical consecutive critical or major violations shall be downgraded to next lower grade.)</p> <p>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. <b>Failure on re-inspection will result in a "C" grade with associated fee and may require a supervisory conference.</b></p> <p>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. <b>Failure on re-inspection will result in a closure of the facility with associated fee and may require a supervisory conference.</b></p> <p>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 identical repeat critical or major violations. <b>Failure on re-inspection will result in continued closed status with associated fee and may require a supervisory conference.</b></p> |
| Section 2 Demerits  | 6          |  |
| Total Demerits  | 16         |  |
| Initial Inspection Grade  | Closed     |  |
| <input type="checkbox"/> This grade resulted from a repeat critical or major violation. |            |  |
| Reinspection Fee:   | \$1,400.00 | Inspector name: Justin Hinsen  |
| Fee required to be paid within 10 business days or prior to reinspection                |            |  |

| Received by (signature) | Received by (printed)                             | EHS (signature)  |
|-------------------------|---|--|
|                         | Gabrielle Holloway-PIC<br><br>SEE COMMENT SECTION | <br>Justin Hinsen |

Your signature on this form: 1) Does not constitute agreement with its contents. You may discuss the contents of this report with the department by contacting the supervisor at the Environmental Health office indicated on page one of this report. Until such time as a decision is rendered by this department, the contents of this report shall remain in effect; and 2) Acknowledges that this inspection report will be distributed by either email, fax, or postal delivery (of your choosing) within 1 business day.



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](http://www.SNHD.info/foodhandler)

[NOTICE OF BUSINESS CLOSURE FORM](#)

[ESTABLISHMENT FILE UPDATE FORM](#)