12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

Retail Food Establishment Inspection Report

Establishment: KFC Lice	ense # RC: Date: ///21/303/
Purpose of Visit: Compliance Inspection Consultation	Complaint Illness Investigation Other:
 {A} Critical Food Safety Controls (5 pts) (Critical control violations must be corrected on the spot) 1. Cold holding temperatures / time 2. Hot holding temperatures / time 3. Cooking temperatures / time 4. Proper cooling of foods / time 5. Rapid reheating of foods (temperature and time) 6. Food control surfaces clean and sanitized { } cutting boards { } meat slicer { } food grinder 7. Potential for cross-contamination to occur 8. RTE foods / no direct hand contact 	C Management and Personnel (4 pts)
9. Foods from approved sources / labeling 10. Foods protected from contamination 11. Other:	32. Non-food contact surfaces clean 33. Garbage / solid waste storage 34. Consumer advisories posted 35. Inspection report displayed for public 36. Other [E] Corrections / Improvements Made / Comments:
Critical Temperature Verification:	Louts GIEal
Food Item and Process, Temp (F°) Lila / K-in 37° / 37° / 0° Lila / K-in 37° / 37	
{B} Facilities, Equipment and Food Storage (3 pts) 12. Hand washing stations supplied and clean 13. Dishwashing / sanitizing (with for food sofety propriess described in sections 229 163 (b) and
229 163 (c) of the Texas State Food Code. I understand that failure	nsible for food safety practices described in sections 229.163 (b) and of employees to conduct a 20 second hand wash prior to starting work, re to manage required temperature and time controls have a high risk

of causing food-borne illness. I agree to implement corrective actions described in Part E to reduce

Area	Superior	Above Average	Average	Minimal
Training				1
Restrooms				
Housekeeping				
Equipment				
Construction				
Overall Rating				

HACCP Compliance Score = 0/00
(Does not apply to consultations or follow-up visits)
Brown In Charge (Manager / Owner
Person In Charge / Manager / Owner
Evaluation by Registered Sanitarian

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

Retail Food Establishment Inspection Report

Establishment: Stim Chickens Lice	ense # RC: Date: /////
Purpose of Visit: Compliance Inspection Consultation	Complaint Illness Investigation Other:
(1) Califord Food Sofety Controls (5 nts)	{C} Management and Personnel (4 pts)
{A} Critical Food Safety Controls (5 pts) (Critical control violations must be corrected on the spot)	23. Manager on duty currently certified? There food
Cold holding temperatures / time	24. Manager demonstrates proper use of thermometer
2. Hot holding temperatures / time	25. Personnel with infections restricted / excluded
3. Cooking temperatures / time	26. Proper hand washing demonstrated
4. Proper cooling of foods / time	27. Good hygienic practices observed
5. Rapid reheating of foods (temperature and time)	28. Written HACCP Plans / SOPs as needed
6. Food control surfaces clean and sanitized	{D} Non-Critical (3 pts)
{ } cutting boards { } meat slicer { } food grinder	29. Food equipment construction / repair
7. Potential for cross-contamination to occur	30. Facility construction (floors / walls) / repair
8. RTE foods / no direct hand contact	31. Housekeeping contributes to infestation
9. Foods from approved sources / labeling	32. Non-food contact surfaces clean
10. Foods protected from contamination	33. Garbage / solid waste storage
11. Other:	34. Consumer advisories posted
	35. Inspection report displayed for public
	36. Other
	{E} Corrections / Improvements Made / Comments:
Critical Temperature Verification:	
Food Item and Process Temp (F°)	# 23 Provide Le fred hinds
(10/1/2 38 /Welt -in 0"	11111
Pro 100 38. 140.140. 138.	CAR TEN PROPERTY
Ficer Oc	
Tender 1650 Par-n-8how 146"	
{B} Facilities, Equipment and Food Storage (3 pts)	
12. Hand washing stations supplied and clean	
13. Dishwashing / sanitizing (ppm/Temp.)	
14. Food storage area meets code	
15. Storage and use of toxic items	
16. Evidence of insects or rodents / infestation	
17. Sewage disposal / Grease trap	
18. Thermometers provided / used	
19. Plumbing / no cross-connections	
20. Water supply / hot water	
21. Sewage disposal meets code 22. Other	
22. Other	
	U. C. C. J. C. L. musetiess described in certions 220 163 (b) and
As the person in charge of this facility, I understand I am respon	nsible for food safety practices described in sections 229.163 (b) and of employees to conduct a 20 second hand wash prior to starting work,
et - b - dies were maduate or viciting the rectroom and that failu	re to manage required temperature and time controls have a high risk
of causing food-borne illness. I agree to implement corrective action	s described in Part E to reduce the risk of food-borne illness.
Non-Critical Food Safety Rating √	
Area Superior Above Average Minimal	TIA GCD Convolinges Spage - 19/9/
Average	HACCP Compliance Score = (Does not apply to consultations or follow-up visits)
Training	(Does not apply to consultations of follow-up visits)
Restrooms	Made of the
Housekeeping	Person In Charge / Manager / Owner
Equipment	
Construction	Evaluation by Registered Sanitarian

Overall Rating

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

Retail Food Establishment Inspection Report

Establishment: Golden Chick Lice	ense # RC: Date:
Purpose of Visit: Compliance Inspection Consultation	Complaint Illness Investigation Other:
{A} Critical Food Safety Controls (5 pts)	{C} Management and Personnel (4 pts)
(Critical control violations must be corrected on the spot)	23. Manager on duty currently certified?
1. Cold holding temperatures / time	24. Manager demonstrates proper use of thermometer
2. Hot holding temperatures / time	25. Personnel with infections restricted / excluded
3. Cooking temperatures / time	26. Proper hand washing demonstrated
4. Proper cooling of foods / time	27. Good hygienic practices observed
5. Rapid reheating of foods (temperature and time)	28. Written HACCP Plans / SOPs as needed
6. Food control surfaces clean and sanitized	{D} Non-Critical (3 pts)
{ } cutting boards { } meat slicer { } food grinder	29. Food equipment construction / repair
7. Potential for cross-contamination to occur	30. Facility construction (floors / walls) / repair
8. RTE foods / no direct hand contact	31. Housekeeping contributes to infestation
9. Foods from approved sources / labeling	32. Non-food contact surfaces clean
10. Foods protected from contamination	33. Garbage / solid waste storage
11. Other:	34. Consumer advisories posted
	35. Inspection report displayed for public
	36. Other
	{E} Corrections / Improvements Made / Comments:
	. /
Critical Temperature Verification:	1 4 / _
Food Item and Process Temp (F°)	Looks treat
Welkin 38 Justice 0"	
Freezer 10° Rossied Chiet 135	
Chick Trade 140' Chiel Book 150	
256 1-10x 150 Find 10"	
{B} Facilities, Equipment and Food Storage (3 pts)	
12. Hand washing stations supplied and clean	
13. Dishwashing / sanitizing (ppm/Temp.)	
14. Food storage area meets code	
15. Storage and use of toxic items	
16. Evidence of insects or rodents / infestation	
17. Sewage disposal / Grease trap	
18. Thermometers provided / used	
19. Plumbing / no cross-connections	
20. Water supply / hot water	
21. Sewage disposal meets code	
22. Other	
As the newcon in charge of this facility I understand I am respon	sible for food safety practices described in sections 229.163 (b) and
229.163 (c) of the Texas State Food Code. I understand that failure	of employees to conduct a 20 second hand wash prior to starting work,
after handling raw products or visiting the restroom and that failur	re to manage required temperature and time controls have a high risk
F for d house illness. I agree to implement corrective actions	described in Part E to reduce the risk of food-borne illness.

of causing food-borne illness. I agree to implement corre

Area	Superior	Above Average	Average	Minimal
Training				1.
Restrooms			20-1-12-1	
Housekeeping			174	
Equipment				
Construction	1			
Overall Rating				

HACCP Complia	ance Score = 0/100
	nsultations or follow-up visits)
TOAN	NDABROUL_
Person I	n Charge / Manager / Owner
7	776
Evaluation	on by Registered Sanitarian

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

Retail Food Establishment Inspection Report

Establishment: Vairy Over Lice	ense # RC: Date:/
Purpose of Visit: Compliance Inspection Consultation	Complaint Illness Investigation Other:
 {A} Critical Food Safety Controls (5 pts) (Critical control violations must be corrected on the spot) 1. Cold holding temperatures / time 2. Hot holding temperatures / time 3. Cooking temperatures / time 4. Proper cooling of foods / time 5. Rapid reheating of foods (temperature and time) 6. Food control surfaces clean and sanitized { } cutting boards { } meat slicer { } food grinder 7. Potential for cross-contamination to occur 8. RTE foods / no direct hand contact 9. Foods from approved sources / labeling 	C Management and Personnel (4 pts)
10. Foods protected from contamination 11. Other:	33. Garbage / solid waste storage 34. Consumer advisories posted 35. Inspection report displayed for public 36. Other
Critical Temperature Verification:	# If Merid - to paper
Food Item and Process Temp (F°)	- 1 1 1 1
{B} Facilities, Equipment and Food Storage (3 pts) 12. Hand washing stations supplied and clean 13. Dishwashing / sanitizing (ppm/Temp.) 14. Food storage area meets code 15. Storage and use of toxic items 16. Evidence of insects or rodents / infestation 17. Sewage disposal / Grease trap 18. Thermometers provided / used 19. Plumbing / no cross-connections 20. Water supply / hot water 21. Sewage disposal meets code 22. Other	H 32 Simil for der food Contain Surfice To be Cleind
229.163 (c) of the Texas State Food Code. I understand that failure after handling raw products or visiting the restroom and that failure	nsible for food safety practices described in sections 229.163 (b) and of employees to conduct a 20 second hand wash prior to starting work, re to manage required temperature and time controls have a high risk section of the part E to reduce the risk of food-borne illness.

Area	Superior	Above Average	Average	Minimal
Training				9
Restrooms			***************************************	
Housekeeping				
Equipment				
Construction				
Overall Rating				

HACCP Compliance Score = (Does not apply to consultations or follow-up visits)
(Does not apply to consultations of follow-up visits)
Lam Lam
Person In Charge / Manager / Owner
977
Evaluation by Registered Sanitarian

12951 Bandera Road, Helotes, Texas 78023 (210) 695-8877 Mailing Address: P.O. Box 507, Helotes, TX 78023

Retail Food Establishment Inspection Report

Establishment: Subwey @ Walmer Lice	ense # RC: Date:
Purpose of Visit: Compliance Inspection Consultation	Complaint Illness Investigation Other:
{A} Critical Food Safety Controls (5 pts)	{C} Management and Personnel (4 pts)
(Critical control violations must be corrected on the spot)	23. Manager on duty currently certified?
1. Cold holding temperatures / time	24. Manager demonstrates proper use of thermometer
2. Hot holding temperatures / time	25. Personnel with infections restricted / excluded
3. Cooking temperatures / time	26. Proper hand washing demonstrated
4. Proper cooling of foods / time	27. Good hygienic practices observed
5. Rapid reheating of foods (temperature and time)	28. Written HACCP Plans / SOPs as needed
Food control surfaces clean and sanitized	{D} Non-Critical (3 pts)
{ } cutting boards { } meat slicer { } food grinder	29. Food equipment construction / repair
7. Potential for cross-contamination to occur	30. Facility construction (floors / walls) / repair
8. RTE foods / no direct hand contact	31. Housekeeping contributes to infestation
9. Foods from approved sources / labeling	32. Non-food contact surfaces clean
10. Foods protected from contamination	33. Garbage / solid waste storage
11. Other:	34. Consumer advisories posted
	35. Inspection report displayed for public
	36. Other
	{E} Corrections / Improvements Made / Comments:
	1 1 1
	#12 Merid. for Paper love!
Critical Temperature Verification:	at hondsink
Food Item and Process Temp (F°)	
Tuna 45° Scattell 180°	#27 Provide for all
welling 40° Welting 0°	FIT THE F
	Teem mensus so hore on
	heir restraint
{B} Facilities, Equipment and Food Storage (3 pts)	
12. Hand washing stations supplied and clean	# 19 Pravide for finder
13. Dishwashing / sanitizing (ppm/Temp.)	The second of
14. Food storage area meets code	10 be week of property
15. Storage and use of toxic items	be replaced.
16. Evidence of insects or rodents / infestation	XNo Food Store Till Fixed
17. Sewage disposal / Grease trap	
18. Thermometers provided / used	
19. Plumbing / no cross-connections	
20. Water supply / hot water	
21. Sewage disposal meets code	
22. Other	
As the person in charge of this facility, I understand I am respon	nsible for food safety practices described in sections 229.163 (b) and
220 163 (c) of the Teyes State Food Code. I understand that failure	of employees to conduct a 20 second hand wash prior to starting work,
after handling raw products or visiting the restroom and that failur	re to manage required temperature and time controls have a high risk

of causing food-borne illness. I agree to implement corrective actions described in Part E to reduce the risk of food-borne illness.

Area	Superior	Above Average	Average	Minimal
Training				1
Restrooms				
Housekeeping				
Equipment				
Construction				
Overall Rating				

HACCP Compliance Score = (Does not apply to consultations or follow-up visits)	
Person In Charge / Manager / Owner	
Evaluation by Registered Sanitarian	