



**Texas Department of State Health Services
Retail Food Establishment Inspection Report**

Date: 4/16/24	Time in:	Time out:	License/Permit #	Est. Type	Risk Category: 3	Page 1 of 1
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: Le Klicks Cafe			Contact/Owner Name:		* Number of Repeat Violations: ✓ Number of Violations COS: 98	
Physical Address: 12916 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					
Time and Temperature for Food Safety (F = degrees Fahrenheit)					
Compliance Status	O	I	N	N	C
	U	N	O	A	S
					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					

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days					
Demonstration of Knowledge/ Personnel					
Compliance Status	O	I	N	N	C
	U	N	O	A	S
					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/Buffer Plate)/ Allergen Label					

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First					
Prevention of Food Contamination					
Compliance Status	O	I	N	N	C
	U	N	O	A	S
					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					

Received by: (signature) X. Krista Elwell	Print: Krista Elwell	Title: Person in Charge/ Owner
Inspected by: (signature) Diana Garcia	Print: DIANA GARCIA	Business Email:



**Texas Department of State Health Services
Retail Food Establishment Inspection Report**

Date: <u>4/16/24</u>	Time in:	Time out:	License/Permit #	Est. Type	Risk Category	Page <u>1</u> of <u>1</u>
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						
Establishment Name: <u>Childrens Lighthouse Day Care</u>			Contact/Owner Name:		* Number of Repeat Violations: <u> </u> ✓ Number of Violations COS: <u> </u>	
Physical Address: <u>9706 Business Parkway</u>			City/County: <u>Helotes</u>	Zip Code:	Phone:	Follow-up: Yes <input type="checkbox"/> 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						R	Compliance Status						R
OUT	IN	NO	NA	COS			OUT	IN	NO	NA	COS		
Time and Temperature for Food Safety (F = degrees Fahrenheit)							Employee Health						
						1. Proper cooling time and temperature						12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
						2. Proper Cold Holding temperature(41°F/ 45°F)						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
						3. Proper Hot Holding temperature(135°F)						Preventing Contamination by Hands	
						4. Proper cooking time and temperature						14. Hands cleaned and properly washed/ Gloves used properly	
						5. Proper reheating procedure for hot holding (165°F in 2 Hours)						15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)	
						6. Time as a Public Health Control; procedures & records						Highly Susceptible Populations	
						Approved Source						16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
						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 stored; Washing Fruits & Vegetables	
						Protection from Contamination						18. Toxic substances properly identified, stored and used	
						9. Food Separated & protected, prevented during food preparation, storage, display, and tasting						Water/ Plumbing	
						10. Food contact surfaces and Returnables ; Cleaned and Sanitized at _____ ppm/temperature						19. 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	

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days

Compliance Status						R	Compliance Status						R
OUT	IN	NO	NA	COS			OUT	IN	NO	NA	COS		
Demonstration of Knowledge/ Personnel							Food Temperature Control/ Identification						
						21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)						27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
						22. Food Handler/ no unauthorized persons/ personnel						28. Proper Date Marking and disposition	
						Safe Water, Recordkeeping and Food Package Labeling						29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips	
						23. Hot and Cold Water available; adequate pressure, safe						Permit Requirement, Prerequisite for Operation	
						24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled						30. Food Establishment Permit (Current & Valid) <u>EXP 5/31/24</u>	
						Conformance with Approved Procedures						Utensils, Equipment, and Vending	
						25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions						31. Adequate handwashing facilities: Accessible and properly supplied, used	
						Consumer Advisory						32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used	
						26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label						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						R	Compliance Status						R
OUT	IN	NO	NA	COS			OUT	IN	NO	NA	COS		
Prevention of Food Contamination							Food Identification						
						34. No Evidence of Insect contamination, rodent/other animals						41. Original container labeling (Bulk Food)	
						35. Personal Cleanliness/eating, drinking or tobacco use						Physical Facilities	
						36. Wiping Cloths; properly used and stored						42. Non-Food Contact surfaces clean	
						37. Environmental contamination						43. Adequate ventilation and lighting; designated areas used	
						38. Approved thawing method						44. Garbage and Refuse properly disposed; facilities maintained	
						Proper Use of Utensils						45. Physical facilities installed, maintained, and clean	
						39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used						46. Toilet Facilities; properly constructed, supplied, and clean	
						40. Single-service & single-use articles; properly stored and used						47. Other Violations	

Received by: <u>X Ruth Rowland</u>	Print: <u>X R</u>	Title: Person In Charge/ Owner
Inspected by: <u>Diana Garcia</u>	Print: <u>DIANA GARCIA</u>	Business Email:



**Texas Department of State Health Services
Retail Food Establishment Inspection Report**

Date: <u>4/16/24</u>	Time in:	Time out:	License/Permit #	Est. Type	Risk Category	Page <u>1</u> of <u>1</u>
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: <u>CVS Pharmacy #8990</u>			Contact/Owner Name:		* Number of Repeat Violations: <u> </u> ✓ Number of Violations COS: <u> </u>	
Physical Address: <u>12980 Bandera Rd</u>		City/County: <u>Helotes</u>	Zip Code:	Phone:	Follow-up: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (circle one)	<u>100</u>

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						Time and Temperature for Food Safety (F = degrees Fahrenheit)	R	Compliance Status						Employee Health	R
O	I	N	N	C				O	I	N	N	C			
U	T		A	O	S			U	T		A	O	S		
						1. Proper cooling time and temperature								12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
						2. Proper Cold Holding temperature(41°F/ 45°F)								13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
						3. Proper Hot Holding temperature(135°F)								Preventing Contamination by Hands	
						4. Proper cooking time and temperature								14. Hands cleaned and properly washed/ Gloves used properly	
						5. Proper reheating procedure for hot holding (165°F in 2 Hours)								15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)	
						6. Time as a Public Health Control; procedures & records								Highly Susceptible Populations	
						Approved Source								16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
						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 stored; Washing Fruits & Vegetables	
						Protection from Contamination								18. Toxic substances properly identified, stored and used	
						9. Food Separated & protected, prevented during food preparation, storage, display, and tasting								Water/ Plumbing	
						10. Food contact surfaces and Returnables ; Cleaned and Sanitized at ppm/temperature								19. 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	

Priority Foundation Items (2-Points) violations Require Corrective Action within 10 days

Compliance Status						Demonstration of Knowledge/ Personnel	R	Compliance Status						Food Temperature Control/ Identification	R
O	I	N	N	C				O	I	N	N	C			
U	T		A	O	S			U	T		A	O	S		
						21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)								27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
						22. Food Handler/ no unauthorized persons/ personnel								28. Proper Date Marking and disposition	
						Safe Water, Recordkeeping and Food Package Labeling								29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips	
						23. Hot and Cold Water available; adequate pressure, safe								Permit Requirement, Prerequisite for Operation	
						24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled								30. Food Establishment Permit (Current & Valid) <u>exp 5/31/24</u>	
						Conformance with Approved Procedures								Utensils, Equipment, and Vending	
						25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions								31. Adequate handwashing facilities: Accessible and properly supplied, used	
						Consumer Advisory								32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used	
						26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label								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						Prevention of Food Contamination	R	Compliance Status						Food Identification	R
O	I	N	N	C				O	I	N	N	C			
U	T		A	O	S			U	T		A	O	S		
						34. No Evidence of Insect contamination, rodent/other animals								41. Original container labeling (Bulk Food)	
						35. Personal Cleanliness/eating, drinking or tobacco use								Physical Facilities	
						36. Wiping Cloths; properly used and stored								42. Non-Food Contact surfaces clean	
						37. Environmental contamination								43. Adequate ventilation and lighting; designated areas used	
						38. Approved thawing method								44. Garbage and Refuse properly disposed; facilities maintained	
						Proper Use of Utensils								45. Physical facilities installed, maintained, and clean	
						39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used								46. Toilet Facilities; properly constructed, supplied, and clean	
						40. Single-service & single-use articles; properly stored and used								47. Other Violations	

Received by: <u>X Donna Knof</u>	Print: <u>Donna Knof</u>	Title: Person In Charge/ Owner
Inspected by: <u>Diana Garcia</u>	Print: <u>DIANA GARCIA</u>	Business Email:



**Texas Department of State Health Services
Retail Food Establishment Inspection Report**

Date: 4/16/24	Time in:	Time out:	License/Permit #	Est. Type	Risk Category: 2	Page 1 of 1
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: Kwik Chek #60			Contact/Owner Name:	* Number of Repeat Violations: — ✓ Number of Violations COS: —		98
Physical Address: 13006 Bandera Rd		City/County: Helotes	Zip Code:	Phone:	Follow-up: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (circle one)	

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 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						Item	Compliance Status
OUT	IN	NO	NA	COS			OUT
					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						Item	Compliance Status
OUT	IN	NO	NA	COS			OUT
					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/Buffer 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) Not posted		
					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						Item	Compliance Status
OUT	IN	NO	NA	COS			OUT
					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: <i>[Signature]</i>	Print: Michelle Nunez	Title: Person In Charge/ Owner
Inspected by: <i>[Signature]</i>	Print: DIANA GARCIA	Business Email:

#30 Post A valid Food Permit. (not posted)



Texas Department of State Health Services Retail Food Establishment Inspection Report

Date: 4/16/24	Time in:	Time out:	License/Permit #	Est. Type	Risk Category: 2	Page 1 of 1	
Purpose of Inspection: <input type="checkbox"/> 1-Compliance <input type="checkbox"/> 2-Routine <input type="checkbox"/> 3-Field Investigation <input type="checkbox"/> 4-Visit <input type="checkbox"/> 5-Other							TOTAL SCORE
Establishment Name: Playa Bowls			Contact/Owner Name:	* Number of Repeat Violations: ✓ Number of Violations COS:		100	
Physical Address: 9708 Business Hwy		City/County: Helotes	Zip Code:	Phone:	Follow-up: Yes No (circle one)		

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

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days

Compliance Status							Compliance Status								
OUT	IN	NO	NA	COS			OUT	IN	NO	NA	COS				
						Demonstration of Knowledge/ Personnel								Food Temperature Control/ Identification	
						21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)								27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
						22. Food Handler/ no unauthorized persons/ personnel								28. Proper Date Marking and disposition	
						Safe Water, Recordkeeping and Food Package Labeling								29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips	
						23. Hot and Cold Water available; adequate pressure, safe								Permit Requirement, Prerequisite for Operation	
						24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled								30. Food Establishment Permit (Current & Valid) ^{exp 5/31/24}	
						Conformance with Approved Procedures								Utensils, Equipment, and Vending	
						25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions								31. Adequate handwashing facilities: Accessible and properly supplied, used	
						Consumer Advisory								32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used	
						26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label								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							Compliance Status								
OUT	IN	NO	NA	COS			OUT	IN	NO	NA	COS				
						Prevention of Food Contamination								Food Identification	
						34. No Evidence of Insect contamination, rodent/other animals								41. Original container labeling (Bulk Food)	
						35. Personal Cleanliness/eating, drinking or tobacco use								Physical Facilities	
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						37. Environmental contamination								43. Adequate ventilation and lighting; designated areas used	
						38. Approved thawing method								44. Garbage and Refuse properly disposed; facilities maintained	
						Proper Use of Utensils								45. Physical facilities installed, maintained, and clean	
						39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used								46. Toilet Facilities; properly constructed, supplied, and clean	
						40. Single-service & single-use articles; properly stored and used								47. Other Violations	

Received by: <i>[Signature]</i>	Print: Dipash Patel	Title: Person In Charge/ Owner
Inspected by: <i>[Signature]</i>	Print: DIANA GARCIA	Business Email:

Retail Food Establishment Inspection Report

Date: 4/6/2024	Time in:	Time out:	License/Permit # 005081	Est. Type Restaurant	Risk Category 2	Page 1 of 2
Purpose of Inspection:		<input checked="" type="checkbox"/> 1-Compliance	<input type="checkbox"/> 2-Routine	<input type="checkbox"/> 3-Field Investigation	<input type="checkbox"/> 4-Visit	<input type="checkbox"/> 5-Other
Establishment Name: RIO'S BARBACOA			Contact/Owner Name: EDWARD RIOS		* Number of Repeat Violations: _____ ✓ Number of Violations COS: _____	
Physical Address: 12800 BANDERA RD #103		City/County: HELOTES/BXR	Zip Code: 78023	Phone: (210) 601 - 4039	Follow-up: Yes No (circle one)	

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Compliance Status: **OUT** = not in compliance **IN** = in compliance **NO** = not observed **NA** = not applicable **COS** = corrected on site **R** = repeat violation
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Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days

Compliance Status	Time and Temperature for Food Safety (F = degrees Fahrenheit)		Compliance Status	Employee Health	
OUT	IN	NO	NA	COS	R
	1. Proper cooling time and temperature			12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
	2. Proper Cold Holding temperature(41°F/ 45°F)			13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
	3. Proper Hot Holding temperature(135°F)			Preventing Contamination by Hands	
	4. Proper cooking time and temperature			14. Hands cleaned and properly washed/ Gloves used properly	
	5. Proper reheating procedure for hot holding (165°F in 2 Hours)			15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)	
	6. Time as a Public Health Control; procedures & records			Highly Susceptible Populations	
	Approved Source			16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
	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 stored; Washing Fruits & Vegetables	
	Protection from Contamination			X	X
	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting			Water/ Plumbing	
	10. Food contact surfaces and Returnables ; Cleaned and Sanitized at _____ ppm/temperature			18. Toxic substances properly identified, stored and used	
	11. Proper disposition of returned, previously served or reconditioned			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	Demonstration of Knowledge/ Personnel		Compliance Status	Food Temperature Control/ Identification	
OUT	IN	NO	NA	COS	R
	21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)			27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
	22. Food Handler/ no unauthorized persons/ personnel			28. Proper Date Marking and disposition	
	Safe Water, Recordkeeping and Food Package Labeling			29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips	
	23. Hot and Cold Water available; adequate pressure, safe			Permit Requirement, Prerequisite for Operation	
	24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled			30. Food Establishment Permit (Current & Valid)	
	Conformance with Approved Procedures			Utensils, Equipment, and Vending	
	25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions			X	X
	Consumer Advisory			31. Adequate handwashing facilities: Accessible and properly supplied, used	
	26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label			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	Prevention of Food Contamination		Compliance Status	Food Identification	
OUT	IN	NO	NA	COS	R
	34. No Evidence of Insect contamination, rodent/other animals			41. Original container labeling (Bulk Food)	
	35. Personal Cleanliness/eating, drinking or tobacco use			Physical Facilities	
	36. Wiping Cloths; properly used and stored			42. Non-Food Contact surfaces clean	
	37. Environmental contamination			43. Adequate ventilation and lighting; designated areas used	
	38. Approved thawing method			44. Garbage and Refuse properly disposed; facilities maintained	
	Proper Use of Utensils			45. Physical facilities installed, maintained, and clean	
	39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used			46. Toilet Facilities; properly constructed, supplied, and clean	
	40. Single-service & single-use articles; properly stored and used			47. Other Violations	

Received by:	Print: EDWARD RIOS	Title: Person In Charge/ Owner
Inspected by:	Print: JEFFREY CARRIZALES	Business Email:

Retail Food Establishment Inspection Report

Establishment Name: SCHOTT'S MEAT MARKET	Physical Address: 12952 BANDERA RD 101	City/State: HELOTES/ Tx	License/Permit # 005241	Page <u>2</u> of <u>2</u>
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TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
NO HOT FOODS TO VERIFY					

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Observations and Corrective Actions
	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
	In process of renewing Food Manager certification.
	***** POST MOST RECENT INSPECTION REPORT IN PUBLIC VIEW. *****
2	OBSERVED: MEATS IN COLD HOLD CASE IN MARKET WERE AT 47F.
27	OBSERVED: DISPLAY CASE IN MARKET WAS RANGING BETWEEN 44F TO 51F. DISPLAY CASE WAS AT 44F. WAS RESET TO 38F TO ENSURE TEMPERATURE IS AT 41F AND BELOW.
28	OBSERVED: ALL MEATS AND PREPACKAGED FOODS MUST HAVE AN EXPIRATION DATE. MUST COMPLY WITH THE TEXAS FOOD ESTABLISHMENT REGULATIONS
33	OBSERVED: THREE COMPARTMENT SINK TOO SMALL NEEDS TO BE LARGER TO ENSURE LARGEST EQUIPMENT CAN BE SUMBERGED IN WATER.
33	THREE COMPARTMENT SINK MISSING DRAIN BOARD. NEED TO INSTALL DRAIN BOARD FOR SINK FOR DISH WASHING. ENSURE DISH WASHING IS CONDUCTED IN THREE COMPARTMENT SINK AND NO OTHER SINK.
	** FOR PREVENTIVE MAINTENANCE, INSTALL BACK FLOW PREVENTOR ON FAUCET PRIOR TO CONNECTEDING ANY HOSE WITH SPRAY GUN. MUST BE IN COMPLIANCE WITH ASSE1001.
	** PLACE A THERMOMETER IN MEAT CASE IN EVERY OTHER DOOR TO ENSURE ACCURATE TEMPERATURE READING.
	** REPLACE MISSING COVERED TRASH CAN IN RESTROOM.

Received by: (signature) <i>Joshua Salinas</i>	Print: JOSHUA SALINAS	Title: Person In Charge/ Owner
Inspected by: (signature) <i>Jeffrey Carrizales</i>	Print: JEFFREY CARRIZALES	Samples: Y N # collected

Retail Food Establishment Inspection Report

Date: 4/6/2024	Time in:	Time out:	License/Permit # 005568	Est. Type Restaurant	Risk Category 3	Page 1 of 2
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Purpose of Inspection: I-Compliance <input checked="" type="checkbox"/> 2-Routine <input type="checkbox"/> 3-Field Investigation <input type="checkbox"/> 4-Visit <input type="checkbox"/> 5-Other <input type="checkbox"/> TOTAL/SCORE			
Establishment Name: SLIM CHICKENS	Contact/Owner Name:	* Number of Repeat Violations: <input type="text"/>	92
Physical Address: 12530 BANDERA RD	City/County: HELOTES/BXR	Zip Code: 78023 Phone: (210) 236 - 9640	

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

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days					
Demonstration of Knowledge/ Personnel					
OUT	IN	NO	NA	COS	R

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First					
Prevention of Food Contamination					
OUT	IN	NO	NA	COS	R

Received by: (signature) <i>Alfonso Rivera</i>	Print: ROBERT TINAJERO	Title: Person In Charge/ Owner
INSPECTED BY: (signature) <i>Jeffrey Carrizales</i>	Print: JEFFREY CARRIZALES	Business Email:

Retail Food Establishment Inspection Report

Establishment Name: SLIM CHICKENS	Physical Address: 12530 BANDERA RD	City/State: HELOTES/TX	License/Permit # 005568	Page <u>2</u> of <u>2</u>
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TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
CHICKEN TENDERS - WALK IN COOLER	36F				
CHICKEN WINGS - COLD HOLD	38F				
NO HOT FOODS TO VERIFY					

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Observations and Corrective Actions
	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 Manager certification in compliance. Exp: 7/3/2024
	***** POST MOST RECENT INSPECTION REPORT IN PUBLIC VIEW. *****
19	OBSERVED: HOT WATER IN HAND SINK IN BACK AREA NOT WORKING.
19	OBSERVED: DRAINS NEED TO HAVE AT LEAST A 1" AIR GAP BETWEEN DRAIN AND PIPES.
20	OBSERVED: DRAIN IN BACK AREA UNDERNEATH TANKLESS WATER HEATER CLOGGED.
23	OBSERVED: HOT WATER WAS AT 101F DROPPED TO 94F. OBTAIN A LICENSED TECHNICIAN AND HAVE WATER HEATER CHECKED TO ENSURE HOT WATER IS AT A MINIMUM OF 110F. READING 140 AT BACK BUT ONLY 94F. COMES OUT IN SINKS.
	OBTAIN A LICENSED PLUMBER TO FIX LEAKING FAUCETS, CREATE AIR GAP FOR DRAINS AND UNCLOG DRAINS.

Received by: <i>Alexandro Rivera</i> <small>(signature)</small>	Print: ROBRT TINAJERO	Title: Person In Charge/ Owner
Inspected by: <i>Jeffrey Carrizales</i> <small>(signature)</small>	Print: JEFFREY CARRIZALES	Samples: Y N # collected

Retail Food Establishment Inspection Report

Date: 4/6/2024	Time in:	Time out:	License/Permit # COULD NOT VERIFY PERMIT	Est. Type Restaurant	Risk Category 2	Page 1 of 2
Purpose of Inspection:		1-Compliance <input checked="" type="checkbox"/> 2-Routine <input type="checkbox"/> 3-Field Investigation <input type="checkbox"/> 4-Visit <input type="checkbox"/> 5-Other <input type="checkbox"/>		TOTAL/SCORE		
Establishment Name: SUBWAY			Contact/Owner Name:		* Number of Repeat Violations: _____ ✓ Number of Violations COS: _____	
Physical Address: 12952 BANDERA RD 110			City/County: HELOTES/BXR		Zip Code: 78023 Phone: (210) 695-8765	
						91

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		
OUT	IN	NO	NA	COS	OUT	R
Time and Temperature for Food Safety (F = degrees Fahrenheit)				Employee Health		
					12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
X					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				Compliance Status		
OUT	IN	NO	NA	COS	OUT	R
Demonstration of Knowledge/ Personnel				Food Temperature Control/ Identification		
X					X	
					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	
					X	
					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						
Compliance Status				Compliance Status		
OUT	IN	NO	NA	COS	OUT	R
Prevention of Food Contamination				Food Identification		
					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	
					Proper Use of Utensils	
					47. Other Violations	

Received by:	Print: MANUAL VEGA	Title: Person In Charge/ Owner
Inspected by:	Print: JEFFREY CARRIZALES	Business Email:

Retail Food Establishment Inspection Report

Establishment Name: SUBWAY	Physical Address: 12952 BANDERA RD 110	City/State: HELOTES/TX	License/Permit #	Page <u>2</u> of <u>2</u>
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TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
SOUP - HOT HOLD	149F				
MEATBALLS - HOT HOLD	149F				

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:
	***** POST MOST RECENT INSPECTION REPORT IN PUBLIC VIEW. *****
2	OBSERVED: FOOD IN REACH IN COOLER IN FRONT AREA WAS AT 51F.
21	Observed: No "Certified Food Program Manager" present during operational hours of open food handling. ENSURE THAT A CERTIFIED FOOD PROGRAM MANAGER IS PRESENT DURING ALL HOURS OF OPEN FOOD HANDLING.
27	Observed: Reach in cooler in kitchen temperature is at 51F well above the 41F. OBTAIN A LICENSED TECHNICIAN AND ENSURE COLD HOLD UNIT IS FIXED AND IS AT 41 AND BELOW.
30	OBSERVED: COULD NOT VERIFY PERMIT. FOOD ESTABLISHMENT PERMIT MUST RENEWED AND POSTED IN PUBLIC VIEW IF NOT DONE SO YET, PLEASE CONTACT CITY OF HELOTES AND RENEW PERMIT OR ENSURE PERMIT IS POSTED.

Received by: (signature)	Print: MANUAL VEGA	Title: Person In Charge/ Owner
Inspected by: (signature)	Print: JEFFREY CARRIZALES	Samples: Y N # collected