



Granbury Health Department - 116 West Bridge St. Retail Food Establishment Inspection Report

Risk Cat.: 100-90=A, 89-80=B, 79-70=C, 69-61=48hr. reinspection, 60 or less=cessation

91

San Code	Mo	Day	Yr	Insp. Time	FPM Certified	Jose Garcia CFN 4/16/2012	Permit No.	13-23485	Risk Cat.	91
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Purpose of Inspection: 1-Compliance 2-Routine 3-Field Investigation 4-Visit 5-Other

Establishment: Papa Chulo's Owner: _____
Physical Address: 1300 S. Morgan St Zip: 76048 Phone: ()

DEMERITS (5 Pts)	Food (PHF) Temperature/Time Requirements Violations Require Immediate Corrective Action	Remarks	COS
	1. Proper Cooling for Cooked/Prepared Food	WICT 1	40.8
	2. Cold Hold (41°F/45°F)	WICT 2	38.9
	3. Hot Hold (135°F) <u>Taco - 143.7° Beans 147.4°</u>	WIF	6.0
	4. Proper Cooking Temperatures per PHF		
	5. Rapid Reheating (165°F in 2 Hrs)		

Food/Temperatures
Employee instructions posted in work area.
Suppliers U.S Foods
First July 2013

DEMERITS (4 Pts)	Personnel/Handling/Source Requirements Violations Require Immediate Corrective Action	Remarks	COS
	6. Personnel with Infections Restricted/Excluded		
	7. Proper/Adequate Handwashing		
	8. Good Hygienic Practices (Eating/Drinking/Smoking/Other)		
	9. Approved Source/Labeling <u>Labeling w clear and visible</u>		
	10. Sound Condition		
	11. Proper Handling of Ready-To-Eat Foods		
	12. Cross-Contamination of Raw/Cooked Foods/Other		
	13. Approved Systems (HACCP Plans/Time as Public Health Control)		
	14. Water Supply - Approved Source/Sufficient Capacity/Hot and Cold Under Pressure		

DEMERITS (3 Pts)	Facility and Equipment Requirements Violations Require Immediate Corrective Action, Not To Exceed 10 Days	Remarks	COS
	15. Equipment Adequate to Maintain Product Temperature		
X	16. Handwash Facilities Adequate and Accessible		
	17. Handwash Facilities with Soap and Towels <u>Handwash sink by dish area</u>		X
	18. No Evidence of Insect Contamination		
X	19. No Evidence of Rodents/Other Animals		
	20. Toxic Items Properly Labeled/Stored/Used <u>Please label all spray bottles</u>		X
	21. Manual Warewashing and Sanitizing at () ppm/temperature		
	22. Mechanical Warewashing and Sanitizing at () ppm/temperature		
	23. Approved Sewage/Wastewater Disposal System, Proper Disposal	<u>Sodium Hypochlorite</u> <u>Sodium Hypochlorite</u>	
X	24. Thermometers Provided/Accurate/Properly Calibrated (± 2°F)	<u>test strips provided</u>	X
	25. Food Contact Surfaces of Equipment and Utensils Cleaned/Sanitized/Good Repair		
	26. Posting of Consumer Advisories (Heimlich/Raw Shellfish Warning/Buffer Plate)		
	27. Food Establishment Permit / FPM Certification		

Subtotals
5 Pts
4 Pts
3 Pts 3-4
25) mop sink hose laying in bottom of sink please secure to wall or cut to top of sink for backflow contamination prevention

Total Demerits: 9
Inspected by: Jean Johnson Print: Jeanie Johnson RS #4515
Received by: X J. Smith Print: _____ Title: _____