



**SOUTHERN NEVADA HEALTH DISTRICT  
FOOD ESTABLISHMENT INSPECTION**

280 SOUTH DECATUR BLVD • LAS VEGAS, NV • 89107 • 702-759-1258 (DIRECT PLAN REVIEW) • 702-759-1110 (DIRECT FOOD OPS) • 702-759-1000 (24 HOURS)

**FACILITY INFORMATION**

PERMIT #	ESTABLISHMENT NAME	PHONE #	EST. SQUARE FOOTAGE	PRIMARY EHS							
PR0015057	CHINA AAA CHINA AAA	(702) 293-0377	600	EE7001296							
ADDRESS 9775 S Maryland PKWY STE C Las Vegas, NV 89183-7122		RISK CAT. 3	P.E. CODE 1003	DISTRICT 34							
		LOCATION	PERMIT STATUS ACTIVE								
NEVADA CLEAN INDOOR AIR ACT: <input checked="" type="checkbox"/> COMPLIANCE REQUIRED <input type="checkbox"/> EXEMPT		CONTACT PERSON: Caihong Jin									
CURRENT SERVICE	EHS	SERVICE	DATE	TIME IN	TIME OUT	DEMERITS	FINAL GRADE	TRAVEL MIN	INSPECTION RESULT	SEWER	WATER
	EE7001296	Routine Inspection	6/11/2018	11:45AM	2:00PM	14	Closed	5	Closed with Fees	M	M

SPECIAL NOTES: RPZ USD 11/2017

In = In compliance    OUT = Not In compliance    COS = Corrected on-site during inspection    N/O = Not observed    N/A = Not applicable    R = Repeat violation

**Imminent Health Hazards-Notify SNHD and Cease Operations as Directed** OUT

A	Interruption of electrical service		<input type="checkbox"/>				
B	No potable water or hot water		<input type="checkbox"/>				
C	Gross unsanitary occurrences or conditions including pest infestation		<input checked="" type="checkbox"/>				
D	Sewage or liquid waste not disposed of in an approved manner		<input type="checkbox"/>				
E	Lack of adequate refrigeration		<input type="checkbox"/>				
F	Lack of adequate employee toilets and handwashing facilities		<input type="checkbox"/>				
G	Misuse of poisonous or toxic materials		<input type="checkbox"/>				
H	Suspected foodborne illness outbreak		<input type="checkbox"/>				
I	Emergency such as fire and/or flood		<input type="checkbox"/>				
J	Other condition or circumstance that may endanger public health		<input type="checkbox"/>				

**SECTION 1 - The Critical Violations listed below are to be assessed 5 demerits for each violation** IN    OUT    COS    NO    NA    R

1	Verifiable time as a control with approved procedure when in use. Operational plan, waiver or variance approved and followed when required. Operating within the parameters of the health permit.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Handwashing (as required, when required, proper glove use, no bare hand contact of ready to eat foods). Foodhandler health restrictions as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Commercially manufactured food from approved source with required labels. Parasite destruction as required. Potentially hazardous foods/time temperature control for safety (PHF/TCS) received at proper temperature.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Hot and cold running water from approved source as required.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Imminently dangerous cross connection or backflow. Waste water and sewage disposed into public sewer or approved facility.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Food wholesome; not spoiled, contaminated, or adulterated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	PHF/TCSs cooked and reheated to proper temperatures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	PHF/TCSs properly cooled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	PHF/TCSs at proper temperatures during storage, display, service, transport, and holding.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION 2 - The Major Violations listed below are to be assessed 3 demerits for each violation** IN    OUT    COS    NO    NA    R

10	Food and warewashing equipment approved, properly designed, constructed and installed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Food protected from potential contamination during storage and preparation.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12	Food protected from potential contamination by chemicals. Toxic items properly labeled, stored and used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Food protected from potential contamination by employees and consumers.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Kitchenware and food contact surfaces of equipment properly washed, rinsed, sanitized and air dried. Equipment for warewashing operated and maintained. Sanitizer solution provided and maintained as required.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Handwashing facilities adequate in number, stocked, accessible, and limited to handwashing only.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	Effective pest control measures. Animals restricted as required.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	Hot and cold holding equipment present; properly designed, maintained and operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	Accurate thermometers (stem & hot/cold holding) provided and used.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	PHF/TCSs properly thawed. Fruits and vegetables washed prior to preparation or service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	Single use items not reused or misused.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	Person in charge available and knowledgeable/management certification. Foodhandler card as required. Facility has an effective employee health policy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	Backflow prevention devices and methods in place and maintained.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23	Grade card and required signs posted conspicuously. Consumer advisory as required. Records/logs maintained and available when required. NCI/AA compliant. PHFs labeled and dated as required. Food sold for offsite consumption labeled properly.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



**SECTION 3 - Good Food Management Practices to Prevent Unsanitary Conditions**

**IN OUT NA**

24	Acceptable personal hygiene practices, clean outer garments, proper hair restraints used. Living quarters and child care completely separated from food service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
25	Non-PHF and food storage containers properly labeled and dated as required. Food stored off the floor when required. Non-PHF/TCS not spoiled and within shelf-life. Proper retail storage of chemicals.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	
26	Facilities for washing and sanitizing kitchenware approved, adequate, properly constructed, maintained and operated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
27	Appropriate sanitizer test kits provided and used. Equipment and ware washing thermometer(s) are required. Wiping cloths and linens stored and used properly.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	
28	Small wares and portable appliances approved, properly designed, in good repair.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
29	Utensils, equipment, and single serve items properly handled, stored, and dispensed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
30	Nonfood contact surfaces and equipment properly constructed, installed, maintained and clean.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	
31	Restrooms, mop sink, and custodial areas maintained and clean. Premises maintained free of litter, unnecessary equipment, or personal effects. Trash areas adequate, pest proof, and clean.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
32	Facility in sound condition and maintained (floors, walls, ceilings, plumbing, lighting, ventilation, etc.).	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	

**TEMPERATURE OBSERVATIONS**

CT = Cooking temp. HH = Hot Holding temp. CH = Cold Holding temp. RH = ReHeat temp. TC = Time as Control temp. COOL = Cooling temp.

Item	Location	Measurement	Comment
egg drop soup		160.00 F	HH
beef		38.00 F	CH
salmon		37.00 F	CH
chicken		38.00 F	CH



**VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS**

Item No	Observations & Corrective Actions
C	See violation #16 and overall inspection comments.
6	<p>Violation: Metal cans with critical or major defects. Inspector Observation: Bulging can of soy sauce found in the dry storage area. COS - voluntarily discarded. Corrective Action: Maintain foods free from adulteration. Adulterated foods shall not be offered for sale or human consumption. Remove defective cans from use/storage, return or discard. (1-202; 3-101.11; 3-202.12)</p>
11	<p>Violation: Using 3-compartment sink for food prep while sink is being used for any other purpose. Inspector Observation: Food handler observed washing dishes in second and third compartments of 3-compartment sink while broccoli is stored in first compartment of the sink. COS - broccoli moved away from 3-compartment sink. Corrective Action: Protect food from contamination. Use 3-compartment sink for only one operation at a time. (3-302; 3-303; 3-304; 3-30)</p> <p>REPEAT VIOLATION</p> <p>Violation: Storing raw animal products next to or over cooked or ready-to-eat foods. Storing raw animal product incorrectly based on cook temperature. Inspector Observation: Raw squid stored over ready-to-eat imitation crab, chicken, and pork in the walk-in refrigerator. Raw chicken located in the back and raw beef stored directly in front of the raw chicken in the make table. COS - raw foods moved below ready-to-eat foods in the walk-in. Raw chicken moved to the front and beef moved to the back in the make table. Corrective Action: Protect food from contamination. Store raw animal products under or away from ready to eat foods. (3-302; 3-303; 3-304; 3-30)</p> <p>REPEAT VIOLATION</p>
14	<p>Violation: Food contact surfaces are dirty or unsanitary. Inspector Observation: Cleavers located on the knife magnet are soiled with dried food debris. Corrective Action: Properly clean and sanitize. (4.4; 3-304; 4-201.16)</p>
16	<p>Violation: Pests observed in facility. Inspector Observation: Multigenerational cockroaches observed in the back dry storage area of the restaurant, crawling in and out of dry storage/single-use item boxes and near the mop sink. Nymph cockroach observed on the wall directly above the knife magnet. Cockroaches were also observed directly outside the facility back-door, under wood panel used as a ramp. Corrective Action: Institute effective pest control measures to prevent the entry of pests and eliminate the presence of any observed pest activity. (6-202.13; 6-202.15; 6-501)</p> <p>Violation: Household-only pesticides or bait used in the food establishment. Inspector Observation: Multiple types of household-only pesticides observed in the facility, including can of Raid. Corrective Action: Use only pesticides approved by the Nevada State Department of Agriculture for use in a food establishment. Household use pesticides are not approved. (6-202.13; 6-202.15; 6-501)</p> <p>Violation: Installed air curtains or fly fans have been disconnected or have had the pressure switches bypassed to deactivate units. Inspector Observation: Upon arrival at facility the back door was observed propped open with the fly fan turned off. Corrective Action: Provide proper pest control. Provide properly operating air curtain that turns on when door is opened. (6-202.13; 6-202.15; 6-501)</p> <p>Violation: Evidence of pests observed in facility. Inspector Observation: Cockroach droppings observed around outlet on back wall in facility. Corrective Action: Institute effective pest control measures to prevent the entry of pests and eliminate the presence of any observed pest activity. (6-202.13; 6-202.15; 6-501)</p>
25	<p>Violation: Non-PHF (TCS) multi-use food containers not properly labeled (unless the product unmistakably recognizable i.e. rice and beans) with the identity of contents. Inspector Observation: Bulk food containers stored in dry storage area of the facility are missing labels in English. Corrective Action: Label containers of food and food ingredients with common name of contents. (1-202; 3-305.11; 3-302.12)</p>
27	<p>Violation: Wiping cloths left out without sanitizer residual on the cloth. Inspector Observation: Wiping cloth stored on the front prep table has no sanitizer residual. Corrective Action: Store wiping cloths in sanitizer solution or rinse frequently to maintain proper concentration. (3-304.14; 4-502.11; 4-503)</p>
30	<p>Violation: Shelves made of unapproved materials or unapproved storage racks in use. Inspector Observation: Soda crates are used for shelving in the back area of the facility. Corrective Action: Provide smooth and easily cleanable surfaces. (4-410; 4-2)</p> <p>Violation: Nonfood contact surfaces of equipment are not maintained clean and kept in good repair. Inspector Observation: Sides of cook line equipment have excessive grease build-up. Paint is peeling off of the bottom of the evaporator in the walk-in refrigerator. Corrective Action: Maintain clean and in good repair. (4-410; 4-2)</p>
32	<p>Violation: Dirt and debris accumulated on floors or under equipment. Floor not maintained clean. Inspector Observation: Floors under cook line are soiled with excess grease and debris build-up. Corrective Action: Maintain clean and in good repair. (Chapter 5; 6-1; 6-2; 6-3)</p> <p>Violation: Walls are in disrepair. Inspector Observation: Significant hole located in wall in the back area of the facility. Corrective Action: Maintain clean and in good repair. (Chapter 5; 6-1; 6-2; 6-3)</p>

**Overall Inspection Comments:**

*A reinspection must be scheduled with the facility in the next 15 business days. The reinspection must be passed with 10 or less demerits, and no repeat critical or major violations.*

*Before a reinspection can be scheduled the following must occur:*

*Facility must be serviced by a certified pest control operator; pests must be eliminated from the facility.*



-All food and non-food contact surfaces in the facility must be deep cleaned; eliminate all evidence of pests.  
-All holes, cracks, and crevices in the structure of the facility must be patched/repared to reduce harborage areas for pests.

Also, before a reinspection can occur, the facility must pay a closure fee of \$716. The fee can be paid online at <https://www.southernnevadahealthdistrict.org/payment/ehinvoice>

Use invoice #: IN0190195

Joint inspection with C. De Haan.

Food establishment regulations (2010) and educational materials available at [www.SouthernNevadaHealthDistrict.org/ferl](http://www.SouthernNevadaHealthDistrict.org/ferl)

Section 1 Demerits	5	<p>0 to 10 demerits = A (Identical consecutive critical or major violations shall be downgraded to next lower grade.) 11 to 20 demerits or identical consecutive critical or major violation = B; Re-inspection after 15 days, or sooner if requested. Inspection must result in 10 demerits or less, with no identical repeat critical or major violations. <b>Failure on re-inspection will result in a "C" grade with associated fee and may require a supervisory conference.</b> 21 to 40 demerits = C; Re-inspection after 15 days, or sooner if requested. Inspection must result in 10 demerits or less, with no identical repeat critical or major violations. <b>Failure on re-inspection will result in a closure of the facility with associated fee and may require a supervisory conference.</b> 41 or more demerits = Closure or Imminent Health Hazard requiring closure; All food activities must remain suspended until approved by Health Authority. Re-inspection upon operator request must result in 10 demerits or less, with no identical repeat critical or major violations. <b>Failure on re-inspection will result in continued closed status with associated fee and may require a supervisory conference.</b></p>
Section 2 Demerits	9	
Total Demerits	14	
Initial Inspection Grade	Closed	
<input type="checkbox"/> This grade resulted from a repeat critical or major violation.		
Reinspection Fee:	\$716.00	

Fee required to be paid within 10 business days or prior to reinspection  
Inspector name: Summer Holloway

Received by (signature)	Received by (printed)	EHS (signature)
	Caihong Jin Owner	 Summer Holloway

Your signature on this form: 1) Does not constitute agreement with its contents. You may discuss the contents of this report with the department by contacting the supervisor at the Environmental Health office indicated on page one of this report. Until such time as a decision is rendered by this department, the contents of this report shall remain in effect; and 2) Acknowledges that this inspection report will be distributed by either email, fax, or postal delivery (of your choosing) within 1 business day. 5104



Your inspection experience is important to us! Please provide us with feedback regarding your most recent inspection by taking this 3-minute anonymous survey. The survey can be found at

<https://www.surveymonkey.com/r/SNHDEH>

**What should I do if an imminent health hazard occurs at my food establishment?**

Immediately notify the health district and voluntarily discontinue operations. The health district will discuss the hazard with you and may approve a contingency plan. {8-204.12(f)}

If you fail to notify the health district and continue operations during an imminent health hazard, you will be issued a cease and desist order. You will also be assessed fees and required to pass an inspection, with fewer than 10 demerits and no identical repeat critical or major violations prior to reopening.

If your facility is closed for excessive violations with a history of non-compliance, including repeat critical or major violations, you may be required to attend a supervisory conference before an inspection to reopen the facility. Additionally, you will be required to pay all applicable fees before the inspection.

When in doubt, contact the health district food inspection operations office that inspects your establishment.

What is an imminent health hazard? Examples include, but are not limited to:

- Fire
- Flood
- No hot water
- No water
- Power outage
- Inadequate refrigeration
- Sewage backup
- Misuse of poisonous or toxic materials
- Onset of a suspected foodborne illness outbreak
- Pest infestation
- Gross unsanitary occurrences or conditions, or other circumstances that may endanger public health

**Please contact SNHD if you encounter an imminent health hazard at one of the following numbers:**

- **Food Operations General Contact Number**
  - **702-759-1110 Desk**
- **Larry Rogers - Food Operations Manager**
  - **702-759-0837 Desk**

**If a hazard occurs outside our regular business hours, call our 24-hour phone number (702) 759-1600, choose the Environmental Health option and then press '1' to speak with an after-hours inspector.**