



Clay County Public Health
Division of Environmental Health, EHS
715 N 11th St. #303
Moorhead, MN 56560
218-299-5004

Type: Full
Date: 10/09/18
Time: 14:44:00
Report: 1202191001

Food and Beverage Establishment Inspection Report

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Location:

Pizza Hut (South) #2746
102 7th Street South
Moorhead, MN 56560
Clay County, 14

Establishment Info:

ID #: 1424
Risk: Medium
Announced Inspection: No

License Categories:

FBLB, FBSE

Expires on: 12/31/18

Operator:

NPC International Inc
James Schwartz
Phone #: 218-283-6400
ID #: 1424

The violations listed in this report include any previously issued orders and deficiencies identified during this inspection. Compliance dates are shown for each item.

The following orders previously issued between 10/12/15 and 03/28/17 have NOT been corrected.

6-500 Physical Facility Maintenance/Operation and Pest Control

6-501.12A

MN Rule 4626.1520 Clean and maintain clean all physical facilities.

CLEAN AND MAINTAIN CLEAN THE MOP SINK AREA FLOORS & WALLS, UNDER THE DISHWASHER AREA, AND UNDER THE EQUIPMENT AT THE SOUTH WALL. Repeat: Have done by 10-11-18.

Issued on: 10/12/15

Comply By: 10/14/15

4-600 Cleaning Equipment and Utensils

4-601.11C

MN Rule 4626.0840 Clean non-food contact surfaces of equipment and maintain free of accumulations of dust, dirt, food residue, and other debris.

CLEAN AND MAINTAIN FREE FROM FOOD DEBRIS, THE STORAGE AND PROOFER RACKS.
Repeat Item: Clean by 10-11-18.

Issued on: 03/28/17

Comply By: 04/01/17

The following orders were issued during this inspection.

4-500 Equipment Maintenance and Operation

4-501.114C1

**** Critical Item ****

MN Rule 4626.0805 Provide and maintain an approved chlorine chemical sanitizer solution that has a minimum concentration of 50 ppm and a minimum temperature of 75 degrees F (24 degrees C) for water with a pH of 8.1 to 10. The chlorine concentration must not exceed the amount specified on the manufacturer's label approved by the federal EPA.

DISHWASHER HAD SANITIZER LEVELS THAT WERE ACCEPTABLE AFTER OPERATOR PRESSED THE "PRIMING" BUTTON. EXPLAINED DURING INSPECTION, THAT THIS

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MACHINE MUST BE SANITIZING WITHOUT MANUAL EFFORT BY OPERATOR ON EACH LOAD.
CALL FOR SERVICE.

Comply By: 10/09/18

1-100 Food Manager Certification

1-101.01MN

MN Rule 4626.2010 Employ one full-time State certified food manager for the establishment.

OBSERVED SERVE SAFE CERTIFICATE, BUT NO MN CERTIFIED FOOD MANAGER CERTIFICATE
ON SITE. LEFT APPLICATION FOR OPERATOR TO APPLY FOR THIS CREDENTIAL.

Comply By: 11/28/18

4-600 Cleaning Equipment and Utensils

4-601.11C

MN Rule 4626.0840 Clean non-food contact surfaces of equipment and maintain free of accumulations of dust,
dirt, food residue, and other debris.

CLEAN AND MAINTAIN CLEAN THE FRYER SURFACES AND WALL SURFACES SURROUNDING
THE WING STREET FRYERS.

Comply By: 10/12/18

6-100 Physical Facility Construction Materials

6-101.11A1

MN Rule 4626.1325 Provide smooth, nonabsorbent, easily cleanable, durable floor, wall and ceiling surfaces.

SEVERAL AREAS OF THE CEILING ARE DIRTY AND/OR HAVE BROKEN CEILING TILES.
REPAIR/REPLACE/CLEAN CEILING SURFACES THROUGHT THE ESTABLISHMENT.

Comply By: 10/15/18

Surface and Equipment Sanitizers

Chlorine: = 50 PPM at Degrees Fahrenheit

Location: Rag Bucket

Violation Issued: No

Chlorine: = 50 PPM at Degrees Fahrenheit

Location: Dishwasher after Operator pressed "prime"

Violation Issued: No

Food and Equipment Temperatures

Process/Item: Cold Holding

Temperature: 40 Degrees Fahrenheit - Location: Shredded cheese in pizza make table.

Violation Issued: No

Process/Item: Cold Holding

Temperature: 39 Degrees Fahrenheit - Location: Cut tomatoes in walk-in cooler.

Violation Issued: No

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Process/Item: Cold Holding
Temperature: 39 Degrees Fahrenheit - Location: Peperoni's in pizza assembly area.
Violation Issued: No

Process/Item: Cold Holding
Temperature: 40 Degrees Fahrenheit - Location: Sauce in cooler table.
Violation Issued: No

Process/Item: Cold Holding
Temperature: 38 Degrees Fahrenheit - Location: Sauce in upper cooler.
Violation Issued: No

Total Critical Orders This Report:	1
Total Non-Critical Orders This Report:	5

Discussed the process for applying for the MN Certified Food Manager Credential. Discussed policy for limiting bare hand contact with ready-to-eat food. Discussed employee illness policy. Manager showed evidence of an employee illness log that is in place. -Appears to be a high turnover rate of staff at this establishment.

NOTE: All new food equipment must meet the applicable standards of NSF International. Plans and specifications must be submitted for review and approval prior to new construction, remodeling or alterations.

I acknowledge receipt of the Clay County Public Health inspection report number 1202191001 of 10/09/18.

Certified Food Manager:_____

Certification Number: _____ Expires: ____ / ____ / ____

Inspection report reviewed with person in charge and mailed.

Signed:_____

Establishment Representative

Signed:_____

Kent Severson
Sanitarian
Moorhead
218-299-7216
kent.severson@co.clay.mn.us

Report #: 1202191001

Food Establishment Inspection Report



Clay County Public Health
Division of Environmental Health, EHS
715 N 11th St. #303
Moorhead, MN 56560

No. of RF/PHI Categories Out

2

Date 10/09/18

No. of Repeat RF/PHI Categories Out

0

Time In 14:44:00

Legal Authority MN Rules Chapter 4626

Time Out

Pizza Hut (South) #2746

Address

102 7th Street South

City/State

Moorhead, MN

Zip Code

56560

Telephone

218-283-6400

License/Permit #

1424

Permit Holder

NPC International Inc

Purpose of Inspection

Full

Est Type

Risk Category

M

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/A) for each numbered item

Mark "X" in appropriate box for COS and/or R

IN= in compliance

OUT= not in compliance

N/A= not observed

N/A= not applicable

COS= corrected on-site during inspection

R= repeat violation

Compliance Status

COS

R

Demonstration of Knowledge

1A	IN	OUT	N/A	Certified food manager, duties		
1B	IN	OUT		PIC knowledgeable; duties & oversight		

Employee Health

2	IN	OUT		Management awareness; policy present		
3	IN	OUT		Proper use of reporting, restriction & exclusion		

Good Hygienic Practices

4	IN	OUT	N/A	Proper eating, tasting, drinking, or tobacco use		
5	IN	OUT	N/A	No discharge from eyes, nose, and mouth		

Preventing Contamination by Hands

6	IN	OUT	N/A	Hands clean & properly washed		
7	IN	OUT	N/A	Hand contact with RTE foods restricted		
8	IN	OUT		Adequate handwashing facilities supplied & accessible		

Approved Source

9	IN	OUT		Food obtained from approved source		
10	IN	OUT	N/A	Food received at proper temperature		
11	IN	OUT		Food in good condition, safe, & unadulterated		
12	IN	OUT	N/A	Required records available; shellstock tags, parasite destruction		

Protection from Contamination

13	IN	OUT	N/A	Food separated/protected from cross contamination		
14	IN	OUT	N/A	Food contact surfaces: cleaned & sanitized		
15	IN	OUT		Proper disposition of returned, previously served, reconditioned, & unsafe food		

Compliance Status

COS

R

Potentially Hazardous Food Time/Temperature

16	IN	OUT	N/A	Proper cooking time & temperature		
17	IN	OUT	N/A	Proper reheating procedures for hot holding		
18	IN	OUT	N/A	Proper cooling time & temperature		
19	IN	OUT	N/A	Proper hot holding temperatures		
20	IN	OUT	N/A	Proper cold holding temperatures		
21	IN	OUT	N/A	Proper date marking & disposition		
22	IN	OUT	N/A	Time as a public health control: procedures & record		

Consumer Advisory

23	N/A	in MN	Consumer advisory for raw or undercooked foods		
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Highly Susceptible Populations

24	N/A	in MN	Pasteurized foods used; prohibited foods not offered		
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Chemical

25	IN	OUT	N/A	Food additives: approved & properly used		
26	IN	OUT		Toxic substances properly identified, stored, & used		

Conformance with Approved Procedures

27	IN	OUT	N/A	Compliance with HACCP plan and variance		
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Risk factors (RF) are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. **Public Health Interventions (PHI)** are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance

Mark "X" in appropriate box for COS and/or R

COS= corrected on-site during inspection

R= repeat violation

Safe Food and Water

28		Pasteurized eggs used where required		
29		Water & ice from approved source		
30	N/A	Variance obtained for specialized processing methods, documentation on file		

Food Temperature Control

31		Proper cooling methods used; adequate equipment for temperature control		
32	N/A	Plant food properly cooked for hot holding		
33		Approved thawing methods used		
34		Thermometers provided and accurate		

Food Protection

35		Food properly labeled; original container		
36		Insects, rodents, & animals not present; no unauthorized persons		
37		Contamination prevented during food prep, storage & display		
38		Personal cleanliness		
39		Wiping cloths: properly used & stored		
40		Washing fruits & vegetables		

Food Recalls:

Proper Use of Utensils

41		In-use utensils: properly stored		
42		Utensils, equipment & linens: properly stored, dried, & handled		
43		Single-use & single service articles: properly stored & used		
44		Gloves used properly		

Utensil Equipment and Vending

45		Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
46		Warewashing facilities: installed, maintained, & used; test strips		
47	X	Non-food contact surfaces clean		X

Physical Facilities

48		Hot & cold water available; adequate pressure		
49		Plumbing installed; proper backflow devices		
50		Sewage & waste water properly disposed		
51		Toilet facilities: properly constructed, supplied, & cleaned		
52		Garbage & refuse properly disposed; facilities maintained		
53	X	Physical facilities installed, maintained, & clean		X
54		Adequate ventilation & lighting; designated areas used		
55		Compliance with MCIAA & Choking Poster		
56		Compliance with licensing & plan review		

Person in Charge (Signature)

Date: 01/02/19

Inspector (Signature)

Follow-up Needed: YES (NO) (Circle one)

Follow-up Date: / /