



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							
PR0013717	JW Marriott/RAMPART Hotel & Casino JW Marriott Bakery	(702) 869-7381		EE7001291							
ADDRESS 221 N Rampart BLVD Las Vegas, NV 89145-5722	RISK CAT. 2	P.E. CODE 1034	DISTRICT 06	LOCATION PERMIT STATUS ACTIVE							
NEVADA CLEAN INDOOR AIR ACT: <input checked="" type="checkbox"/> COMPLIANCE REQUIRED <input type="checkbox"/> EXEMPT		CONTACT PERSON:									
CURRENT SERVICE	EHS	SERVICE	DATE	TIME IN	TIME OUT	DEMERITS	FINAL GRADE	TRAVEL MIN	INSPECTION RESULT	SEWER	WATER
	EE7001291	Routine Inspection	3/28/2022	12:30PM	1:30PM	24	Closed	0	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 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 checked="" 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 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 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Food wholesome; not spoiled, contaminated, or adulterated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	PHF/TCSs at proper temperatures during storage, display, service, transport, and holding.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	Hot and cold holding equipment present; properly designed, maintained and operated.	<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input 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"/>



 FOOD ESTABLISHMENT INSPECTION (Cat 10) 2013 PR0013717		Facility Name: JW Marriott/RAMPART Hotel & Casino- JW Marriott Bakery		Date: 03/28/2022		Page 2 of 4	
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			
milk	walk in		38.00 F	CH(IR)			
hand sink			112.00 F				
VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS							
Item No	Observations & Corrective Actions						
D	Violation: Sewage backing up out of floor sinks or drains. Inspector Observation: Dark colored wastewater with strong malodors overflowing from floor sink affecting area under only hand sink and three compartment sink. ALL FOOD OPERATIONS IMMEDIATELY CEASE AND DESISTED WITH ALL FOODS PREPARED TODAY VOLUNTARILY DISCARDED. Refer to Violation #5 for additional observations. Corrective Action: Dispose of all waste water into an approved sewer system. Repair. (5-205; 5-403.11)						
2	Violation: Food handler using bare hands to handle ready-to-eat food. Inspector Observation: Food handler with bare hands slicing strawberries to be placed within cups of ready to eat (RTE) parfaits. COS: Strawberries and parfaits voluntarily discarded. Refer to Violation #5 for additional observations. 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)						
5	Violation: Sewage backing up out of floor sinks or drains. Inspector Observation: Upon inspector arrival, multiple food handlers preparing food while dark colored wastewater with strong malodors overflowing from floor sink, affecting area under only hand sink and three compartment sink; food handler standing in wastewater while washing hands at only hand sink in Bakery area. Food handler informed inspector of maintenance call submitted "this morning" for drain back up; Steward later informed inspector that call was never submitted to maintenance. Additionally, two drain lines terminating into aforementioned floor sink. Per maintenance, hard drain line is condensate from walk in; black rubber line originating from somewhere in ceiling area. ALL FOOD OPERATIONS IMMEDIATELY CEASE AND DESISTED WITH ALL FOODS PREPARED TODAY VOLUNTARILY DISCARDED. AREA MUST BE THOROUGHLY CLEANED AND SANITIZED PRIOR TO SCHEDULED REINSPECTION. Corrective Action: Dispose of all waste water into an approved sewer system. Repair. (5-205; 5-403.11)						
6	Violation: Ready-to-eat or packaged raw PHF (TCS) held past shelf life of product. Inspector Observation: Large plastic container of dairy based cheesecake mix labeled 3/20 stored on shelf within walk in cooler. COS: Expired food voluntarily removed from walk in for discard. Corrective Action: Do not hold PHF/TCS past use by, sell by or best by date. Remove expired foods from use/storage, return or discard. (1-202; 3-101.11; 3-202.12)						
13	Violation: Employee or customer personal item stored intermingled with food for establishment. Inspector Observation: Employee cell phone stored directly on top on enclosed plastic container of baked goods on active prep table. COS: Improperly stored item relocated. Corrective Action: Protect food from contamination. Store all employee or customer personal food or drink under and away from food for the establishment. (2-401; 3-306; 3-304.11; 3)						
14	Violation: Sanitizer bucket(s) or in use sanitizer spray bottle(s) found to have no or low concentration of sanitizer. Inspector Observation: Sanitizer bucket at prep table with solution less than 200PPM. Corrective Action: Provide sanitizer at proper concentration. (4.4; 3-304; 4-201.16)						
16	Violation: Insect catcher or zapper is unapproved or located above food or food contact surfaces. Inspector Observation: Insect light plugged in and affixed to wall directly above equipment stored on clean drainboard of three compartment sink. COS: Equipment voluntarily unplugged with stated intent to properly relocate and/or remove equipment. Corrective Action: Remove unapproved device or relocate so not above food or food contact surfaces. (6-202.13; 6-202.15; 6-501)						
Overall Inspection Comments:							
Bakery permit closed due to food preparation during an Imminent Health Hazard (IHH), wastewater back up. Closure fee of \$1400. is 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). The operator of the facility may then call REHS Roche at 702-759-0510 to schedule the reinspection. You can pay at the Health District, 280 S. Decatur Blvd., Las Vegas, NV 89107 or online at: https://www.southernnevadahealthdistrict.org/payment/ehinvoice Your invoice # is: IN0290692							
PLEASE BE AWARE THAT A "C" GRADE OR CLOSURE ON NEXT ROUTINE INSPECTION WILL RESULT IN PLACEMENT INTO THE ADMINISTRATIVE PROCESS.							



Inspection accompanied by Exec Steward M Moreno

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

Section 1 Demerits	15	0 to 10 demerits = A (Identical consecutive critical or major violations shall be downgraded to next lower grade.)
Section 2 Demerits	9	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	24	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: Pamela Roche	

Received by (signature)	Received by (printed)	EHS (signature)
	Michael Moreno Executive Steward	 Pamela Roche

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.

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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](#)