# FOOD FACILITY INSPECTION REPORT

**Facility Name:** Hans Pavilion Kitchen  
**Address:**  
**Permit #:**  
**Exp. Date:**  
**Permit Holder:**  
**Type of Inspection:** Routine

<table>
<thead>
<tr>
<th>IN</th>
<th>N/O</th>
<th>N/A</th>
<th>COS</th>
<th>MAJ</th>
<th>OUT</th>
<th>Date: 2/27/18</th>
<th>Time In:</th>
<th>Time Out:</th>
</tr>
</thead>
</table>

**DEMONSTRATION OF KNOWLEDGE**

1. Food safety certification
   - **Food Safety Certification Name:** Not posted
   - **Expiration Date:**

**EMPLOYEE HEALTH & HYGIENIC PRACTICES**

2. Communicable disease: reporting, restrictions & exclusions
3. No discharge from eyes, nose & mouth
4. Proper eating, tasting, drinking or tobacco use

**PREVENTING CONTAMINATION BY HANDS**

5. Hands clean & properly washed; gloves properly used
6. Adequate hand washing facilities supplied & accessible

**TIME & TEMPERATURE RELATIONSHIPS**

7. Proper hot and cold holding temperatures
8. Time as a public health concern; procedures & records
9. Proper cooling methods
10. Proper cooking time & temperatures
11. Proper reheating procedures for hot holding

**PROTECTION FROM CONTAMINATION**

12. Returned & reserve of food
13. Food in good condition, safe & unadulterated
14. Food contact surfaces: clean & sanitized
   - **Sanitizer:**
     - Chlorine
     - Quaternary ammonium
     - Hot water
     - Other
     - **Sanitizer Concentration:** (parts per million)
     - **Location:**

**FOOD FROM APPROVED SOURCES**

15. Food obtained from approved sources
16. Compliance with shell stock tags, condition & display
17. Compliance with Gulf Oyster Regulations

**CONFORMANCE WITH APPROVED PROCEDURES**

18. Compliance with variance, specialized processes, reduced oxygen packaging & HACCP plan

**CONSUMER ADVISORY**

19. Consumer advisory provided for raw/undercooked foods

**HIGHLY SUSCEPTIBLE POPULATIONS**

20. Licensed health care facilities, public & private schools; prohibited foods not offered

**HOT WATER/ COLD WATER**

21. Hot & cold water available:
   - **Cold Temp.**
   - **Hot Temp.**

**LIQUID WASTE DISPOSAL**

22. Sewage & wastewater properly disposed

**VERMIN**

23. No rodents, insects, birds or animals

See reverse side for the code sections and general requirements that correspond to each violation listed above.

Received by (print):  
Received by (signature):  
Title:  
Specialist (print):  
Specialist (signature):  
Phone:  

**REINSPECTION DATE**