



Texas Department of State Health Services Retail Food Establishment Inspection Report

Date: 8/14/23	Time in:	Time out:	License/Permit #	Est. Type	Risk Category: 2	Page L of 2
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Purpose of Inspection: <input type="checkbox"/> 1-Compliance <input checked="" type="checkbox"/> 2-Routine <input type="checkbox"/> 3-Field Investigation <input type="checkbox"/> 4-Visit <input type="checkbox"/> 5-Other							TOTAL/SCORE
Establishment Name: Little Caesars Pizza			Contact/Owner Name:		* Number of Repeat Violations: — ✓ Number of Violations COS: —		97
Physical Address: 12800 Bandera Rd Ste 400			City/County: Helotes		Zip Code: Phone:		

Compliance Status: **O** = not in compliance **I** = in compliance **N** = 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					
O	I	N	NA	COS	R
Time and Temperature for Food Safety (F = degrees Fahrenheit)					
					R
					1. Proper cooling time and temperature
					2. Proper Cold Holding temperature(41°F/ 45°F)
					3. Proper Hot Holding temperature(135°F)
					4. Proper cooking time and temperature
					5. Proper reheating procedure for hot holding (165°F in 2 Hours)
					6. Time as a Public Health Control: procedures & records Approved Source
					7. Food and ice obtained from approved source: Food in good condition, safe, and unadulterated; parasite destruction
					8. Food Received at proper temperature
Protection from Contamination					
					9. Food Separated & protected, prevented during food preparation, storage, display, and tasting
					10. Food contact surfaces and Returnables ; Cleaned and Sanitized at ppm/temperature
					11. Proper disposition of returned, previously served or reconditioned
Employee Health					
					R
					12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting
					13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth
Preventing Contamination by Hands					
					14. Hands cleaned and properly washed/ Gloves used properly
					15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)
Highly Susceptible Populations					
					16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required
Chemicals					
					17. Food additives; approved and properly stored; Washing Fruits & Vegetables
					18. Toxic substances properly identified, stored and used
Water/ Plumbing					
					19. Water from approved source: Plumbing installed; proper backflow device
					20. Approved Sewage/Wastewater Disposal System, proper disposal

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days					
Compliance Status					
O	I	N	NA	COS	R
Demonstration of Knowledge/ Personnel					
					R
					21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)
					22. Food Handler/ no unauthorized persons/ personnel
Safe Water, Recordkeeping and Food Package Labeling					
					23. Hot and Cold Water available; adequate pressure, safe
					24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled
Conformance with Approved Procedures					
					25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions
Consumer Advisory					
					26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/ Buffet Plate)/ Allergen Label
Food Temperature Control/ Identification					
					R
					27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature
					28. Proper Date Marking and disposition
					29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips
Permit Requirement, Prerequisite for Operation					
					30. Food Establishment Permit (Current & Valid) Exp: 5/31/24
Utensils, Equipment, and Vending					
					31. Adequate handwashing facilities: Accessible and properly supplied, used
					32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used
					33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First					
Compliance Status					
O	I	N	NA	COS	R
Prevention of Food Contamination					
					R
					34. No Evidence of Insect contamination, rodent/other animals
					35. Personal Cleanliness/eating, drinking or tobacco use
					36. Wiping Cloths; properly used and stored
					37. Environmental contamination
					38. Approved thawing method
Proper Use of Utensils					
					39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used
					40. Single-service & single-use articles; properly stored and used
Food Identification					
					R
					41. Original container labeling (Bulk Food)
Physical Facilities					
					42. Non-Food Contact surfaces clean
					43. Adequate ventilation and lighting; designated areas used
					44. Garbage and Refuse properly disposed; facilities maintained
					45. Physical facilities installed, maintained, and clean
					46. Toilet Facilities; properly constructed, supplied, and clean
					47. Other Violations

Received by: (signature) Natali Rodriguez	Print: Natali Rodriguez	Title: Person In Charge/ Owner
Inspected by: (signature) Sean Gilbert	Print: Sean Gilbert	Business Email:

