

City of Pearland Retail Food Establishment Inspection Report 2703 Veterans Dr. Pearland, Tx 77581

Phone: 281.652.1766 Fax: 281.997.4660



*This inspection shall be posted in public view

License/Permit # LLCOO 00007

Date:	12-8-22 10:00 Time out: License/Perim					IIIIt #	" LIC22-00				2-0	0237	Est. Type	Kisk Category	Page 01		
		se of Inspection: 1-Compliance 2-Routine		2-Routine		3.	Field Investigatio			gatio	n 4	-Visit	5-Other	TOTAL/SCOR	RΕ		
Establishment Name: The Butcher, The Baker, The cheese Board Maker Contact/Owner Name: Christina Stroh * Number of Repeat Violations: Number of Violations COS: 1																	
Physical Address: 5012 Broadway St. City/County: PEARLA							1	ip Co		1	hone		2-7598	Follow-up: Yes No (circle one)	100		
Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation Mark the appropriate points in the OUT box for each numbered item Mark '√' a checkmark in appropriate box for IN, NO, NA, COS Mark an asterisk ' * ' in appropriate box for R																	
Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																	
Compliance Status Compliance Status																	
O I U N T	N O	N A	C O S					O I U N T		N A	C O S	Employee Health					
· •			0	Proper cooling time and temperature			Ī	·				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
V				2. Proper Cold Holding temperature(41°F/45°F)				V				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth					
✓				3. Proper Hot Holding temperature(135°F)				•				F	reventing Co	ontamination by Ha			
<u>~</u>		Н		Proper cooking time and temperature			F	_		14. Hands cleaned and properly washed/ Gloves used properly							
		Ц		5. Proper reheating procedure for hot holding (165°F in 2 Hours)			L	15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N) Ŷ□N□)		
		Ш		6. Time as a Public Health Control; procedur Approved Source	es & records		H	Highly Susceptible Populations 16. Pasteurized foods used; prohibited food not offered									
				Approved Source				Pasteurized eggs used when required							icicu		
✓		7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction									Chemicals						
✓				8. Food Received at proper temperature				17. Food additives; approved and properly store & Vegetables									
				Protection from Contamination				✓				18. Toxic subs		ly identified, stored a	nd used		
1				Food Separated & protected, prevented during food preparation, storage, display, and tasting				Water/ Plumbing						ter/ Plumbing			
)				10. Food contact surfaces and Returnables ; 6 Sanitized at ppm/temperature	Cleaned and			1				 Water from approved source; Plumbing installed; proper backflow device 					
·		11. Proper disposition of returned, previously served or reconditioned						20. Approved Sewage/Wastewater Disposal System, proper disposal						em, proper			
				Priority Foundation	Items (2 Poin	nts) 1	viole	ations	s Req	uire	e Cor	rective Action	within 10 day	ys			
O I U N T	N O	N A	C O S	Demonstration of Knowledge/ Personnel				O I U N T	N O	N A	C O S	Food Temperature Control/ Identification					
V				21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)			Г	~				27. Proper cool Maintain Produ		sed; Equipment Ade	equate to		
>	22. Food Handler/ no unauthorized persons/ personnel					L	✓				28. Proper Date						
	Safe Water, Recordkeeping and Food Package Labeling				Package			1				29. Thermome Thermal test s		accurate, and calibra	ted; Chemical/		
/	23. Hot and Cold Water available; adequate pressure, safe			pressure, safe							Permit	Requiremen	t, Prerequisite for C	peration			
1				24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled				V	•		П	30. Food Establishment Permit (Current & Valid)					
	Conformance with Approved Procedures				edures								Utensils, Equ	uipment, and Vendii	ng		
~				25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions				V	,			31. Adequate handwashing facilities: Accessible and properly supplied, used					
				Consumer Advisory				~				32. Food and N designed, cons	e, properly				
				26. Posting of Consumer Advisories; raw or foods (Disclosure/Reminder/Buffet Plate)/ A				'				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided			, used/		
				Core Items (1 Point) Violations Requ		ction	n No	ot to 1	Ехсее	ed 90	0 Da		·	* *			
O I U N T	N O	N A	C O S	Prevention of Food Contaminat		R		O I U N T	N O	N A	C O S		· ·	Identification		R	
_				34. No Evidence of Insect contamination, rocanimals	lent/other		Γ	~	1			41.Original con	ntainer labelin	g (Bulk Food)			
<u>~</u>				35. Personal Cleanliness/eating, drinking or t	obacco use								•	sical Facilities			
<u> </u>		Щ	Н	36. Wiping Cloths; properly used and stored		4	L		$oldsymbol{\sqcup}$		42. Non-Food Contact surfaces clean					Ш	
H	✓ 37. Environmental contamination ✓ 38. Approved thawing method			\dashv	┝	+	Н		43. Adequate ventilation and lighting; designated areas used 44. Garbage and Refuse properly disposed; facilities maintained					$\vdash\vdash$			
38. Approved thawing method Proper Use of Utensils					F	44. Garbage and Refuse properly disposed; facilities maintained 45. Physical facilities installed, maintained, and clean							\vdash				
39. Utensils, equipment, & linens; properly used, stored,					۲		П		П			y constructed, supplie		П			
H		H	H	dried, & handled/) In use utensils; properly u 40. Single-sergice & single-use articles; prop		\dashv	\vdash	╀	Н		Н	47. Other Viola	ations			$\vdash \vdash$	
and used Mills P. L. City								Charge/ Owner	Ш								
(signature)							Stroh Christina										
Inspected by: Originature DARLENE ESTRADA Business Email:																	
(signat	(signature) DARLENE ESTRADA										_	,					

Retail Food Establishment Inspection Report

Corrective Actions to Ensure Safe Food

Item No.

1 Cooling

• TCS* food cooled from 135° F to 70° F more than 2 hours OR 135° F to 41° F (45° F) More than 6 hours; OR prepared food cooled to 41° F (45° F) more than 4 hours:

Action: Voluntary destruction, rapid reheating of cooked foods if less than 4 hours

2 Cold Hold

- TCS food held above 41° F (45° F) more than 4 hours: *Action: Voluntary destruction*
- TCS food held above 41° F (45° F) <u>less than</u> 4 hours: *Action: Rapid cool (e.g. ice bath)*

3 Hot Hold

- TCS food held below 135° F more than 4 hours: *Action: Voluntary destruction*
- TCS food held below 135° F <u>less than</u> 4 hours: *Action:* Rapid reheats to 165° F or more

4 Cooking

• TCS food undercooked:

Action: Re-cook to proper temperature

5 Rapid Reheating

• TCS food improperly reheated: *Action: Reheat rapidly to 165* • *F*

7 Approved Source/Sound Condition

• Foods from unapproved sources/unsound condition: *Action: Voluntary destruction*

9 Cross-Contamination of Raw/Cooked Foods

• Ready-To-Eat food contaminated by raw TCS food: *Action: Voluntary destruction of ready-to-eat foods*

14 Handwashing

Food employees observed not washing hands:

Action: Instruct employees to wash hands as specified in the Rules.

15 Proper Handling of Ready-to-Eat Foods

• Employee did not properly wash and sanitize hands before touching ready-to-eat food with Bare hands:

Action: Voluntary destruction

19, 23 Water Supply

• Facility does not have water for washing hands, preparing food, or cleaning equipment/utensils: *Action: Voluntary suspension of food preparation*

^{*} Time/Temperature Control for Safety (TCS)

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Establishr	ment Name:	Physical Addr	ress:	City/State:		License/Permit # Page of _		of				
TEMPERATURE OBSERVATIONS Item/Location Temp Item/Location Temp Item/Location Temp												
Item/Loc	ation	Temp It	tem/Location	Temp	Item/Loc	ation		Temp				
			ERVATIONS AND CORRECT									
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW:	TABLISHMENT	HAS BEEN MADE. YOUR ATTE	NTION IS D	IRECTED TO T	THE CONDITIONS OBSE	RVED AN	ND				
				<u> </u>								
Received (signature)	by:		Print:			Title: Person In Charg	e/ Owner					
Inspected (signature)	l by:		Print:			Samples: Y N # co	llected					