Texas Department of State Health Services
Retail Food Establishment Inspection Report

Date: 3/21/24	Time in:	Time out:	License/Permit #	Est. Type: Food	Risk Category: 3	Page 1 of 2

Purpose of Inspection:	1-Compliance ✓	2-Routine	3-Field Investigation	4-Visit	5-Other	TOTAL/SCORE

Establishment Name: El Chaparral Restaurant	Contact/Owner Name:	* Number of Repeat Violations: ___ ✓ Number of Violations COS: ___	87
Physical Address: 15103 Bandera Rd	City/County: Helotes	Zip Code:	Phone:	Follow-up: Yes No (circle one)

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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	Food Temperature Control/ Identification	R
					27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
✓					28. Proper Date Marking and disposition Consume by date	
					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 Paper towels Accessible	
					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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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) Jessica Alvarado	Print: x Jessica Alvarado	Title: Person In Charge/ Owner
Inspected by: (signature) Diana Garcia	Print: DIANA GARCIA	Business Email:

Form EH-06 (Revised 09-2015)

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Texas Department of State Health Services
Retail Food Establishment Inspection Report

Establishment Name:	Physical Address:	City/State:	License/Permit #	Page
El Chaparral Restaurant	15103 Bandera Rd	Helotes		2 of 2

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
#9	Ensure that raw meats are stored at bottom shelf of coolers. (Raw Beef over produce) Cos
#9	Ensure that raw eggs are stored at bottom shelf of cooler. (stored over other food products) (Bakery)
#10	Clean Ice machine. (inside)
#21	Provide for one person to be present with a valid food managers card.
#28	Ensure that all cooked foods in cooler have A consume by date label. (Some items had no label)
#31	Ensure that handsinks have soap and paper towels. (No soap @ bar) (No paper towels at kitchen) Ensure handsink is accessible at all times. (discontinue placing items inside sink) Cos)
#39	Ensure that utensil bin is cleaned on A regular basis. (utensil bin dirty)

Received by: (signature) Jessica Alvarado	Print: Jessica Alvarado	Title: Person In Charge/ Owner
Inspected by: (signature) Diana Garcia	Print: DIANA GARCIA	Samples: Y N # collected

Form EH-06 (Revised 09-2015)

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Texas Department of State Health Services
Retail Food Establishment Inspection Report

Date: 3/21/24	Time in:	Time out:	License/Permit #	Est. Type: Food	Risk Category: 3	Page 1 of 2

Purpose of Inspection:	1-Compliance ✓	2-Routine	3-Field Investigation	4-Visit	5-Other	TOTAL/SCORE

Establishment Name:	Contact/Owner Name:	✱ Number of Repeat Violations: ___ ✓ Number of Violations COS: ___	TOTAL/SCORE
El Rodeo Mexican Grill			91

Physical Address:	City/County:	Zip Code:	Phone:	Follow-up: Yes No (circle one)
12932 Bandera Rd	Helotes			

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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	Food Temperature Control/ Identification	R
					27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
✓					28. Proper Date Marking and disposition Consume by date	
					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*

OUT	IN	NO	NA	COS	Prevention of Food Contamination	R
					34. No Evidence of Insect contamination, rodent/other animals	
✓				✓	35. Personal Cleanliness/eating, drinking or tobacco use Open drinks	
✓				✓	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	

OUT	IN	NO	NA	COS	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)	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) Diana Garcia	Print: DIANA GARCIA	Business Email:

Form EH-06 (Revised 09-2015)

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Texas Department of State Health Services
Retail Food Establishment Inspection Report

Establishment Name:	Physical Address:	City/State:	License/Permit #	Page 2 of 2
El Rodeo Mexican Grill	12932 Bandera Rd	Helotes		

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
#9	Ensure that raw meats are stored properly in cooler:
	(Discontinue storing raw meats over other produce/Food containers)
	(Cos)
#28	Ensure that All cooked foods stored in cooler have a
	Consume by date label. (Some food items had no label)
#32	Ensure that All food storage bags are food grade bags.
	(Discontinue storing food in grocery bags) (Cos)
	Ensure that All utensils are in good Repair.
	(Chipped spatula) (Cos)
#37	Ensure that all food containers in cooler have A
	lid & cover. (Cos)
#35	Ensure that All employees personal drinks have A
	lid & straws. (open drinks) (Cos)

Received by: (signature)	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) Diana Garcia	Print: DIANA GARCIA	Samples: Y N # collected

Form EH-06 (Revised 09-2015)

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Retail Food Establishment Inspection Report

Date	Time in	Time out	License/Permit #	Est. Type	Risk Category	Page 1 of 2
3/9/2024			005038	Restaurant	2	

Purpose of Inspection: 1-Compliance X 2-Routine 3-Field Investigation 4-Visit 5-Other

Establishment Name	Contact/Owner Name		TOTAL/SCORE
KFC		✱ Number of Repeat Violations: ___ ✓ Number of Violations COS: ___	100

Physical Address	City/County	Zip Code	Phone	Follow-up: Yes No (circle one)
12474 BANDERA RD	HELOTES/BXR	78023	(210) 695 - 8450	

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						R
OUT	IN	NO	NA	COS		
					Time and Temperature for Food Safety (F = degrees Fahrenheit)	
					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	

Compliance Status						R
OUT	IN	NO	NA	COS		
					Employee Health	
					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*

OUT	IN	NO	NA	COS		R
					Demonstration of Knowledge/ Personnel	
					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	

OUT	IN	NO	NA	COS		R
					Food Temperature Control/ Identification	
					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)	
					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*

OUT	IN	NO	NA	COS		R
					Prevention of Food Contamination	
					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	

OUT	IN	NO	NA	COS		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)	**Print:** JUAN PENA	**Title: Person In Charge/ Owner**
Inspected by: (signature) Jefrey Carrizales	**Print:** JEFFREY CARRIZALES	**Business Email:**

Form EH-06 (Revised 09-2015)

Retail Food Establishment Inspection Report

Establishment Name:	Physical Address	City/State	License/Permit #	Page 2 of 2
KFC	12474 BANDERA RD	HELOTES/TX	005038	

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
FRIED CHICKEN - HOT HOLD	163F				
CORN - HOT HOLD	160F				
CHICKEN/WALK IN COOLER	35F				
CHICKEN POT PIE - WALK IN COOLER	35F				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
	FOOD ESTABLISHMENT PERMIT IN COMPLIANCE. EXPIRES ON 5/31/2024
	FOOD PROGRAM MANAGER CERTIFICATION IN COMPLIANCE. EXP: 2029
	FOR PREVENTIVE MAINTENANCE INSTALL BACK FLOW PREVENTOR ON FAUCET PRIOR TO CONNECTING WATER HOSE.

Received by: (signature)	**Print:** JUAN PENA	**Title: Person In Charge/ Owner**
Inspected by: (signature) Jeffrey Carrizales	**Print:** JEFFREY CARRIZALES	Samples: Y N # collected

Form EH-06 (Revised 09-2015)

Texas Department of State Health Services
Retail Food Establishment Inspection Report

Date	Time in:	Time out:	License/Permit #	Est. Type	Risk Category	Page of
3/21/24				Food	2	1 of 1

Purpose of Inspection:	1-Compliance	2-Routine	3-Field Investigation	4-Visit	5-Other	TOTAL/SCORE
	✓					98

Establishment Name:	Contact/Owner Name:	* Number of Repeat Violations: ___ ✓ Number of Violations COS: ___
Little Caesars		

Physical Address:	City/County:	Zip Code:	Phone:	Follow-up: Yes No (circle one)
12800 Bandera Rd Ste 400	Helotes			

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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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	
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Priority Foundation Items (2 Points) *violations Require Corrective Action within 10 days*

OUT	IN	NO	NA	COS	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	
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					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	

OUT	IN	NO	NA	COS	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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	Food Identification	R
					41.Original container labeling (Bulk Food)	
					Physical Facilities	
✓					42. Non-Food Contact surfaces clean Clean Pizza oven vents	
					43. Adequate ventilation and lighting; designated areas used	
					44. Garbage and Refuse properly disposed; facilities maintained	
✓					45. Physical facilities installed, maintained, and clean Wipe down fans & metal shelves	
					46. Toilet Facilities; properly constructed, supplied, and clean	
					47. Other Violations	

Received by: (signature)	Print: SIERRAH KENNEDY	Title: Person In Charge/ Owner
Inspected by: (signature) Diana Garcia	Print: DIANA GARCIA	Business Email:

Form EH-06 (Revised 09-2015)

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Texas Department of State Health Services
Retail Food Establishment Inspection Report

Date	Time in:	Time out:	License/Permit #	Est. Type	Risk Category	Page 1 of 2
3/21/24				Food	3	

Purpose of Inspection:		1-Compliance	✓	2-Routine		3-Field Investigation		4-Visit		5-Other	TOTAL/SCORE
											90

Establishment Name:	Contact/Owner Name:	* Number of Repeat Violations: ___ ✓ Number of Violations COS: ___
MAY'S TACOS		

Physical Address:	City/County:	Zip Code:	Phone:	Follow-up: Yes No (circle one)
13439 Bandera Rd	Helotes			

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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	Food Temperature Control/ Identification	R
					27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
✓					28. Proper Date Marking and disposition Consumer by date	
					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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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) [signature]	Print: Gilbert Villarreal	Title: Person In Charge/ Owner
Inspected by: (signature) Diana Garcia	Print: DIANA GARCIA	Business Email:

Form EH-06 (Revised 09-2015)

Scanned with CamScanner

Retail Food Establishment Inspection Report

Establishment Name:	Physical Address:	City/State:	License/Permit #	Page
MARY'S TACOS	13439 Bandera Rd	Helotes		2 of 2

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
#9	Ensure that Raw meats and Raw eggs are stored at bottom
	shelf of Cooler. (stored over other food Products) Cos.
#15	Provide for employees to use, gloves & utensils when
	handling Ready to eat foods. (Handing bread & cut tomates
	w/bare hands when preparing A sub sandwich) (Cos)
#28	Ensure that All cooked foods in cooler have A consume
	by date. label. (No label on ham and other cooked foods)
#33	Ensure proper washing of equipment and dishes.
	(must use all 3 cycles) (last cycle Rinsing with only water)
	(Cos)
	TCS Foods (Time/Temperature Control for Safety)
*	A reinspection is scheduled for _____. All reinspections are on a charged basis. Fees are payable within 10 days.

Received by: (signature) [signature]	Print: Gilbert Villanueva	Title: Person In Charge/ Owner
Inspected by: (signature) Diana Garcia	Print: DIANA GARCIA	Samples: Y N # collected ___

Form EH-06 (Revised 09-2015)

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Retail Food Establishment Inspection Report

Date	Time in	Time out	License/Permit #	Est. Type	Risk Category	Page 1 of 2
3/9/2024			000566	SNACK BAR	2	

Purpose of Inspection: 1-Compliance | X 2-Routine | 3-Field Investigation | 4-Visit | 5-Other

Establishment Name	Contact/Owner Name	* Number of Repeat Violations: ___ ✓ Number of Violations COS: ___	TOTAL SCORE
STARBUCKS			100

Physical Address	City/County	Zip Code	Phone	Follow-up: Yes No (circle one)
12577 BANDERA RD	HELOTES/BXR	78023	(210) 372 - 9265	

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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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)	
					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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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) Cindy Flores	Print: CYNTHIA FLORES	Title: Person In Charge/ Owner
Inspected by: (signature) Jeffrey Carrizales	**Print:** JEFFREY CARRIZALES	**Business Email:**

Form EH-06 (Revised 09-2015)

Retail Food Establishment Inspection Report

Establishment Name:	Physical Address:	City/State:	License/Permit #	Page 2 of 2
STARBUCKS	12577 BANDERA RD	HELOTES/TX	000566	

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
	FOOD ESTABLISHMENT PERMIT IN COMPLIANCE. EXPIRES ON 5/31/2024
	CERTIFIED FOOD PROGRAM MANAGER IN COMPLIANCE. EXPIRES ON 7/10/2028
	ALL REFRIGERATION UNITS ARE WITHIN RANGE. IN COMPLAINCE.

Received by: (signature)	**Print:** CYNTHIA FLORES	**Title: Person In Charge/ Owner**
Inspected by: (signature) Jeffrey Carrizales	**Print:** JEFFREY CARRIZALES	Samples: Y N # collected

Form EH-06 (Revised 09/2015)

Retail Food Establishment Inspection Report

Date	Time in	Time out	License/Permit #	Est. Type	Risk Category	Page 1 of 2
3/9/2024			002806	RETAIL	2	

Purpose of Inspection:	1-Compliance	X	2-Routine	3-Field Investigation	4-Visit	5-Other	TOTAL/SCORE

Establishment Name	Contact/Owner Name	✱ Number of Repeat Violations: ____ ✓ Number of Violations COS: ____	TOTAL/SCORE
WALMART			94

Physical Address	City/County	Zip Code	Phone	Follow-up: Yes No (circle one)
12550 LESLIE RD	HELOTES/BXR	78023	(210) 507-4979	

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 OUT	IN	NO	NA	COS	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	
X	✓				9. Food Separated & protected, prevented during food preparation, storage, display, and tasting	
X				X	10. Food contact surfaces and Returnables ; Cleaned and Sanitized at ppm/temperature	
X				X	11. Proper disposition of returned, previously served or reconditioned	

Compliance Status OUT	IN	NO	NA	COS	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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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)	
					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*

OUT	IN	NO	NA	COS	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	

OUT	IN	NO	NA	COS	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)	Print:	Title: Person In Charge/ Owner
Claudia Nava	CLAUDIA NAVA	
Inspected by: (signature)	**Print:**	**Business Email:**
Jeffrey Carrizales	JEFFREY CARRIZALES	

Form EH-06 (Revised 09-2018)

Retail Food Establishment Inspection Report

Establishment Name:	Physical Address:	City/State:	License/Permit #	Page 2 of 2
WALMART	12550 LESLIE RD	HELOTES/TX	002806	

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
	FOOD ESTABLISHMENT PERMIT IN COMPLIANCE. EXPIRES ON 5/31/2024
	ALL REFRIGERATION UNITS ARE WITHIN RANGE. IN COMPLAINCE. READIGN AT 41F AND LESS
	ALL HOT FOODS ARE IN COMPLIANCE. READING AT 135F AND ABOVE
11	OBSERVED: SERVERELY DENTED CANNED FOODS ON SHELVES WITH SOUND CANNED FOODS.
	REMOVE ALL SEVERELY CANNED FOODS FROM SHELVES.
10	OBSERVED: SANITIZING SOLUTION IN THREE COMPARTMENT SINK WAS WAY ABOVE 400ppm.(CORRECTED ON SITE)
	CONTINUE USING PROPER DISHWASHING METHOD INCLUDING USING SANITIZING TESTING DEVICE TO ENSURE
	SANITIZER SOLUTION IS WITHIN RANGE.

Received by: (signature) Claudia Nava	Print: CLAUDIA NAVA	Title: Person In Charge/ Owner
Inspected by: (signature) Jeffrey Carrizales	Print: JEFFREY CARRIZALES	Samples: Y N # collected

Form EH-06 (Revised 08/2015)