



SOUTHERN NEVADA HEALTH DISTRICT
FOOD ESTABLISHMENT INSPECTION

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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							
PR0124149	TACOS LA CHATA TACOS LA CHATA	(323) 308-8668		EE7001083							
ADDRESS 439 ROCK QUARRY WAY North Las Vegas, NV 89032	RISK CAT. 2	P.E. CODE 1083	DISTRICT 35	LOCATION PERMIT STATUS ACTIVE							
NEVADA CLEAN INDOOR AIR ACT: <input type="checkbox"/> COMPLIANCE REQUIRED <input type="checkbox"/> EXEMPT		CONTACT PERSON: Ramon Lozano									
CURRENT SERVICE	EHS	SERVICE	DATE	TIME IN	TIME OUT	DEMERITS	FINAL GRADE	TRAVEL MIN	INSPECTION RESULT	SEWER	WATER
	EE7001378	Routine Inspection	10/23/2019	8:10PM	9:30PM	37	Closed	15	Closed with Fees	M	M

SPECIAL NOTES:

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 checked="" type="checkbox"/>				
C	Gross unsanitary occurrences or conditions including pest infestation		<input type="checkbox"/>				
D	Sewage or liquid waste not disposed of in an approved manner		<input type="checkbox"/>				
E	Lack of adequate refrigeration		<input checked="" 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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Hot and cold running water from approved source as required.	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	PHF/TCSs properly cooled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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

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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	Effective pest control measures. Animals restricted as required.	<input checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
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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 checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<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 checked="" 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.

No Temperature Observations



VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS

Item No	Observations & Corrective Actions
B	IMMINENT HEALTH HAZARD: NO WATER TO ENTIRE FACILITY. SEE VIOLATION #4 FOR MORE INFORMATION.
E	IMMINENT HEALTH HAZARD: LACK OF REFRIGERATION. SEE VIOLATION #17 FOR MORE INFORMATION.
1	<p>Violation: Annual itinerant/mobile vendor operating without an approved service depot, commissary or support kitchen.</p> <p>Inspector Observation: Facility disclosed that it does not currently have access to a commissary. Commissary letter provided expired in June 2018.</p> <p>Corrective Action: Operate within the parameters of the health permit. Cease and desist operation until a commissary or support kitchen provided and approved. (3-501.19; 3-302.13; 3-502)</p> <p>Violation: Food stored in an unapproved area of a permitted food establishment or outside of the permitted food establishment.</p> <p>Inspector Observation: Facility operating outside of its permit. Facility has a salsa bar outside of food truck without approval.</p> <p>Corrective Action: Cease and desist operation. Store food only in approved areas. (3-501.19; 3-302.13; 3-502)</p>
2	<p>Violation: Food handler using bare hands to handle ready-to-eat food.</p> <p>Inspector Observation: On arrival, person in charge preparing ready-to-eat tacos with bare hands.</p> <p>COS: Voluntarily discarded tacos and remade tacos with utensils.</p> <p>NOTE: PERSON IN CHARGE CLAIMS TO NOT HAVE DISPOSABLE GLOVES ON THE TRUCK.</p> <p>Corrective Action: Eliminate bare hand contact with ready-to-eat foods, except when washing fruits and vegetables. (2-2; 2-3; 3-301.11; 3-304)</p>
3	<p>Violation: Facility selling homemade foods.</p> <p>Inspector Observation: Facility selling homemade foods which include:</p> <p>A) Refried beans</p> <p>B) All salsas</p> <p>C) Cooked rice</p> <p>COS: Voluntarily discarded.</p> <p>Corrective Action: Ensure that all foods are received from an approved source. (3-201.11; 3-202; 3-203.11)</p>
4	<p>Violation: No hot water to entire facility.</p> <p>Inspector Observation: On arrival, no water to the entire truck.</p> <p>Corrective Action: Provide water at a minimum of 120 degrees F at 3-compartment sink(s) and minimum of 100 degrees F at hand sink(s). (5-101; 5-102; 5-103)</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.</p> <p>Inspector Observation: Multiple items measured in the temperature danger zone (41F-135F). Items include:</p> <p>A) Cooked onions measured 89F</p> <p>B) Cooked pepper measured 102F</p> <p>C) Raw beef measured 55F</p> <p>D) Raw suadero (lining of beef ribs) measured 53F</p> <p>E) Raw chicken measured at 51F</p> <p>COS: All items voluntarily discarded.</p> <p>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)</p>
14	<p>Violation: Complete absence of sanitizer solution in open food areas during active food preparation.</p> <p>Corrective Action: Provide and maintain approved sanitizer solution in all work areas with open food. (4.4; 3-304; 4-201.16)</p>
15	<p>Violation: Hand sink blocked inhibiting access.</p> <p>Inspector Observation: On arrival, hand sink completely inaccessible because door is tied open blocking door.</p> <p>COS: Unblocked hand sink.</p> <p>Corrective Action: Keep hand sinks easily accessible at all times. (5-202)</p>
17	<p>Violation: Hot and cold holding equipment with mechanical problems or in obvious disrepair which cannot maintain temperature.</p> <p>Inspector Observation: Reach-in refrigerator not functioning and turned off on arrival. Per person in charge, the reach-in refrigeration is completely non-functional. FACILITY RELYING SOLELY ON SMALL MAKE TABLE WHICH MEASURED 46F VERIFIED USING A MIN/MAX THERMOMETER. LACK OF ADEQUATE REFRIGERATION.</p> <p>Corrective Action: Equipment red-tagged, remove equipment from service until approved for use by SNHD. Repair equipment to maintain foods at required temperatures (≥ 41 degrees F). If placed back in service without Health Authority approval, the facility may be downgraded to the next lower grade and applicable fees assessed (8-208.11). (4-2; 3-501.11; 6-202.11)</p>
18	<p>Violation: Probe-type thermometer NOT available to food handler.</p> <p>Inspector Observation: No thermometer available on food truck.</p> <p>Corrective Action: Provide an appropriate, properly calibrated stem thermometer accurate to ± 2 degrees F to monitor food temperatures. (4-302.13; 4-202.11)</p>
32	<p>Violation: Ceilings or ceiling tiles are dirty.</p> <p>Inspector Observation: Thick grease build up on ceiling.</p> <p>Corrective Action: Maintain clean and in good repair. (Chapter 5; 6-1; 6-2; 6-3;)</p>

Overall Inspection Comments:



Establishment closed. A closure fee of \$716 has been assessed. All food activities must remain suspended until corrective action has been taken to eliminate/correct the hazard. The fee must be paid prior to scheduling the re-inspection during normal business hours (Mon-Fri 8a-4:30p excluding holidays). Please refer to the invoice number when completing payment. The invoice number will arrive to you in a separate email. The operator of the facility may then call 702-759-1110 to schedule inspection.

Spanish translation provided.



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

Section 1 Demerits	25	0 to 10 demerits = A (Identical consecutive critical or major violations shall be downgraded to next lower grade.)
Section 2 Demerits	12	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 conference.
Total Demerits	37	
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:	\$716.00	
Fee required to be paid within 10 business days or prior to reinspection		Inspector name: Kelsi Sullivan

Received by (signature)	Received by (printed)	EHS (signature)
	Ramon Lozano Owner	 Kelsi Sullivan

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 V18

FIGHT the BITE



HELP PREVENT DISEASES THAT CAN BE SPREAD BY MOSQUITOES

Eliminate standing water

Prevent mosquito bites

Report mosquito activity

In August, the Southern Nevada Health District declared an outbreak of West Nile virus. This season, the highest number of human cases have been reported since the disease was first detected in the state in 2004. In addition to the high number of cases, many of those who have been ill have had the more serious neuroinvasive form of the illness.

West Nile virus is transmitted by the bite of an infected mosquito. The illness is not spread person-to-person. The best way to keep from getting sick is to prevent mosquito bites. People can protect themselves and their families by taking the following precautions:

- When outdoors, use [Environmental Protection Agency \(EPA\)-registered](#) insect repellents containing DEET, Picaridin, IR3535, Oil of lemon eucalyptus (OLE), or 2-undecanone.
- Wear pants and long-sleeved shirts when outdoors. Treat clothing and outdoor gear with repellent.
- Make sure doors and windows have tight-fitting screens without tears or holes.
- Prevent mosquito breeding by eliminating areas of standing water around homes, including unmaintained swimming pools.

Additional tips and more information about West Nile virus are available on the Health District website at www.snhd.info/west-nile and on the Centers for Disease Control and Prevention website at www.cdc.gov/westnile/prevention/index.html.

If you think you or your family member have West Nile Virus, please contact your doctor.

Residents can report mosquito activity to the Mosquito Surveillance Program at 702-759-1633. Updated information about the Health District's surveillance activities is available each week at www.snhd.info/wn-updates.