

# Food Establishment Inspection Report



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

**SITE NO.** 1017    **INV NO.** 1    **IR NO.**    **DATE** 02/04/2010    **INSPECTION TIME**    **INSPECTOR** Railsback, Brian

**SITE INFORMATION**  
DOLLAR SAVER #12  
711 CENTRAL FRWY  
WICHITA FALLS TX 76306  
940-322-3933

**INVENTORY/MANAGER**  
Process 1

**SERVICE TYPE/FREQUENCY**  
Inspection- Regular  
Inspected 2 Times per Year

---

---

**Violations: Critical - 3 Non-Critical - 2 Score: 91**

---

---

### CRITICAL VIOLATIONS SUMMARY

<u>CODE</u>	<u>DESCRIPTION</u>	<u>POINTS</u>	<u>CORRECTED</u>
24	Thermometers Provided/Accurate/Properly Calibrated +/- 2 F	3	_____
25	Food Contact Surfaces-Cleaned/Sanitized/Good Repair/Storage	3	_____
26	Posting Consumer Advisories- Heimlich/Raw Shellfish/Bufferet	3	02/04/2010

---

---

### NON-CRITICAL VIOLATIONS SUMMARY

<u>CODE</u>	<u>DESCRIPTION</u>	<u>POINTS</u>	<u>CORRECTED</u>
28	OTHER VIOLATIONS	0	_____
28	OTHER VIOLATIONS	0	_____

---

---

### CRITICAL VIOLATIONS DETAIL

<u>CODE</u>	<u>DESCRIPTION</u>
24	Texas Food Establishment Rules  Page 77 §229.165(e) (e) Accuracy of temperature measuring devices, food. (1) Temperature measuring device, food. (A) Food temperature measuring device that are scaled only in Celsius or dually scaled in Celsius and Fahrenheit shall be accurate to ±1 degrees Celsius in the intended

<u>CODE</u>	<u>DESCRIPTION</u>
	<p>range of use.</p> <p>(B) Food temperature measuring device that are scaled only in Fahrenheit shall be accurate to <math>\pm 2</math> degrees Fahrenheit in the intended range of use.</p> <p>(2) Temperature measuring devices, ambient air and water.</p> <p>#24</p> <p>78</p> <p>§229.165(e) §229.165(f)</p> <p>(A) Ambient air and water temperature measuring device that are scaled in Celsius or dually scaled in Celsius and Fahrenheit shall be designed to be easily readable and accurate to <math>\pm 1.5</math> degrees Celsius in the intended range of use.</p> <p>(B) Ambient air and water temperature measuring device that are scaled only in Fahrenheit shall be accurate to <math>\pm 3</math> degrees Fahrenheit in the intended range of use.</p>
To Wit:	The walkin refrigerator in the food establishment did not have a readily available and visible thermometer.
To Correct:	The walkin refrigerator in the food establishment must have a readily available and visible thermometer. Corrections must be made within 14 days.
25	<p>Page 76</p> <p>§229.165(d)</p> <p>(d) Cleanability.</p> <p>(1) Food-contact surfaces. Multiuse food-contact surfaces shall be:</p> <p>(A) smooth;</p> <p>(B) free of breaks, open seams, cracks, chips, inclusions, pits, and similar imperfections;</p> <p>(C) free of sharp internal angles, corners, and crevices;</p> <p>(D) finished to have smooth welds and joints; and</p> <p>(E) except as specified in subparagraph (B) of this paragraph, accessible for cleaning and inspection by one of the following methods:</p> <p>(i) without being disassembled;</p> <p>(ii) by disassembling without the use of tools; or</p> <p>(iii) by easy disassembling with the use of handheld tools commonly available to maintenance and cleaning personnel such as screwdrivers, pliers, and wrenches.</p> <p>(2) Paragraph (5) of this subsection does not apply to cooking oil storage tanks, distribution lines for cooking oils, or beverage syrup lines or tubes.</p> <p>(3) Cleaned in place (CIP) equipment.</p> <p>(A) CIP equipment shall meet the characteristics specified under paragraph (1) of this subsection and shall be designed and constructed so that:</p> <p>(i) cleaning and sanitizing solutions circulate throughout a fixed system and contact all interior food-contact surfaces; and</p> <p>(ii) the system is self-draining or capable of being completely drained of cleaning and sanitizing solutions; and</p>
To Wit:	The shelves located in the storage room has adhering foreign material.
To Correct:	The shelves located in the storage room must be properly washed, rinsed and sanitized and free of foreign material. Corrections must be made immediately.
To Wit:	The ice scoop utensils used for the ice machine is not stored in a manner to prevent contamination of the product. (Corrected 02/04/10)

<u>CODE</u>	<u>DESCRIPTION</u>
To Correct:	During pauses in food preparation or dispensing, food preparation and dispensing utensils shall be stored: 1) in the food with handles above the top of the food and the container 2) on a clean portion of the food preparation table or cooking equipment when cleaned and sanitized at the prescribed intervals. 3) in running water of sufficient velocity to wash food particles away. 4) in a clean location if the utensil is used only for a non-potentially hazardous food. 5) in water maintained at 140 degrees F or greater. Corrections must be made immediately.
26	Pages 37, 55 &154 229.164(h); (r) & 173(b) - A card, sign or other effective means of notification shall be displayed to notify customers that clean tableware is to be used upon return to self-service areas. Food establishments which deliver shellfish to a consumer for raw consumption shall inform consumers of the significantly increased risk associated with certain especially vulnerable consumers eating such shellfish in raw or undercooked form. The Heimlich Maneuver Poster shall be in all food service establishments in a place conspicuous to employees or customers.
To Wit:	The Heimlich Maneuver poster is not conspicuously displayed in the facility. (Corrected 02/04/10)
To Correct:	The Heimlich Maneuver poster must be conspicuously displayed in the facility. Corrections must be made within 7 days.

**NON-CRITICAL VIOLATIONS DETAIL**

<u>CODE</u>	<u>DESCRIPTION</u>
28	OTHER VIOLATIONS- REQUIRE CORRECTIVE ACTION , NOT TO EXCEED 90 DAYS OR NEXT INSPECTION, WHICHEVER COMES FIRST.
To Wit:	Damaged floor tiles in food establishment
To Correct:	Replace any damaged floor tiles, 90 days
To Wit:	Repair hole in wall in restroom and storage room.

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

\_\_\_\_\_  
**Brian Railsback, Public Health Officer**

\_\_\_\_\_  
**OWNER / MANAGER SIGNATURE**

\_\_\_\_\_  
**OWNER / MANAGER PRINT NAME**