



# 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: 2  
I.D.#: 10827

San Code	Date	Time in	Time Out	Establishment Number	Permit Number	Risk Category
	7-8-09	11:09	12:00		43236	H

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

Establishment: Pollos Asados Owner: Rosa Maria Cruz  
Physical Address: MECY 455 + Boca Alamo Zip: 78116 Phone: (946) 470-5569

OUT 5 Pts.	IN	NA	NO	COS	Food (PHF) Temperature/Time Requirements	Remarks
					Violations Require Immediate Corrective Action	
					1. Proper Cooling for Cooked/Prepared Food	
					2. Cold Hold (41 degrees Fahrenheit /45 degrees Fahrenheit)	<u>Fridge 40F</u>
					3. Hot Hold (135 degrees Fahrenheit)	
					4. Proper Cooking Temperatures	<u>Fryer 0F</u>
					5. Rapid Reheating (165 degrees Fahrenheit In 2 Hrs.)	

Item/Location/Temperature	<u>Cotillas 160F</u>	<u>Fajita 161F</u>	<u>Chicken 160F</u>
---------------------------	----------------------	--------------------	---------------------

OUT 4 Pts.	IN	NA	NO	COS	Personnel/Handling Source Requirements	Remarks
					Violations Require Immediate Corrective Action	
					6. Personnel with Infections Restricted/ Excluded	
					7. Proper/Adequate Handwashing	
					8. Good Hygienic Practices (Eating/Drinking/Smoking/Other)	
					9. Approved Source/Labeling	
					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	Remarks
					Violations Require Immediate Corrective Action; Not to Exceed 10 days	
					15. Equipment Adequate to Maintain Product Temperature	
					16. Handwash Facilities Adequate and Accessible	
					17. Handwash Facilities with Soap and Towels	<u>Hand sink</u>
					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	<u>Proper Disposal</u>
					24. Thermometers Provided/Accurate/Properly Calibrated (±2 degrees Fahrenheit)	<u>Trash can w/ lid</u>
					25. Food Contact Surfaces of Equipment and Utensils Cleaned/Sanitized/Good Repair	
					26. Posting of Consumer Advisories (Harmful/Disclosure/Reminder/Buffer Plate)	
					27. Food Establishment Permit	<u>4-15</u>

Subtotal 5 Pts. 4 Pts. 3 Pts. 2

ANNUAL FEE \$50.00 OR \$100.00

Total 6 Inspected by: [Signature] Print: Luis Galvan  
F/U Yes/No Received by: [Signature] Print: \_\_\_\_\_ Title: \_\_\_\_\_