

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
71	2		08/09/2011		McKenzie, Suzanne

SITE INFORMATION	INVENTORY/MANAGER	SERVICE TYPE/FREQUENCY
MPEC-EXHIBIT HALL 1000 5TH ST WICHITA FALLS TX 76301 940-716-5505 Fax 940-716-5509	Snack Bar	Inspection- Regular Inspected 4 Times per Year

Scheduled calendar inspections.

Violations: Critical - 1 Score: 96

CRITICAL VIOLATIONS SUMMARY

<u>CODE</u>	<u>DESCRIPTION</u>	<u>POINTS</u>	<u>CORRECTED</u>
14	Water Supply - Approved/Adequate/Hot & Cold Under Pressure	4	_____

CRITICAL VIOLATIONS DETAIL

<u>CODE</u>	<u>DESCRIPTION</u>
14	<p>Texas Food Establishment Rules</p> <p>Page 105 thru 106 Water, Plumbing, and Waste. §229.166. (a)-(d) (a) Source. (1) Approved system. Drinking water shall be obtained from an approved source that is: (A) a public water system; or (B) a nonpublic water system that is constructed, maintained, and operated according to law. (2) System flushing and disinfection. A drinking water system shall be flushed and disinfected before being placed in service after construction, repair, or modification and after an emergency situation, such as a flood, that may introduce contaminants to the system. (3) Bottled drinking water. Bottled drinking water used or sold in a food establishment shall be obtained from approved sources in accordance with 21 CFR 129 - Processing and Bottling of Bottled Drinking Water.</p>

To Wit: The hot water generation and distribution system is not providing sufficiently heated water to meet the peak hot water demands throughout the food establishment.

CODE **DESCRIPTION**

Handwash sink

To Correct: The hot water generation and distribution system must provide sufficiently heated water to meet the peak hot water demands throughout the food establishment. Corrections must be made immediately.

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

Suzanne McKenzie, PUBLIC HEALTH OFFICER

OWNER / MANAGER SIGNATURE

OWNER / MANAGER PRINT NAME