

## **Food Establishment Inspection Report**



Houston Department of Health and Human Services

Sanitarian (Signature) Maurice Edwards (MAE1)

Establishment HISD FOOD SERVICE SUPPORT FACILITY

Environmental Health Division / Consumer Health Services Phone: 832.393.5100 Fax:832.393.5208						(ESTABLISHMENT)					
						Address 6801 BENNINGTON Zi				Zip <b>77</b>	028
www.houstontx.gov						Owner HOUSTON I.S.D.				Type Insp	
										Comp	plaint (003)
Date <b>10/01/2015</b>		Arrival 11:45 A	Dep M 01:	parture <b>35 PM</b>	Telephone				District 502		Score
			ermit Type		Certified Manager			<u></u>			
01/01/2016 F,G		F,G	i		ooranea Managor						
				Food T	omnoratu	ıres / Unit Te	mneratures				
Item/I	ocation		Temp	T 000 1	Item/Loc		Temp	ltem/l	Location	一	Temp
BEANS / Prep Area			60.00 ° F	SA	USAGE / Ho		181.00 ° F		Valk-In Cooler	-	40.00 ° F
CASE LOT ITEMS / Cold-Hold Unit			11.00 ° F			50 1 10 10 10 11 10 11 11 11 11 11 11 11	101.00	00		+	10.00
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										一	
				BSERVA	TIONS A	ND CORREC	TIVE ACTION	<u> </u>			
Code											Correct By
Code	de Items in violation to be corrected by the dates indicated or immediately.								+	Jonest by	
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HIGH TEMP DISH	WASHER 160	OR HIGI	HER								
									<del></del>		
Person in Charge (Signature)									Date:		

PG1 A-1

Date: 10/01/2015