

**Food Establishment Inspection Report**

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

<b>SITE NO.</b>	<b>INV NO.</b>	<b>IR NO.</b>	<b>DATE</b>	<b>INSPECTION TIME</b>	<b>INSPECTOR</b>
419	1		12/11/2009		McKenzie, Suzanne

**SITE INFORMATION**

MSU SNACKBAR-ARAMARK  
3410 TAFT # 23  
WICHITA FALLS TX 76308  
940-397-4424 Fax 940-397-4822

**INVENTORY/MANAGER**

Process 3  
PERRY MARTIN

**SERVICE TYPE/FREQUENCY**

Permit Inspection  
Permit Granted  
Inspected 4 Times per Year

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**Violations: Critical - 3 Non-Critical - 2 Score: 93**

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**CRITICAL VIOLATIONS SUMMARY**

<b><u>CODE</u></b>	<b><u>DESCRIPTION</u></b>	<b><u>POINTS</u></b>	<b><u>CORRECTED</u></b>
10	Sound Condition	4	12/11/2009
25	Food Contact Surfaces-Cleaned/Sanitized/Good Repair/Storage	3	12/11/2009
25	Food Contact Surfaces-Cleaned/Sanitized/Good Repair/Storage	3	12/11/2009

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**NON-CRITICAL VIOLATIONS SUMMARY**

<b><u>CODE</u></b>	<b><u>DESCRIPTION</u></b>	<b><u>POINTS</u></b>	<b><u>CORRECTED</u></b>
28	OTHER VIOLATIONS	0	12/11/2009
28	OTHER VIOLATIONS	0	_____

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**CRITICAL VIOLATIONS DETAIL**

<b><u>CODE</u></b>	<b><u>DESCRIPTION</u></b>
10	Texas Food Establishment Rules  §229.164. (a) Food. Condition safe, unadulterated, and honestly presented. Food shall be safe, unadulterated, and, as specified under subsection (q)(2) of this section, honestly presented.

To Wit: The bent canned goods are unsound and should not be sold, served or consumed.  
(Corrected 12/11/09)

<b><u>CODE</u></b>	<b><u>DESCRIPTION</u></b>
To Correct:	The bent canned goods must be sound to be sold, served or consumed. Corrections must be made immediately.
25	Texas Food Establishment Rules  Page 76 §229.165(d) (d) Cleanability. (1) Food-contact surfaces. Multiuse food-contact surfaces shall be: (A) smooth; (B) free of breaks, open seams, cracks, chips, inclusions, pits, and similar imperfections; (C) free of sharp internal angles, corners, and crevices; (D) finished to have smooth welds and joints; and (E) except as specified in subparagraph (B) of this paragraph, accessible for cleaning and inspection by one of the following methods: (i) without being disassembled; (ii) by disassembling without the use of tools; or (iii) by easy disassembling with the use of handheld tools commonly available to maintenance and cleaning personnel such as screwdrivers, pliers, and wrenches. (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. (3) Cleaned in place (CIP) equipment. (A) CIP equipment shall meet the characteristics specified under paragraph (1) of this subsection and shall be designed and constructed so that: (i) cleaning and sanitizing solutions circulate throughout a fixed system and contact all interior food-contact surfaces; and (ii) the system is self-draining or capable of being completely drained of cleaning and sanitizing solutions; and
To Wit:	The prep table located in the food preparation area is being used for a personal coat storage area. (Corrected 12/11/09)
To Correct:	The prep table located in the food preparation area must be properly washed, rinsed and sanitized and free of is being used for a personal coat storage area. Corrections must be made immediately.
To Wit:	The three compartment sink located in the food preparation area is rusted and cannot be properly cleaned and sanitized. (Corrected 12/11/09)
To Correct:	The three compartment sink located in the food preparation area must be free of rust to permit it to be properly cleaned and sanitized. Corrections must be made immediately.

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### **NON-CRITICAL VIOLATIONS DETAIL**

<b><u>CODE</u></b>	<b><u>DESCRIPTION</u></b>
28	OTHER VIOLATIONS- REQUIRE CORRECTIVE ACTION , NOT TO EXCEED 90 DAYS OR NEXT INSPECTION, WHICHEVER COMES FIRST.
To Wit:	tiles need to be replaced on the serving line. (Corrected 12/11/09)
To Wit:	They took out the handwash sink in the clean end of the dishwashing area need to replace

**CODE**            **DESCRIPTION**

ASAP.

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

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**Suzanne McKenzie, PUBLIC HEALTH OFFICER**

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**OWNER / MANAGER SIGNATURE**

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**OWNER / MANAGER PRINT NAME**