



Dallas County Health and Human Services - Environmental Health Division

Retail Food Establishment Inspection Report

2377 N. STEMMONS FRWY., RM 607, DALLAS, TX 75207 214-819-2115 FAX: 214-819-2868

Date: 9/22/2017 Time in: Time out: License/Permit # Est. Type Risk Category Page 1 of 2

Purpose of Inspection: 1-Compliance 2-Routine 3-Field Investigation 4-Visit 5-Other TOTAL SCORE

Establishment Name: Ed's Seafood Contact/Owner Name: * Number of Repeat Violations: 0 Number of Violations COS: 4

Physical Address: 4212 Goshdown the HP City/County: Zip Code: 75205 Phone: Follow-up: Yes No (circle one)

Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation

Mark the appropriate points in the OUT box for each numbered item Mark a checkmark in appropriate box for IN, NO, NA, COS Mark an asterisk "*" in appropriate box for R

Table with 2 columns: Compliance Status (OUT, IN, NO, NA, COS) and Description. Left column: Time and Temperature for Food Safety (1-6), Approved Source (7-8), Protection from Contamination (9-11). Right column: Employee Health (12-13), Preventing Contamination by Hands (14-15), Highly Susceptible Populations (16), Chemicals (17-18), Water/Plumbing (19-20).

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days

Table with 2 columns: Compliance Status (OUT, IN, NO, NA, COS) and Description. Left column: Demonstration of Knowledge/ Personnel (21-22), Safe Water, Recordkeeping and Food Package Labeling (23-24), Conformance with Approved Procedures (25), Consumer Advisory (26). Right column: Food Temperature Control/ Identification (27-29), Permit Requirement, Prerequisite for Operation (30), Utensils, Equipment, and Vending (31-33).

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First

Table with 2 columns: Compliance Status (OUT, IN, NO, NA, COS) and Description. Left column: Prevention of Food Contamination (34-38), Proper Use of Utensils (39-40). Right column: Food Identification (41), Physical Facilities (42-46), Other Violations (47).

Received by: (signature) Inspected by: (signature) Print: Jennifer Mathews Title: Person In Charge/ Owner Business Email:



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Establishment Name: Jo's Seafood Physical Address: 4212 Coulter Ave HP City/State: HP License/Permit # _____ Page 2 of 2

TEMPERATURE OBSERVATIONS

Item/Location	Temp.	Item/Location	Temp.	Item/Location	Temp.

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
30	<p>Need updated permit Mary / Highland Park Permit 214) 557-9409 Some food handlers expired update ASAP</p>
25	<p>Need copy of manufacturing license 512) 834-6626 Texas Department Food Manufacturers</p>

Received by: [Signature] Print: Jennifer Mathwig Title: Person In Charge/Owner
 Inspected by: [Signature] Print: _____ Samples: Y N # Collected _____