

# Food Establishment Inspection Report



Wichita Falls - Wichita County  
Public Health District  
1700 Third Street  
Wichita Falls, TX 76301  
940-761-7800

SITE NO.	INV NO.	IR NO.	DATE	INSPECTION TIME	INSPECTOR
756	1		03/23/2010		O'Neal, Robbie

SITE INFORMATION	INVENTORY/MANAGER	SERVICE TYPE/FREQUENCY
DINSMORE ELEMENTARY SCHOOL 700 S MAIN ELECTRA TX 76360 940-392-2330	Process 3 - Exempt	Inspection- Regular Inspected 2 Times per Year

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**Violations: Critical - 1 Non-Critical - 6 Score: 97**

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## CRITICAL VIOLATIONS SUMMARY

CODE	DESCRIPTION	POINTS	CORRECTED
17	Handwash Facilities with Soap & Towels	3	_____

## NON-CRITICAL VIOLATIONS SUMMARY

CODE	DESCRIPTION	POINTS	CORRECTED
28	OTHER VIOLATIONS (6)	0	_____

## CRITICAL VIOLATIONS DETAIL

CODE	DESCRIPTION
17	<p>Texas Food Establishment Rules</p> <p>Page 122 §229.167 (e) Handwashing facilities. (1) Minimum number. Handwashing facilities shall be provided as specified under §229.166(g)(1) of this title.</p> <p>(2) Handwashing cleanser, availability. Each handwashing lavatory or group of 2 adjacent lavatories shall be provided with a supply of hand cleaning liquid, powder, or bar soap.</p> <p>(3) Hand drying provision. Each handwashing lavatory or group of adjacent lavatories shall be provided with:</p>

**CODE            DESCRIPTION**

(A) individual, disposable towels;  
 (B) a continuous towel system that supplies the user with a clean towel; or  
 (C) a heated-air hand drying device.

To Wit:            No hand drying provisions were available at the handwash facilities in the buffet line.

To Correct:      Hand drying provisions must be available at the handwash facilities in the buffet line.  
 Corrections must be made immediately.

**NON-CRITICAL VIOLATIONS DETAIL****CODE            DESCRIPTION**

28                Texas Food Establishment Rules

OTHER VIOLATIONS- REQUIRE CORRECTIVE ACTION , NOT TO EXCEED 90 DAYS  
 OR NEXT INSPECTION, WHICHEVER COMES FIRST. (6)

To Wit:            need to-up-grade to commerial equipment , freezers,refrigerators,microwaves,can  
 openers,ect..... 3rd notice

**I HEREBY, ACKNOWLEDGE THE ISSUANCE AND RECEIPT OF THIS OFFICIAL Food Establishment Inspection Report.**

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 Robbie O'Neal, Public Health Inspector II

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 OWNER / MANAGER SIGNATURE

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 OWNER / MANAGER PRINT NAME