

Food Establishment Inspection Report



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

SITE NO. 581 **INV NO.** 2 **IR NO.** **DATE** 03/02/2010 **INSPECTION TIME** **INSPECTOR** Baxter, Mike

SITE INFORMATION

VFW DAVID GIBBS #8878
4005 SEYMOUR HWY
WICHITA FALLS TX 76309
940-691-9002

INVENTORY/MANAGER

Process I - Exempt

SERVICE TYPE/FREQUENCY

Permit Inspection
Permit Granted
Inspected 2 Times per Year

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

CRITICAL VIOLATIONS SUMMARY

<u>CODE</u>	<u>DESCRIPTION</u>	<u>POINTS</u>	<u>CORRECTED</u>
24	Thermometers Provided/Accurate/Properly Calibrated +/- 2 F	3	_____

NON-CRITICAL VIOLATIONS SUMMARY

<u>CODE</u>	<u>DESCRIPTION</u>	<u>POINTS</u>	<u>CORRECTED</u>
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 range of use. (B) Food temperature measuring device that are scaled only in Fahrenheit shall be accurate to ±2 degrees Fahrenheit in the intended range of use. (2) Temperature measuring devices, ambient air and water. #24

<u>CODE</u>	<u>DESCRIPTION</u>
78	§229.165(e) §229.165(f) (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 ± 1.5 degrees Celsius in the intended range of use. (B) Ambient air and water temperature measuring device that are scaled only in Fahrenheit shall be accurate to ± 3 degrees Fahrenheit in the intended range of use.
To Wit:	refrigerator has no thermometer
To Correct:	The refrigerators are to have thermometers.

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:	Kitchen has household microwave,household ref,no hand wash sink and ceiling tiles not smooth and cleanable.
To Correct:	This permit is for bar,Was advised they do no cooking in the kitchen

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

Mike Baxter, Public Health Officer

OWNER / MANAGER SIGNATURE

OWNER / MANAGER PRINT NAME