

# Food Establishment Inspection Report



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

**SITE NO.** 276    **INV NO.** 1    **IR NO.**    **DATE** 08/26/2010    **INSPECTION TIME**    **INSPECTOR** Baxter, Mike

**SITE INFORMATION**  
SHOP AND GO #2  
1431 32ND ST  
WICHITA FALLS TX 76302  
940-767-0135

**INVENTORY/MANAGER**  
Process 1

**SERVICE TYPE/FREQUENCY**  
Permit Inspection  
Permit Granted  
Inspected 2 Times per Year

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**Violations:    Critical - 3    Non-Critical - 1    Score: 91**

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### CRITICAL VIOLATIONS SUMMARY

<u>CODE</u>	<u>DESCRIPTION</u>	<u>POINTS</u>	<u>CORRECTED</u>
15	Equipment Adequate to Maintain Product Temperature	3	_____
17	Handwash Facilities with Soap & Towels	3	_____
25	Food Contact Surfaces-Cleaned/Sanitized/Good Repair/Storage	3	_____

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### NON-CRITICAL VIOLATIONS SUMMARY

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

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### CRITICAL VIOLATIONS DETAIL

<u>CODE</u>	<u>DESCRIPTION</u>
15	Texas Food Establishment Rules  229.165(g)(1) - Page 84 (g) Equipment, numbers and capacities. (1) Cooling, heating, and holding capacities. Equipment for cooling and heating food, and holding cold and hot food, shall be sufficient in number and capacity to provide food temperatures as specified under §229.164 of this title.

To Wit:            reach in ref. not working

<u>CODE</u>	<u>DESCRIPTION</u>
To Correct:	The reach in refrigerator needs to be in good working order or removed .
17	<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: (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.</p>
To Wit:	no soap in restroom hand wash sink
To Correct:	corrected
25	<p>Texas Food Establishment Rules</p> <p>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</p>
To Wit:	freezers need to be defrosted

**CODE            DESCRIPTION**

To Correct:    the freezers need to be defrosted

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

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

To Wit:            damaged ceiling tiles

To Correct:    Damaged ceiling tiles to be replaced

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

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**Mike Baxter, Public Health Officer**

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**OWNER / MANAGER SIGNATURE**

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**OWNER / MANAGER PRINT NAME**