



Retail Food Establishment Inspection Report V4

Facility Information	Audit Information
Permit Number: 26-206-12557	Audit Name: Retail Food Establishment Inspection Report V4
Facility Name: CREPE CREATION CAFE	Type: 10_Routine Inspection
Address: 4012 DEVILLE ST UNIT 150	Start Date: 11/19/2013 3:30 p.m.
Address 2: L	End Date: 11/19/2013 4:15 p.m.
City/State/Zip: MYRTLE BEACH, SC 295771641 HORRY	Inspector: Molly Smith
Phone 1: 8438394019	Rating: A
Fax: 8438394018	

Audit Category Summary:

Category/Sub Category	Points
Inspection Information	10
Critical Risk Factors	40
Critical Violations	17
Violations	30
DAR Information	N/A
Total	97

Audit Level Notes:

Correct violations prior to next routine inspection. Signed on paper copy by Larry Cauble

Inspection Information

Question	Comments	Answer	Points Current
Grade Posted		A	10
Is a follow up required		No	N/A
DHEC phone & fax #		Horry - (843)238-4378 Fax- (843)238-4518	N/A
Totals			10

Critical Risk Factors

Question	Comments	Answer	Points Current
1. Properly Cooked- Potentially hazardous food		N/A	5
2. Proper holding temperature- Potentially hazardous food	<ul style="list-style-type: none"> • <i>Potentially hazardous foods holding below 45F</i> 	IN	5
3. Proper cooling and reheating- Potentially hazardous food		N/O	5
4. Personnel with infections restricted		IN	5
5. Proper hygiene: hands clean, nails, properly washed, glove use, handsink access		IN	5

6. Cross contamination prevented/ Food protected		IN	5
7. Wash, Rinse, Sanitize: clean, concentration		IN	5
8. Food from an approved source & sound condition		IN	5
Totals			40

Critical Violations

Question	Comments	Answer	Points Current
9. Water source safe, Hot & Cold under pressure, Back siphonage, Sewage		IN	5
10. Handling foods minimized		IN	4
11. Insects/Rodents/Animals restricted		IN	4
12. Toxic substances properly identified, stored, used		IN	4
Totals			17

Violations

Question	Comments	Answer	Points Current
13. Food protection, Thawing		IN	2
14. Personal hygiene, Outer clothing clean		IN	2
15. Food contact surfaces: clean, free of abrasives, detergents		IN	2
16. Food contact surfaces: designed, constructed, maintained, installed, located		IN	2
17. Handsink: good repair, clean, soap/paper towels		IN	2
18. Warewash: constructed, maintained, installed, clean		IN	2
19. Towel sanitization: proper concentration, clean, labeled	<ul style="list-style-type: none"> • sanitizer bucket not registering at 200-400 ppm quaternary ammonium (Ch.5.A.2.b.) 	OUT	0
Is this a repeat?		no	N/A
20. Thermometers: provided, used, accurate, proper test kits		IN	2
21. Mobile unit: return to base station		IN	2
22. Non-food-contact surfaces of equipment and utensils clean		IN	1
23. Non-food-contact surfaces: designed, constructed, maintained, installed		IN	1
24. Proper storage: utensils (stored/in use), equipment, single service, linens	<ul style="list-style-type: none"> • Spatulas stored improperly (Ch.2.E.4.a.-d.) Utensil stored in standing water (Ch.2.E.4.) 	OUT	0
Is this a repeat?		no	0
25. Labeled food properly		IN	1
26. Floors and floor coverings: drained, constructed, good repair, clean		IN	1
27. Walls/ ceilings and attached equip.: constructed, good repair, clean		IN	1
28. Personal items, Authorized persons, Separate living quarters		IN	1
29. Ventilation adequate		IN	1

30. Lighting provided as required, fixtures shielded		IN	1
31. Plumbing installed, maintained		IN	1
32. Toilet: selfclosing, repairs, supplied, waste receptacles		IN	1
33. Garbage/refuse: containers clean, adequate, covered		IN	1
34. Can wash/ Mop sink; Waste water disposal		IN	1
35. Cleaning equipment stored orderly, maintained		IN	1
36. Premises maintained, unnecessary articles		IN	1
Totals			30

DAR Information

Question	Comments	Answer	Points Current
Activity Time Units:		0	N/A
Travel Time Units:		0	N/A
Mileage:		0	N/A
Totals			N/A

Overall Score
97%

Overall Rating
A

Auditor Signature

Submitted through mobileAUDITOR - Web, or no signature provided.

Account Signature

Submitted through mobileAUDITOR - Web, or no signature provided.