

# Food Establishment Inspection Report

Jackson County Health Department PO Box 307 – 415 Health Department Rd Murphysboro IL 62966		(618) 684-3143 ext. 128		No. of Risk Factor/Intervention Violations <b>3</b>	Date <b>9/3/21</b>
Establishment <b>Tres Hombres</b>		License/Permit # <b>306</b>		No. of Repeat Risk Factor/Intervention Violations <b>0</b>	Time In <b>3:00</b>
Street Address <b>119 N. Washington</b>		City/State <b>Carbondale, IL</b>		Permit Holder <b>Jeff Vaughn</b>	Time Out <b>4:45</b>
City/State <b>Carbondale, IL</b>		ZIP Code <b>62901</b>		Purpose of Inspection <b>Routine</b>	Risk Category <b>I</b>

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item  
**IN**=in compliance    **OUT**=not in compliance    **N/O**=not observed    **N/A**=not applicable  
 Mark "X" in appropriate box for COS and/or R  
**COS**=corrected on-site during inspection    **R**=repeat violation

**Risk factors** are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance Status		COS	R	Compliance Status		COS	R
<b>Supervision</b>				<b>Protection from Contamination</b>			
1	<input checked="" type="radio"/> In <input type="radio"/> Out			15	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Person in charge present, demonstrates knowledge, and performs duties				Food separated and protected			
2	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A			16	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
Certified Food Protection Manager (CFPM)				Food-contact surfaces; cleaned and sanitized			
<b>Employee Health</b>				<b>Time/Temperature Control for Safety</b>			
3	<input checked="" type="radio"/> In <input type="radio"/> Out			17	<input checked="" type="radio"/> In <input type="radio"/> Out		
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Proper disposition of returned, previously served, reconditioned and unsafe food			
4	<input checked="" type="radio"/> In <input type="radio"/> Out			18	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Proper use of restriction and exclusion				Proper cooking time and temperatures			
5	<input checked="" type="radio"/> In <input type="radio"/> Out			19	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Procedures for responding to vomiting and diarrheal events				Proper reheating procedures for hot holding			
<b>Good Hygienic Practices</b>				<b>Consumer Advisory</b>			
6	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O			20	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Proper eating, tasting, drinking, or tobacco use				Proper cooling time and temperature			
7	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O			21	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
No discharge from eyes, nose, and mouth				Proper hot holding temperatures			
<b>Preventing Contamination by Hands</b>				<b>Highly Susceptible Populations</b>			
8	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O			22	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Hands clean and properly washed				Proper cold holding temperatures			
9	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			23	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				Proper date marking and disposition			
10	<input checked="" type="radio"/> In <input type="radio"/> Out			24	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Adequate handwashing sinks properly supplied and accessible				Time as a Public Health Control; procedures & records			
<b>Approved Source</b>				<b>Food/Color Additives and Toxic Substances</b>			
11	<input checked="" type="radio"/> In <input type="radio"/> Out			25	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
Food obtained from approved source				Consumer advisory provided for raw/undercooked food			
12	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			<b>Conformance with Approved Procedures</b>			
Food received at proper temperature				26	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
13	<input checked="" type="radio"/> In <input type="radio"/> Out		X	Pasteurized foods used; prohibited foods not offered			
Food in good condition, safe, and unadulterated				<b>Food/Color Additives and Toxic Substances</b>			
14	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			27	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
Required records available: shellstock tags, parasite destruction				Food additives: approved and properly used			
<b>GOOD RETAIL PRACTICES</b>				28	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.				Toxic substances properly identified, stored, and used			
Mark "X" in box if numbered item is not in compliance				<b>Conformance with Approved Procedures</b>			
Mark "X" in appropriate box for COS and/or R				29	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
COS=corrected on-site during inspection				Compliance with variance/specialized process/HACCP			
R=repeat violation				<b>GOOD RETAIL PRACTICES</b>			

Compliance Status		COS	R
<b>Safe Food and Water</b>			
30	Pasteurized eggs used where required		
31	Water and ice from approved source		
32	Variance obtained for specialized processing methods		
<b>Food Temperature Control</b>			
33	Proper cooling methods used; adequate equipment for temperature control		
34	Plant food properly cooked for hot holding		
35	Approved thawing methods used		
36	Thermometers provided & accurate		
<b>Food Identification</b>			
37	Food properly labeled; original container		
<b>Prevention of Food Contamination</b>			
38	Insects, rodents, and animals not present		
39	<input checked="" type="radio"/> Contamination prevented during food preparation, storage and display		
40	Personal cleanliness		
41	Wiping cloths: properly used and stored		
42	Washing fruits and vegetables		

Compliance Status		COS	R
<b>Proper Use of Utensils</b>			
43	In-use utensils: properly stored		
44	Utensils, equipment & linens: properly stored, dried, & handled		
45	Single-use/single-service articles: properly stored and used		
46	Gloves used properly		
<b>Utensils, Equipment and Vending</b>			
47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
48	Warewashing facilities: installed, maintained, & used; test strips		
49	<input checked="" type="radio"/> Non-food contact surfaces clean		
<b>Physical Facilities</b>			
50	Hot and cold water available; adequate pressure		
51	Plumbing installed; proper backflow devices		
52	Sewage and waste water properly disposed		
53	Toilet facilities: properly constructed, supplied, & cleaned		
54	Garbage & refuse properly disposed; facilities maintained		
55	<input checked="" type="radio"/> Physical facilities installed, maintained, and clean		
56	Adequate ventilation and lighting; designated areas used		
<b>Employee Training</b>			
57	All food employees have food handler training		
58	Allergen training as required		

# Food Establishment Inspection Report

Establishment: Tres Hombres Establishment #: 306

Water Supply:  Public  Private Waste Water System:  Public  Private

Sanitizer Type: Chlorine/Quat PPM: 100/400 Heat: N/A

### TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Make table		On Ice items			
- Tomatoes	38°	- salsa	40		
- cheese	40°	- tomatillo	33°		
Beverage air	37°	Beer Walk in	39°		
Walk in	40				
- Rice	37°	Black Bean	151°		
Frigidaire	42°	Rice	168°		
		Burger	170°		

### OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
13	Discard moldy tomatoes stored in kitchen walk in. Several tomatoes observed that aren't in good condition w/ mold.	CS
	Ⓢ Products discarded.	
22	Provide proper cold holding for items that come into contact w/ ice items. Sauces that come into contact w/ ice foods (wings / fish) must either be cold held, hot held, or labeled w/ 4-hr discard + disposal after use.	9/18/21
10	Provide hand soap @ bar area. Upon inspection, no soap in bar area. This area must be equipped with all supplies to properly wash your hands @ all times.	
39	Refrain from storing food items under ice build up in walk-in freezer. Ice on boxes of food in freezer. This water is considered contaminated. Repair unit to no longer build ice.	

CFPM Verification (name, expiration date, ID#):

<u>Juan Quenara</u>		
<u>#211662362</u>		

HACCP Topic: 13, 22, 24

Person in Charge (Signature) [Signature] Date 9/13/21

Inspector (Signature) [Signature]

Follow-up:  Yes  No (Check one)

Follow-up Date: 9/18/21

# Food Establishment Inspection Report

Establishment: Tres Hombres

Establishment #: 306

## OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
49	Clean interior portion of make table in kitchen. Interior bottom, sides, doors + Lehome doors seal need cleaned.	9/8/21
49	Clean interior bottom of wine cooler and beer coolers. Liquor spillage observed.	
49	Clean exterior of large ice machine in walk in room. mold observed.	
49	Clean waitress area microwave (interior portion) food splash noted.	
49	Clean shelving prep table Secondary shelving next to frier area. food debris noted.	
55	Replace missing tiles in kitchen walk in cooler. Floors must be easily cleanable, non-absorbant + smooth.	
55	Clean interior part of vent hood that blows the air out into kitchen. lots of dust / food debris noted in this area. Showed Kitchen Supervisor.	
55	Clean interior of beer walkin where mold is. Several places in walkin with black mold.	
55	Replace floor, walls ceilings in beer walk in. these surfaces are no longer smooth, easily cleanable, non-absorbant.	↓
Notes		
* At time of Precheck, plans for new walkin will be discussed.		

Juan M. Jimenez  
Person in Charge (Signature)

9/3/21  
Date

Phylla Bassing  
Inspector (Signature)

Follow-up:  Yes  No (Check one)

Follow-up Date: 9/8/21