

BRAZOS COUNTY HEALTH DISTRICT

201 North Texas Ave. Bryan, TX 77803

www.BrazosHealth.org

Phone: (979) 361-4440 Fax: (979) 361-5759

Retail Food Establishment Inspection Report

Date: 8/9/2024				24	Time In: 3:14 AM			Time Out: 3	:20 AM License/Permit#: RF-000056			F-000056	Ris	Risk Category: Low		Page: 1						
					Purpose	of In	specti	on: [] 1-Com	oliance 🛭 2	-Routine	3-F	ielo	l Inv	esti	igat	tion	ı □ 4-Visit	t 🗆	5-Other		TOTAL SCORE
Purpose of Inspection: ☐ 1-Compliance ☑ 2-Routine ☐ 3 Establishment Name: RF-TEST-(7) Physical Address: NA, T																T	Follow-Up:					
																Yes	✓ No	100				
Compliance Status: Out = not in compliance IN = in compliance NO =								= not														
				Ma																Mark an asterick '*' in ap		ox for R
										Priority Items (3 Points) Violat	ions	Requ	ire Iı	nme	diate	e Co	orrective Action	Not to	o Exceed 3 Days		
Con	plia	nce	e Sta	itus									Co	mpli	ance	Sta	tus					
0	I	N	N	C		Ti				for Food Safet	y	R	O			N				Б 1 И	1.1	R
U N O A O					(F = degrees Fahrenheit)								U	N	O A O					Employee Hea	aitn	
	1			Ü	Proper cooling time and temperature								_	1			2	12. Management,	t, food o	employees and conditional employ	oyees; knowled	lge, responsibilities, and
İ	1				2. Proper Col	ld Holdii	ng temper	ature(41°F	/45°F)					/				reporting 13. Proper use of	f restric	tion and exclusion; No discharge	from eves, no	se, and mouth
3. Proper Hot Holding temperature(135°F)																						
	1				4. Proper coo				II (1650F i)	211				Preventing Contaminiation by Hands								
	1								ding (165°F in 2 dures & record					14. Hands cleaned and properly washed/ Gloves used properly								
	•			ш	o. Time usu i	r done r		oved So		ab,				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)							method properly	
	, 1				7 Food and is	ia a aletair				good condition cofe	and suna dultanata di									Susceptible Population	ons	
	_				parasite destr		neu moni	approved s	ource, rood in	good condition, safe,	and unadditerated,			1				16. Pasteurized fo	foods us	ed; prohibited food not offered P	asteurized egg	s used when required
	1				8. Food Recei	eived at p	proper ten	nperature												Chemicals		
					P	Prote	ction f	rom Co	ntaminat	tion				17. Food additives; approved and properly stored; Washing Fruits & Vege							getables	
1	7				9 Food Senar	rated &	protected	nrevented	during food n	reparation, storage, d	isnlay and tasting			✓ 18. Toxic substances properly identified, stored and used								
	_									Sanitized at ppm/										Water/Plumbing		
	<u>′</u>										emperature			1					n approved source; Plumbing installed; proper backflow device			
	′				11. Proper dis	ispositioi	n or return	ied, previou	ısly served or ı			Щ	<u> </u>	1						Vastewater Disposal System, pro	per disposal	
										Priority Four	dation Items (2	Poir	_					e Corrective Act	tion w	eithin 10 days		
Con												ъ		mpli								n .
O U			N A			De	emons	tration	of Knowl	edge/Personn	el	R	O U	I N	O	N A	o	I	Food	Temperature Contro	ol/Identifi	cation
T				S									T				S	00 D		1		
	1				21. Person in Manager (CF		present, o	lemonstrati	on of knowledg	ge, and perform dutie	s/ Certified Food			1						od used; Equipment Adequate to	Maintain Proc	luct Temperature
	1				22. Food Han	ndler/ no	unauthori	ized person	s/ personnel					1				28. Proper Date N	Markin	g and disposition		
	_			Sa	fe Water.	Reco	rdkeei	oing an	d Food Pa	ckage Labelii	19			1				29. Thermometer	ers prov	ided, accurate, and calibrated; Cl	hemical/Them	nal test strips
	- 1										-8						_	Permit Regu	uirei	nent, Prerequisite fo	r Operati	on
	1								te pressure, sa		15 111 1 1			1./						Permit (Current & Valid)	- • F	
	′				24. Required	records	s available	(shellstock	tags; parasite	destruction); Package	d Food labeled			Ľ							**	
					Conf	forma	nnce wi	ith App	roved Pro	cedures						-				Equipment, and Ven		wad
	1									HACCP plan; Varia	nce obtained for			/				31. Adequate nan	nuwasn	ing facilities: Accessible and pro	perry supplied,	uscu
					specialized processing methods; manufacturer instructions Consumer Advisory									1				32. Food and Non	n-food	Contact surfaces cleanable, prop	erly designed,	constructed, and used
	,				26 Pasting of				•	d foods (Disolosums/	Domindon/Doffor			/				33. Warewashing	g Facili	ties; installed, maintained, used/S	ervice sinkor c	urb cleaning facility
	′				Plate)/ Allerg					ed foods (Disclosure/I								provided				
								Co	re Items (1	Point) Violation	s Require Corre	ctive .	Actio	n No	t to	Exce	eed !	90 Days or Next	t Insp	ection, Whichever Comes	First	
Con												_		mpli								1
O U	N N	O	A A	O			Preve	ntion o	f Food Co	ntamination		R	U	I N		A A				Food Identifica	ntion	R
U T				S									T				S					
	1				34. No Evider	ence of I	Insect cont	amination,	rodent/other a	nimals			L	1				41. Original conta	tainer la	beling (Bulk Food)		
	1				35. Personal	Cleanlin	ness/eating	, drinking o	r tobacco use										F	Physical Facilities		
	/				36. Wiping Cl	loths; pr	roperly use	ed and store	ed									42 M. F. 16		C 1		
H	/			H	37. Environm	nental co	ontaminoti	ion				H	L	′				42. Non-Food Cor				
	_			Ш										<				43. Adequate ven	ntilation	and lighting; designated areas us	sed	
	1				38. Approved	d thawin	ng method							1				44. Garbage and	l Refuse	properly disposed; facilities mai	intained	
						P	Proper	Use of	Utensils				\vdash	1			7	45. Physical facil	ilities in	stalled, maintained, and clean		
	7			П	39. Utensils, e	equipme	ent, & line	ns; properly	y used, stored,	dried, & handled/ In	use utensils;			1				46. Toilet Facilitie	ies: prot	perly constructed, supplied, and c	lean	
	/				40 Single-ser		cinale_uce	articles n	roperly stored	andused								47. Other Violatio				
	_				40. Single-sei	i vice ce	Single-use	ar ucics, p	roperty stored	and used				1				47. Other Violand	IOHS			
Re	cei	ve	d B	y:							Print: Snov	vy U	lbrid	ch						Title: Person In Cha	rge/ Ow	mer
					,	A (\													
					\sim /	X)		1	5													
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In	Inspected By: Print: Oscar							r W	ills	ls Email: sb.susmita003@gmail.com						il.com						
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Establish	ment Name: RF-TEST-(7)	Physical Address: NA, TX,	NA,	00000	License/Permit#: RF-000056	Page: 2	
		TEMPERATU	IDE	OBCEDVATI	ONE		
					UNS		_
Item/ Loc	cation	Ter	mp	Item/ Location		Temp	
123		4:	3	456			38
678		40	0	789			35
679		30	0				
	OF	BSERVATIONS AN	ND	CORRECT	IVE ACTIONS		
Item Number	AN INSPECTION OF YOUR ESTABLIS	HMENT HAS BEEN MADE. YOUR AT	TENT	ION IS DIRECTED T	O THE CONDITIONS OBSERVED AND	NOTED BELOW:	
1	test1						
2	test2						
3	test3						
4	test4						
5	test5						
6	test6						
7	test7						
8	test8						
9	test9						
10	test10						
11	test11						
					Date: 8/	9/2024	
Receive	d By:	Print: Sno	owy L	Ilbrich	Title: Person In C	harge/ Owner	
		ζ					
Inspecto	ed By:	Print: Os	car W	'ills			



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Comment

Where the Inspection report is normally issued within approximately four weeks of the inspection, the initial response is requested within four weeks of the date of issue of the Inspection report. This allows the manufacturer a total of approximately eight weeks from the closing meeting to provide a response. The response is normally reviewed within approximately two weeks after receipt, but this might vary depending on inspector's travel. If a subsequent response is required, the manufacturer is given an additional two weeks response time. If a deficiency/nonconformity is in the process of being addressed but further time is needed to fully implement the corrective actions, the Lead Inspector may determine that the inspection be closed out with a requirement for progress reporting. Examples of circumstances in which progress reporting may be appropriate include but are not limited to: generation of stability data, generation of validation data, facility or equipment refurbishment updates etc. One should be mindful of the definitions of a corrective action as opposed to a correction. A corrective action is an action intended to eliminate the root cause of the deficiency/nonconformity, and thus to prevent recurrence. A correction is an action to eliminate a deficiency/nonconformity, or the individual examples of a grouped deficiency/nonconformity. Following medicines inspections, the manufacturer is required to identify the root cause of all deficiencies that are classified as either critical or major. Following devices inspections, manufacturers are required to identify the root cause for all nonconformities (both major and minor). For each issue, the manufacturer's response should include action taken or proposed to be taken to correct the specific issue (including corrective action to prevent recurrence) and the completion date or, if relevant, target date for completion. For deficiencies classified as critical or major (medicines inspections) and for all nonconformities (devices inspections) an identification of the root cause is also required. Where identification of the root cause is required, the response should include corrective action to the root cause as well as corrections to the individual examples identified. deficiencies classified as critical or major (medicines inspections) as well as for nonconformities classified as major (devices inspections), objective evidence is required, e.g. copies of amended documentation, photographs etc. One should be mindful of the definitions of a corrective action as opposed to a correction. 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Item Number	Image	Item Number	Image
1	"HHALATAN BLUETAIL" "FAHERICAN GOLDFINCH" "VESTEN TANAGER" "GCARLET TRAGGER" "GREN HAGPIL" "TUFTED TITHOUSE" "SPARROW" "SPLENDO FAIRY WERN" "CHAGPISHER" "GOLDEN BUSH ROBIN" "TUFTED TITHOUSE" "SPARROW" "SPARROW" "SPLENDO FAIRY WERN" "CHAGPISHER" "GOLDEN BUSH ROBIN" "TUFTED TITHOUSE" "SPARROW" "SPARROW" "SPARROW" "SPARROW" "GOLDEN BUSH ROBIN"	2	
3		4	
5	Section Strick	6	Source Cer

Item Number	Image	Item Number	Image
7	Lize	8	
9		10	
11			