



FOOD ESTABLISHMENT INSPECTION

SOUTHERN NEVADA HEALTH DISTRICT

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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

| | | | | | | | | | | | |
|---|------------------------------|--------------------------------|---------------------|----------------|----------|-------------------------|-------------|------------|-------------------|-------|-------|
| PERMIT # | ESTABLISHMENT NAME | PHONE # | EST. SQUARE FOOTAGE | PRIMARY EHS | | | | | | | |
| PR0108528 | KUNG PAO WOK KUNG PAO WOK | (778) 688-0089 | 500 | EE7001208 | | | | | | | |
| ADDRESS 755 S GRAND CENTRAL PKWY SP 1475 Las Vegas, NV 89106 | | RISK CAT. 3 | P.E. CODE 1003 | DISTRICT 02 | LOCATION | PERMIT STATUS ACTIVE | | | | | |
| NEVADA CLEAN INDOOR AIR ACT: <input type="checkbox"/> COMPLIANCE REQUIRED <input type="checkbox"/> EXEMPT | | CONTACT PERSON: Lucia Martinez | | | | | | | | | |
| CURRENT SERVICE | EHS | SERVICE | DATE | TIME IN | TIME OUT | DEMERITS | FINAL GRADE | TRAVEL MIN | INSPECTION RESULT | SEWER | WATER |
| | EE7001166 | Routine Inspection | 6/04/2021 | 1:05PM | 3:30PM | 25 | Closed | 0 | Closed with Fees | M | M |

SPECIAL NOTES: RPZ BIB 4/15

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

Imminent Health Hazards-Notify SNHD and Cease Operations as Directed

OUT

| | | | | | | | |
|---|---|--|-------------------------------------|--|--|--|--|
| A | Interruption of electrical service | | <input type="checkbox"/> | | | | |
| B | No potable water or hot water | | <input type="checkbox"/> | | | | |
| C | Gross unsanitary occurrences or conditions including pest infestation | | <input checked="" type="checkbox"/> | | | | |
| D | Sewage or liquid waste not disposed of in an approved manner | | <input type="checkbox"/> | | | | |
| E | Lack of adequate refrigeration | | <input type="checkbox"/> | | | | |
| F | Lack of adequate employee toilets and handwashing facilities | | <input type="checkbox"/> | | | | |
| G | Misuse of poisonous or toxic materials | | <input type="checkbox"/> | | | | |
| H | Suspected foodborne illness outbreak | | <input type="checkbox"/> | | | | |
| I | Emergency such as fire and/or flood | | <input type="checkbox"/> | | | | |
| J | Other condition or circumstance that may endanger public health | | <input type="checkbox"/> | | | | |

SECTION 1 - The Critical Violations listed below are to be assessed 5 demerits for each violation

IN OUT COS NO NA R

| | | | | | | | |
|---|---|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| 1 | Verifiable time as a control with approved procedure when in use. Operational plan, waiver or variance approved and followed when required. Operating within the parameters of the health permit. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | Handwashing (as required, when required, proper glove use, no bare hand contact of ready to eat foods). Foodhandler health restrictions as required. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 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. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 | Hot and cold running water from approved source as required. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 | Imminently dangerous cross connection or backflow. Waste water and sewage disposed into public sewer or approved facility. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 | Food wholesome; not spoiled, contaminated, or adulterated. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 | PHF/TCSs cooked and reheated to proper temperatures. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 | PHF/TCSs properly cooled. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9 | PHF/TCSs at proper temperatures during storage, display, service, transport, and holding. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SECTION 2 - The Major Violations listed below are to be assessed 3 demerits for each violation

IN OUT COS NO NA R

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|----|--|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 10 | Food and warewashing equipment approved, properly designed, constructed and installed. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11 | Food protected from potential contamination during storage and preparation. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12 | Food protected from potential contamination by chemicals. Toxic items properly labeled, stored and used. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13 | Food protected from potential contamination by employees and consumers. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 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. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15 | Handwashing facilities adequate in number, stocked, accessible, and limited to handwashing only. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16 | Effective pest control measures. Animals restricted as required. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17 | Hot and cold holding equipment present; properly designed, maintained and operated. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18 | Accurate thermometers (stem & hot/cold holding) provided and used. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19 | PHF/TCSs properly thawed. Fruits and vegetables washed prior to preparation or service. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20 | Single use items not reused or misused. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21 | Person in charge available and knowledgeable/management certification. Foodhandler card as required. Facility has an effective employee health policy. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22 | Backflow prevention devices and methods in place and maintained. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 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 checked="" type="checkbox"/> | <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. | ■ | □ | | | □ | |
| 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. | ■ | □ | | | □ | |
| 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 | Comment |
|-------------|----------|-------------|---------|
| shrimp | | 40.00 F | CH |
| raw chicken | | 42.00 F | CH |
| noodles | | 150.00 F | HH |
| chicken | | 160.00 F | HH |



VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS

| Item No | Observations & Corrective Actions |
|---------|---|
| 8 | <p>Violation: PHF (TCS) not cooled properly. Inspector Observation: Chicken cooked at approximated 10am per PIC observed at 52 degrees at 2:30pm and 50 degrees F at 4pm. Corrective Action: Rapidly cool PHF (TCS) from 135-70 degrees F within 2 hours and from 70-41 degrees F within an additional 4 hours. (3-501.14; 3-501.15; 3-502) COS: voluntarily discarded.</p> <p>Note: PIC states foods cool while being served at usually run out before cooling finishes; Discussed with PIC that cooling must be achieved at rate to meet the cooling parameter or be held using time as a control if cooling is not properly monitored and controlled.</p> |
| 9 | <p>Violation: PHF (TCS) between 41 degrees F and 135 degrees F except during preparation, cooking, cooling or when time is used as a control. Inspector Observation: Precooked noodles observed at 52 degrees F in reach in cooler. Corrective Action: Maintain hot foods at 135 degrees F or warmer and cold foods at 41 degrees F or colder. (3-501.16; 3-501.14; 3-502) COS: voluntarily discarded.</p> |
| 12 | <p>Violation: Container of chemical with danger statements not labeled with danger statements. Inspector Observation: spray bottles with various chemicals observed with missing labels. Corrective Action: Protect food from contamination. Label properly, including danger statements. (Chapter 7; 4-201.15; 4-30)</p> |
| 14 | <p>Violation: Sanitizer bucket(s) or in use sanitizer spray bottle(s) found to have no or low concentration of sanitizer. Inspector Observation: one of two sanitizer buckets observed with low (less than 50 ppm Chlorine) sanitizer upon arrival. Corrective Action: Provide sanitizer at proper concentration. (4.4; 3-304; 4-201.16) COS: sanitizer concentration adjust to proper concentraion.</p> <p>Violation: During manual ware washing, actively washing in 1st compartment with water <110 degrees F (or as specified in manufacturer's directions) or water not changed when excessively dirty, greasy or no longer has suds. Inspector Observation: observed food handler washing cutting board with washing water at 95 degrees F. Corrective Action: Set up 3-compartment sink properly, wash with hot soapy water (minimum 110 degrees F) in first compartment. Change water when excessively dirty, greasy or no longer has suds. (4.4; 3-304; 4-201.16)</p> <p>Violation: During manual ware washing, water for rinsing (2nd compartment) not clear or sink not clean. Inspector Observation: Observed pan with food debris, noodles soaking in 2nd compartment of 3 comp sink while actively washing cutting boards. Corrective Action: Set up 3-compartment sink properly, rinse in clean water in second compartment. Change water when no longer clean/clear. (4.4; 3-304; 4-201.16)</p> <p>Violation: During manual ware washing, staff not allowing utensils/equipment to soak for the required contact time for the sanitizer. Inspector Observation: observed food handler splashing sanitizer solution onto cutting boards, allowing sanitizer to immediately drain off, not allowing enough contact time chlorine sanitizer. Corrective Action: Follow proper manual ware washing procedures. Sanitize at proper concentration for required contact time in third compartment. (4.4; 3-304; 4-201.16) COS: cutting board re-sanitized</p> |
| 16 | <p>Violation: Pests observed in facility. Inspector Observation: multiple multi-generation cockroaches observed in facility; nesting of about 20-30 observed on compressor of wok station between unit and wall, others observed on floors underneath wok station, underneath prep station in back area, on handsink splash guard, and trash can. Corrective Action: Institute effective pest control measures to prevent the entry of pests and eliminate the presence of any observed pest activity. (6-202.13; 6-202.15; 6-501)</p> <p>Violation: Conditions that allow the harboring or feeding of pests observed. Inspector Observation: grease build up on equipment and floors through out hotline and back prep area, water pooling under wok station and 3 comp sink. Corrective Action: Institute effective pest control measures to prevent the entry of pests and eliminate the presence of any observed pest activity. (6-202.13; 6-202.15; 6-501)</p> <p>Within 48 hours: Deep clean floors and equipment. Contact certified pest control for pest control services</p> |
| 17 | <p>Violation: Refrigerator not able to maintain PHF/TCS food at required temperature due to operational errors. Inspector Observation: reach in on hotline across from rice cooker and cooking equipment unable to maintain foods at or below 41 degrees F due to opening and closing of doors combined with heat from cooking equipment. Corrective Action: Repair to maintain cold foods at 41 degrees F or colder. Maintain equipment in good repair and use only as designed. (4-2; 3-501.11; 6-202.11)</p> <p>Note: Unit observed at 43 degrees F when doors remained closed.</p> |
| 18 | <p>Violation: Thermometer missing or improperly installed in enclosed hot and/or cold holding equipment. Inspector Observation: Thermometer missing from reach in cooler across from rice cooker. Corrective Action: Provide appropriate thermometers accurate to ± 2 degrees F properly located and permanently affixed inside hot and cold holding equipment. (4-302.13; 4-202.11)</p> |



- 32 Violation: Leaks observed in plumbing and fixtures. Inspector Observation: Leak observed at 3 comp sink drain pipe. Drain pipe to hand sink in prep area, loose/falling off.
Corrective Action: Repair. (Chapter 5; 6-1; 6-2; 6-3;)
- Violation: Walls are in disrepair. Inspector Observation: holes observed in walls Corrective Action: Maintain clean and in good repair. (Chapter 5; 6-1; 6-2; 6-3;)
- Violation: Facility does not have at least 50 foot-candles of light where food handlers are working with food or in ware washing areas. Inspector Observation: hot line observed dimly lit. Corrective Action: Provide at least 50 foot-candles of light where food handlers are working with food and in ware washing areas. (Chapter 5; 6-1; 6-2; 6-3;)

Overall Inspection Comments:

Notice of Delivery:

Delivery of Invoice



Past due invoices for 2019 and 2020 reviewed onsite with PIC.

A copy of your facility invoice is attached to the email providing this report. The facility has 5 business days to pay the delinquent invoice amount in full. Payments can be made in person at Southern Nevada Health District at 280 S. Decatur Blvd, Las Vegas NV 89107, or online at the following link:

<https://www.southernnevadahealthdistrict.org/payment/ehinvoice>, by entering your invoice ID IN0000000. All unpaid invoices will be turned over to Clark County Collections for further processing. Failure to pay the invoice may result in closure until fees are paid and/or possible deletion of all applicable permits. (2010 SNHD Food Regulations non-payment of fees – 8-202.12).

Opt in today to go paperless and receive invoices from the Southern Nevada Health District electronically. Help us cut down on paper use and receive timely reminders of your payment due date direct to your email inbox www.snhd.info/eh-invoice.

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

| | | |
|---|-------------------------------|--|
| Section 1 Demerits | 10 | 0 to 10 demerits = A (Identical consecutive critical or major violations shall be downgraded to next lower grade.) |
| Section 2 Demerits | 15 | 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. |
| Total Demerits | 25 | Failure on re-inspection will result in a "C" grade with associated fee and may require a supervisory conference. |
| 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 closure of the facility with associated fee and may require a supervisory conference. |
| <input type="checkbox"/> This grade resulted from a repeat critical or major violation. | | 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. Failure on re-inspection will result in continued closed status with associated fee and may require a supervisory conference. |
| Reinspection Fee: | \$1,400.00 | |
| Fee required to be paid within 10 business days or prior to reinspection | Inspector name: Mikki Knowles | |
| Received by (signature) | | Received by (printed) |
|  | | Lucy Martinez |
| | | Manager |
| | | EHS (signature) |
| | |  |
| | | Mikki Knowles |

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.

5104



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](#)