



**Hidalgo County Health Department**  
**Environmental Health Division**  
 1304 S. 25th • Edinburg, TX 78539  
 Phone (956) 383-0111 • Fax: (956) 383-7351  
**Food Service Establishment Inspection Report**

# Of Employees: \_\_\_\_\_

I.D.#: 2079

<i>ur</i>	<i>3/5/09</i>	<i>10:15</i>	<i>10:45</i>	<i>2079</i>	<i>Exempt</i>	<i>HST</i>
San Code	Date	Time In	Time Out	Establishment Number	Permit Number	Risk Category

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

Establishment: *North Alamo Elem.* Owner: *P.S.S.A.I.S.D*

Physical Address: *733 N. Alamo Rd.* Zip: \_\_\_\_\_ Phone: ( ) *702 650*

OUT 5 Pts.	IN	NA	NO	COS	Food (PHF) Temperature/Time Requirements Violations Require Immediate Corrective Action	Remarks
	/				1. Proper Cooling for Cooked/Prepared Food	
	/				2. Cold Hold (41 degrees Fahrenheit /45 degrees Fahrenheit)	
	/				3. Hot Hold (135 degrees Fahrenheit)	
	/				4. Proper Cooking Temperatures	
	/				5. Rapid Reheating (165 degrees Fahrenheit In 2 Hrs.)	

Item/Location/Temperature	Temp	Remarks
<i>Steak Temp</i>	<i>140°</i>	
<i>Mashed Pot.</i>	<i>145°</i>	
<i>Stew</i>	<i>145°</i>	
<i>Milk</i>	<i>40°</i>	

OUT 4 Pts.	IN	NA	NO	COS	Personnel/Handling Source Requirements Violations Require Immediate Corrective Action:	Remarks
	/				6. Personnel with Infections Restricted/ Excluded	
	/				7. Proper/Adequate Handwashing	
	/				8. Good Hygienic Practices (Eating/Drinking/Smoking/Other)	<i>Just keep down</i>
	/				9. Approved Source/Labeling	<i>Chad Alvarado</i>
	/				10. Sound Condition	
	/				11. Proper Handling of Ready-To-Eat Foods	
	/				12. Cross-Contamination of Raw/Cooked Foods/Other	
	/				13. Approved Systems (HACCP Plans/Time as Public Health Control)	
	/				14. Water Supply - Approved Sources/Sufficient Capacity/Hot and Cold Under Pressure	

OUT 3 Pts.	IN	NA	NO	COS	Facility and Equipment Requirements Violations Require Immediate Corrective Action, Not to Exceed 10 days.	Remarks
	/				15. Equipment Adequate to Maintain Product Temperature	
	/				16. Handwash Facilities Adequate and Accessible	
	/				17. Handwash Facilities with Soap and Towels	
	/				18. No Evidence of Insect Contamination	
	/				19. No Evidence of Rodents/Other Animals	
	/				20. Toxic Items Properly Labeled/Stored/Used	
	/				21. Manual/Mechanical Warewashing and Sanitizing at ( ) ppm/Temperature	
	/				22. Manager Demonstration of Knowledge/Certified Food Manager	
	/				23. Approved Sewage/Wastewater Disposal System, Proper Disposal	
	/				24. Thermometers Provided/Accurate/Properly Calibrated (±2 degrees Fahrenheit)	
	/				25. Food Contact Surfaces of Equipment and Utensils Cleaned/Sanitized/Good Repair	
	/				26. Posting of Consumer Advisories (Heimlich/Disclosure/Reminder/Buffer Plate)	
	/				27. Food Establishment Permit <i>Exempt</i>	

Subtotal **Other Violations - Require Corrective Action, Not to Exceed 90 Days of the Next Inspection, Whichever Comes First**

5 Pts.			Inspected by: _____ Received by: _____	Print: <i>Jose L. ...</i> Print: <i>IRMA ZAPATA</i> Title: <i>Manager</i>	<b>ANNUAL FEE</b> <b>\$80.00</b> OR <b>\$100.00</b>
4 Pts.					
3 Pts.					

Total *5*