



Dallas County Health and Human Services - Environmental Health Division

Retail Food Establishment Inspection Report

2377 N. STEMMONS FRWY., RM 607, DALLAS, TX 75207 214-819-2115 FAX: 214-819-2868

Date: 1/22/2021	Time in: 1:00	Time out:	License/Permit #: <u>11771 201903</u>	Est. Type:	Risk Category:	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	TOTAL SCORE
Establishment Name: <u>Corona's</u>			Contact/Owner Name:		* Number of Repeat Violations: <u> </u> ✓ Number of Violations COS: <u> </u>	
Physical Address: <u>4208 Oaklawn</u>			City/County: <u>DD</u>	Zip Code: <u>75219</u>	Phone:	Follow-up: Yes No (circle one) (3) At

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 with 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
	O	I	N	N	C	
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 <u>0 ppm/temperature</u>		/	/			
11. Proper disposition of returned, previously served or reconditioned		/	/			
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						
Compliance Status						R
	O	I	N	N	C	
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/Buffer Plate)/ Allergen Label		/	/			
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						
Compliance Status						R
	O	I	N	N	C	
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		/	/			
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		/	/			
47. Other Violations		/	/			

Received by: <u>[Signature]</u>	Print: <u>Sean Gilmore</u>	Title: Person In Charge/ Owner
Inspected by: <u>[Signature]</u>	Print: <u>S</u>	Business Email:



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Establishment Name: <i>Caribones</i>	Physical Address: <i>4208 Oak Lawn Ave</i>	City/State: <i>DFW</i>	License/Permit #	Page <i>22</i> of <i>2</i>
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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:
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10	Dishmachine has no sanitizer ↳ cannot use until sanitizer added and sanitizing cycle stopped
9	Recommend scooping ice for portions to prevent cross-contamination (OS)

Received by: (signature) <i>[Signature]</i>	Print: <i>Sean Gilmore</i>	Title: Person In Charge/Owner
Inspected by: (signature) <i>Analisa Gutierrez</i>	Print:	Samples: Y N # Collected _____