



ADAM H. PUTNAM  
COMMISSIONER

Florida Department of Agriculture and Consumer Services  
Division of Food Safety



Visit # 3327-0000-20  
Bureau of Food Inspection  
Attention: Records Section  
3125 Conner Boulevard, C-26  
Tallahassee, FL 32399-1650

**FOOD SAFETY INSPECTION REPORT**

Chapter 500, Florida Statutes  
(850) 245-5520

Print Date: August 03, 2018

Food Entity Number: 101581  
Food Entity Name: I-10 PECAN HOUSE  
Date of Visit: August 03, 2018  
Food Entity Address: 3233 S Salt RD Monticello, FL32344-0420  
Food Entity Mailing Address: 9150 E Washington Hwy Monticello, FL 32344-3213  
Food Entity Type/Description: 124/ Convenience Store Significant FS AND/OR Packaged Ice  
Food Entity Owner: OLAN O NOBLES

Owner Code:

**INSPECTION SUMMARY - Met Inspection Requirements; Check Back Needed**

On August 03, 2018, I-10 PECAN HOUSE was inspected by YOLANDA SYLVE, a representative of the Florida Department of Agriculture and Consumer Services. Violations observed during the inspection must be corrected to be in compliance with Chapter 500, Florida Statutes, and Rule 5K-4, Florida Administrative Code. A Department inspector will check-back to ensure compliance with Chapter 500, Florida Statutes, and Rule 5K-4, Florida Administrative Code.

**PERMIT APPLICATION INFORMATION**

The permit application information was verified with management or a qualified representative.

**COMPLIANCE KEY**

IN = In Compliance OUT = Not In Compliance N/O = Not Observed N/A = Not Applicable

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

<u>Violation Number</u>	<u>Compliance Status</u>	<u>Violation Description</u>
1	OUT	Supervision: Person in Charge present, demonstrates knowledge, and performs duties
2	IN	Employee Health: Management, food employee and conditional employee; knowledge, responsibilities and reporting
3	IN	Employee Health: Proper use of restriction and exclusion
4	IN	Good Hygienic Practices: Proper eating, tasting, drinking, or tobacco use
5	IN	Good Hygienic Practices: No discharge from eyes, nose, and mouth
6	IN	Preventing Contamination by Hands: Hands clean and properly washed
7	IN	Preventing Contamination by Hands: No bare hand contact with ready-to-eat foods or approved alternate method properly followed
8	IN	Preventing Contamination by Hands: Adequate handwashing sinks, properly supplied and accessible
9	IN	Approved Source: Food obtained from approved source
10	N/O	Approved Source: Food received at proper temperature
11	IN	Approved Source: Food in good condition, safe and unadulterated
12	N/A	Approved Source: Required records available: shellstock tags, parasite destruction
13	IN	Protection from Contamination: Food separated and protected
14	IN	Protection from Contamination: Food-contact surfaces: cleaned and sanitized



ADAM H. PUTNAM  
COMMISSIONER

Florida Department of Agriculture and Consumer Services  
Division of Food Safety



Visit # 3327-0000-20  
Bureau of Food Inspection  
Attention: Records Section  
3125 Conner Boulevard, C-26  
Tallahassee, FL 32399-1650

**FOOD SAFETY INSPECTION REPORT**

Chapter 500, Florida Statutes  
(850) 245-5520

Print Date: August 03, 2018

Food Entity Number: 101581  
Food Entity Name: I-10 PECAN HOUSE  
Date of Visit: August 03, 2018  
Food Entity Address: 3233 S Salt RD Monticello, FL32344-0420  
Food Entity Mailing Address: 9150 E Washington Hwy Monticello, FL 32344-3213  
Food Entity Type/Description: 124/ Convenience Store Significant FS AND/OR Packaged Ice  
Food Entity Owner: OLAN O NOBLES

Owner Code:

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

<u>Violation Number</u>	<u>Compliance Status</u>	<u>Violation Description</u>
15	IN	Protection from Contamination: Proper disposition of returned, previously served, reconditioned, and unsafe food
16	N/A	Potentially Hazardous Food Time/Temperature: Proper cooking time and temperature
17	N/O	Potentially Hazardous Food Time/Temperature: Proper reheating procedures for hot holding
18	N/O	Potentially Hazardous Food Time/Temperature: Proper cooling time and temperatures
19	IN	Potentially Hazardous Food Time/Temperature: Proper hot holding temperatures
20	IN	Potentially Hazardous Food Time/Temperature: Proper cold holding temperatures
21	N/A	Potentially Hazardous Food Time/Temperature: Proper date marking and disposition
22	N/A	Potentially Hazardous Food Time/Temperature: Time as a public health control: procedures and records
23	N/A	Consumer Advisory: Consumer advisory provided for raw or undercooked foods
24	N/A	Highly Susceptible Populations: Pasteurized Foods, Prohibited Re-service, and Prohibited Foods*
25	N/A	Chemical: Food additives: approved and properly used
26	IN	Chemical: Toxic substances properly identified, stored, and used
27	N/A	Conformance with Approved Procedures

**GOOD RETAIL PRACTICES**

<u>Violation Number</u>	<u>Compliance Status</u>	<u>Violation Description</u>
34	OUT	Food Temperature Control: Thermometers provided and accurate used
35	OUT	Food Identification: Food properly labeled; original container
39	OUT	Prevention of Food Contamination: Wiping cloths: properly used and stored
46	OUT	Utensils Equipment and Vending: Warewashing facilities: installed, maintained, used; test strips -
49	OUT	Physical Facilities: Plumbing installed; proper backflow devices
50	OUT	Physical Facilities: Sewage and waste water properly disposed
51	OUT	Physical Facilities: Toilet facilities: properly constructed, supplied, cleaned -
52	OUT	Physical Facilities: Garbage/refuse properly disposed; facilities maintained
99	OUT	Food Permit



ADAM H. PUTHAM  
COMMISSIONER

Florida Department of Agriculture and Consumer Services  
Division of Food Safety

FOOD SAFETY INSPECTION REPORT

Chapter 899, Florida Statutes  
(850) 348-8830



Visit # 3327-0000-30  
Bureau of Food Inspection  
Attention: Records Section  
3125 Conner Boulevard, G-26  
Tallahassee, FL 32309-1650

Print Date: August 03, 2018

Food Entity Number: 101681  
Food Entity Name: I-10 PEGAN HOUSE  
Date of Visit: August 03, 2018  
Food Entity Address: 3238 S Salt RD Monticello, FL 32344-0420  
Food Entity Mailing Address: 9150 E Washington Hwy Monticello, FL 32344-3213  
Food Entity Type/Description: 124/ Convenience Store Significant FS AND/OR Packaged Ice  
Food Entity Owner: OLAN O NOBLES

Owner Code:

VENDED WATER / VENDED ICE

Violation Number	Compliance Status	Violation Description
213	OUT	Required Records Available/Provided

OBSERVATIONS AND CORRECTIVE ACTIONS

GOS = Corrected on Site      P = Priority Citation      Pf = Priority Foundation Citation  
(Directly Associated with Foodborne Illnesses)      (Supports or Leads to a Priority Citation)

INSPECTION: RISK BASED

Violation Number	Citation Description	GOS	Observation	
1	Person in charge or food establishment employee is not a certified food protection manager who has passed a test through a recognized accredited certification program as specified in the FDA Food Code, 2-102.11(B) or as specified in 5K-4.021, F.A.G. (Recognized accredited certification programs include: National Registry of Food Safety Professionals (FSP Certificate) (800) 446-0267, Website: www.nrfsp.com, Prometric (800) 624-2736 Website: prometric.com, National Restaurant Association Education Foundation, SERVESAFE Program (800) 765-2122, Website: www.servesafe.com, 360 TRAINING (888) 360-8764, Website: www.360training.com or Above Training/StateFoodSafety.com, (801) 494-1416. 2-102.11(B)Pf	<input type="checkbox"/>	RETAIL- THERE IS NO CERTIFIED FOOD MANAGER.	Pf

INSPECTION: GRP

Violation Number	Citation Description	GOS	Observation	
34	Food temperature measuring device with a suitable small diameter probe not provided and readily accessible for assessing food temperatures as specified in the FDA Food Code, 4-302.12 Pf	<input type="checkbox"/>	RETAIL- NO PROBE THERMOMETER AVAILABLE TO CHECK COLD HOLDING AND RECEIVING OF PERISHABLE FOODS.	Pf



ADAM H. PUTNAM  
COMMISSIONER

Florida Department of Agriculture and Consumer Services  
Division of Food Safety



Visit # 3327-0000-20  
Bureau of Food Inspection  
Attention: Records Section  
3125 Conner Boulevard, C-26  
Tallahassee, FL 32399-1650

**FOOD SAFETY INSPECTION REPORT**

Chapter 500, Florida Statutes  
(850) 245-5520

Print Date: August 03, 2018

Food Entity Number: 101581  
Food Entity Name: I-10 PECAN HOUSE  
Date of Visit: August 03, 2018  
Food Entity Address: 3233 S Salt RD Monticello, FL32344-0420  
Food Entity Mailing Address: 9150 E Washington Hwy Monticello, FL 32344-3213  
Food Entity Type/Description: 124/ Convenience Store Significant FS AND/OR Packaged Ice  
Food Entity Owner: OLAN O NOBLES

Owner Code:

**INSPECTION: GRP**

<u>Violation Number</u>	<u>Citation Description</u>	<u>COS</u>	<u>Observation</u>
35	Food packaged on site not labeled with the common name of the food or with a list of ingredients in descending order of predominance by weight, including any artificial colors, flavors or preservatives, or not labeled with an accurate quantity of contents, or the name and place of business of the manufacturer, packer, or distributor. 3-602.11(B)(1)-(4)	<input checked="" type="checkbox"/>	OUTSIDE- ICE BAGS ARE MISSING NAME AND ADDRESS OF MANUFACTURE. COS ICE BAGS WERE LABELED.
39	Sponges used in contact with cleaned and sanitized or in-use food-contact surfaces. 4-101.16	<input type="checkbox"/>	WARE WASHING AREA- SEVERAL SPONGES LEFT ON COUNTER BY WARE WASHING SINK.
46	Sanitizer concentration test kits not available or not readily accessible. 4-302.14 Pf	<input checked="" type="checkbox"/>	WARE WASHING AREA- NO SANITIZER TEST KIT AVAILABLE. COS INSPECTOR LEFT TEMPORARY SANITIZER TEST KIT. Pf
49	Plumbing system not installed to prevent backflow of a solid, liquid, or gas contaminant into the water supply system at each point of use. 5-203.14	<input type="checkbox"/>	OUTSIDE- NO BACK FLOW PROVIDED AT SPIGOT BY GAS PUMPS.
50	Direct connection exists between the sewage system and a drain originating from equipment in which food, portable equipment, or utensils are placed. 5-402.11	<input type="checkbox"/>	WARE WASHING AREA- WARE WASHING (THREE COMP) SINK HAS DIRECT CONNECTION.
51	Toilet room opens directly into a processing area. 5K-4.004(3)(d)	<input type="checkbox"/>	ICE BAGGING AREA- EMPLOYEES RESTROOM OPENS DIRECTLY INTO ICE BAGGING AREA.
52	Outdoor storage surface for refuse, recyclables, and returnables not constructed of nonabsorbent material such as concrete or asphalt or is not smooth, durable, and sloped to drain. 5-501.11	<input type="checkbox"/>	OUTSIDE- NO PAD PROVIDED FOR DUMPSTER.
99	The food establishment permit is not conspicuously displayed. 5K-4.020(2) F.A.C.	<input type="checkbox"/>	RETAIL - 2018 FOOD PERMIT NOT POSTED.

**INSPECTION: VENDED WATER/VENDED ICE**

<u>Violation Number</u>	<u>Citation Description</u>	<u>COS</u>	<u>Observation</u>
-------------------------	-----------------------------	------------	--------------------



ADAM H. PUTNAM  
COMMISSIONER

Florida Department of Agriculture and Consumer Services  
Division of Food Safety

FOOD SAFETY INSPECTION REPORT

Chapter 500, Florida Statutes  
(850) 245-5520



Visit # 3327-0000-20  
Bureau of Food Inspection  
Attention: Records Section  
3125 Conner Boulevard, C-26  
Tallahassee, FL 32399-1650

Print Date: August 03, 2018

Food Entity Number: 101581  
Food Entity Name: I-10 PECAN HOUSE  
Date of Visit: August 03, 2018  
Food Entity Address: 3233 S Salt RD Monticello, FL32344-0420  
Food Entity Mailing Address: 9150 E Washington Hwy Monticello, FL 32344-3213  
Food Entity Type/Description: 124/ Convenience Store Significant FS AND/OR Packaged Ice  
Food Entity Owner: OLAN O NOBLES

Owner Code:

INSPECTION: VENDED WATER/VENDED ICE

Violation  
Number

213

Citation Description

Finished product packaged ice not sampled for microbiological analysis by an approved laboratory at least once every three months. 5K-4.023(5)(e) F.A.C.

COS Observation

ICE BAGGING ARE- NO CURRENT ICE SAMPLE ANALYSIS PROVIDED DURING THIS INSPECTION.

COMMENTS

Check back inspection will be conducted on or about 90 days or the day of this inspection to verify the direct connection to ware wash sink drain line has been corrected and the direct opening of employee restroom into ice bagging area. Corrective actions, include the issuance of stop use order of equipment and/ food service may be taken if corrections have not been made before the 90 days inspection occurs. The food establishment may call (850) 245-5520 to request a check back inspection if correction have been made before the scheduled 90 days check back inspection.

Food establishment will be given 30 days to comply with current ice sample analysis, and can be made via email by sending copy of current ice sample analysis to Yoolanda.Sylve@freshfromflorida.com.

ACKNOWLEDGMENT

I acknowledge receipt of a copy of this document, and I further acknowledge that I have verified the location and mailing addresses on the first page of this document are correct, or I have written the correct information on the first page of this document.

\_\_\_\_\_  
(Signature of FDACS Representative)

\_\_\_\_\_  
(Signature of Representative)

YOLANDA SYLVE, SENIOR SANITATION AND SAFETY SPECIALIST

James M. Tuton cashier  
\_\_\_\_\_  
Print Name and Title