Retail Food Establishment Inspection Report First aid kit Allergy policy Vomit clean up Employee health																							
Date: Time in: Time out: License/Pe 10/18/2021 11:35 12:57 FS-9														E	Est. Type	Risk Category	Page <u>1</u> of	f_2_					
10/10/2021 1.35 12.57 F3-9 Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain								_	4-In	ives	tiga	tior	1	5-CO/Constru	uction	6-Other	TOTAL/SC	ORE					
Establishment Name: Contact/Owner N King's Crab Shack Phuc Nguye							:						* Number of F ✓ Number of V										
Physical Address: Pest control :								H	lood	1 /6n	10	G	reas	e trap : 00/1000gal/3mc	 -	Follow-up: Yes	30/70	/C					
Compliance Status: Out = not in compliance IN = in compliance NO								$\mathbf{D} = \mathbf{n}\mathbf{c}$	ot obs	serve	ed	NA	= n	ot ap	, ,			violation W-Wa	ıtch				
Mark the appropriate points in the OUT box for each numbered item Mark V a checkmark in appropriate box for IN, NO, NA, COS Mark an in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																							
Compliance Status Time and Temperature for Food Safety 0 I N N C									R		0	nplia I	Ν	Ν	С			1 77 141		R			
U T	N	0	A	O S		egrees Fahrenheit)					U T	N	0	A	0 S								
3						-					•	~				knowledge, responsibilities, and reporting							
	~				2. Proper Cold Holding	temperature(41°F	F/ 45°F)					~				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth							
-	~				3. Proper Hot Holding to	emperature(135°F	F)				_	_				Preventing Contamination by Hands							
-	~				4. Proper cooking time a	and temperature				Ē		~				14. Hands cleaned and properly washed/ Gloves used properly Gloves used							
2				~	5. Proper reheating proc Hours)	cedure for hot hold	ding (165	5°F in 2				~			-	15. No bare hand c alternate method p		+					
3					6. Time as a Public Heal	lth Control: proce	edures &	records	\square			·				^							
_	~			<u> </u>						_	Highly Susceptible Populations 16. Pasteurized foods used; prohibited food not offered									_			
						proved Source					1	~				Pasteurized eggs u eggs cooke		required					
	~	 7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Pacific Plus/ US Foods 													Chemicals								
	8. Food Received at proper temperature											~				& Vegetables		d and properly store	d; Washing Fruits				
_			<u>.</u>	<u> </u>	Protection	from Contamin	ation			2	3	-	+			18. Toxic substance	y ces proper	ly identified, stored	and used	_			
	Protection from Contamination 9. Food Separated & protected, prevented during food								<u>_</u>						XX 7	ter/ Plumbing		-					
3					preparation, storage, display, and tasting 10. Food contact surfaces and Returnables ; Cleaned and							_				19. Water from ap	lled: proper						
3					Sanitized at <u>100</u> ppm/temperature						•	~				backflow device	proved so	urce, r funiting hista	med, proper				
	~				11. Proper disposition of reconditioned			•	~				20. Approved Sew disposal	vage/Wast	ewater Disposal Sys	tem, proper							
0	I	N	N	С				•	ints) R		0	I	N	Ν	С	rrective Action with				R			
U T	N	0	A	0 S	Demonstration of Knowledge/ Personnel 21. Person in charge present, demonstration of knowledge,						U T	N	0	A	0 S			are Control/ Identit					
	~				and perform duties/ Cert		2	2					27. Proper cooling Maintain Product		ised; Equipment Ad are	lequate to							
	22. Food Handler/ no unauthorized persons/ personnel									~				28. Proper Date M	÷	*							
Safe Water, Recordkeeping and Food Package Labeling								~				Thermal test strips		, accurate, and calibi	ated; Chemical/								
	23. Hot and Cold Water available; adequate pressure, safe											digital Permit Re	quiremen	nt, Prerequisite for	Operation								
2				1	24. Required records ava destruction); Packaged I	ailable (shellstock Food labeled	k tags; pa	rasite	\square									rmit (Current/insp		(t			
É					-	vith Approved P	rocedure	S				-						20 displaye					
	~				25. Compliance with Va HACCP plan; Variance processing methods; ma	ariance, Specialize obtained for spec	ed Proces vialized			2	2							facilities: Accessible		Τ			
				ı		sumer Advisory				2	2					designed, construc	ted, and u						
2					26. Posting of Consumer foods (Disclosure/Remin	nder/Buffet Plate))/ Allerge	en Label				~				Service sink or cur	rb cleanin						
0	Ι	N	N	C	Core Items (1 Poin	·	-	Corrective	Actio R		0	I	Ν	Ν	С	uys or Next Inspect			st	R			
U T	N	0	A	O S	Prevention of 34. No Evidence of Inse	of Food Contami		other			Т	N	0	A	0 S	41.Original contain		I Identification					
1					animals 35. Personal Cleanliness	-	-		\square		<u> </u>	~						-					
1					36. Wiping Cloths; prop				\square		4					42. Non-Food Con	•	sical Facilities					
┝	くく				37. Environmental conta				$\left - \right $	ľ	1	~	+					l lighting; designate	d areas used	+			
╞	י י				38. Approved thawing method					┝	_	v v	┥					perly disposed; facil		+			
							1	•	┥			45. Physical facilit	ties install	ed, maintained, and	clean	+							
-	Proper Use of Utensils 39. Utensils, equipment, & linens; properly used, stored,						┢	1	╡	┥			46. Toilet Facilitie	s; properl	y constructed, suppl	ied, and clean	+						
	~				dried, & handled/ In use 40. Single-service & sin		-	torad	Щ		<u> </u>	~				17 Other Wester	ne						
1					40. Single-service & sin and used			•	~				47. Other Violations										

Received by: (signature) Phuc Nguyen	Print: Phuc Nguyen	Title: Person In Charge/ Owner Owner
Inspected by: (signature) Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: King's Crab Shack		Physical Act 621 W	City/State: Rockw	al	I, TX	License/Permit # Page		Page	of		
Item/Location		Temp F	ATIONS Temp F	Т	Item/Loca	ation			emp F		
under counter freezer		_	Item/Location			100111 2000				in pr	
ambient		12	potatoes cooke		_						
under counter cooler/o	crab	37	potatoes and corn on top of other potatoe	^{ss} 45-48	3						
fish		35	WIF ambient	-4							
fish fried		195	small cold top back/sausag	• 40							
glass front cooler/ra	nch	39	boiled egg	40							
vegetable sauce in hot	well	105	under/boiled egg	g 40							
WIC/shrimp)	36									
oyster/fish		37/36									
	OBSERVATIONS AND CORRECTIVE ACTIONS										
Item AN INSPECTION OF Ye Number NOTED BELOW:	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:										
	front hand sink 100 F										
	Store employee items low and separate food, drinks, etc										
	Store sanitizer spray bottles low and separate, not next to tea stations										
	Avoid use of single use containers (styrofoam) as storage containers										
	Reminder after prepping shrimp, oysters to add ice to water to cold hold at 41 or below										
	Clean front under counter shelves and throughout/ equipment, shelves										
	Sani bucket setup well over 100 ppm chlorine sanitizer. Corrected on site.										
	Label all spray bottles/ store low and separate if chemicals										
	Hand sink near restrooms 100 F										
	Watch rope netting over prep area and front counter. Rusty shelves in WIC										
	Back hand sink 108 F										
	MUST keep oyster tags for 90 days and in chronological order Clean ice deflector panel/pink slime										
			as pieces can break	off/physi	Ca	al cont	amination				
			ively 2 hours to 165 F	on, pri j o							
			heat aggressively to 165. Out for	ess than 2 h	our	s. Heated	at time of inspect	tion to 165	5 F.		
1 Appears last night a	an order	of hot pot	atoes and corn were tossed o	n other pot	ato	es and n	ot cooled dowr	n properl	у		
27 Must reach 70 v	within	2 hours	then 4 hours to 41. Dis	scarded	as	never	reached 41	or bel	ow		
40 Avoid use of W	Valma	rt to sto	re food in WIC/use cle	ar NSF	ba	ags ins	tead				
34 Fruit flies in ba	ick mo	op drair	1								
	3 comp sink 129 F										
	Dishwasher hand sink blocked with buckets and wiping cloths. Keep accessible . Temp at 108 F										
	Best to hand mop to dry										
	Dishwasher sanitizing at 100 ppm chlorine sanitizer										
	Seal all holes in walls. Clean floors, walls, under equipment										
26 Consumer adv	Consumer advisory in to go menu but not on main menus or QR code. Must have.										
Received by: (signature)			Print:				Title: Person In (Charge/ Ov	vner		
Phuc Nguye	en		Phuc N	lguy	e	n	Owner	•			
(signature) Phuc Nguye Inspected by: (signature) Christy	(~~~	ton	Print:								
Form EH-06 (Revised 09-2015)	COV	iez, r	Christy C	UILEZ	, I	rs	Samples: Y N	# co	llected		