



**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							
PR0108356	CAESARS PALACE HOTEL & CASINO CAESARS APOSTROPHE SERVICE BAR	(702) 731-7110	700	EE7001084							
ADDRESS 3570 S Las Vegas BLVD Las Vegas, NV 89109-8924	RISK CAT. 2	P.E. CODE 1016	DISTRICT 94	LOCATION PERMIT STATUS ACTIVE							
NEVADA CLEAN INDOOR AIR ACT: <input checked="" type="checkbox"/> COMPLIANCE REQUIRED <input type="checkbox"/> EXEMPT		CONTACT PERSON:									
CURRENT SERVICE	EHS	SERVICE	DATE	TIME IN	TIME OUT	DEMERITS	FINAL GRADE	TRAVEL MIN	INSPECTION RESULT	SEWER	WATER
	EE7001290	Reinspection	6/28/2018	12:30PM	1:30PM	9	A	30	"A" Grade	M	M

SPECIAL NOTES: Open 7 days a week 10a-2a. Door to left of Raos. RPZ 6/2018

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 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	PHF/TCSs cooked and reheated to proper temperatures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	PHF/TCSs properly cooled.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Food protected from potential contamination by chemicals. Toxic items properly labeled, stored and used.	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" 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.	■	□		□	
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.	■	□		□	
26	Facilities for washing and sanitizing kitchenware approved, adequate, properly constructed, maintained and operated.	■	□		□	
27	Appropriate sanitizer test kits provided and used. Equipment and ware washing thermometer(s) are required. Wiping cloths and linens stored and used properly.	■	□		□	
28	Small wares and portable appliances approved, properly designed, in good repair.	□	■		□	
29	Utensils, equipment, and single serve items properly handled, stored, and dispensed.	■	□		□	
30	Nonfood contact surfaces and equipment properly constructed, installed, maintained and clean.	■	□		□	
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.	■	□		□	
32	Facility in sound condition and maintained (floors, walls, ceilings, plumbing, lighting, ventilation, etc.).	□	■		□	

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
whipped cream		41.00 F	CH

VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS

Item No	Observations & Corrective Actions
11	<p>Violation: Food or food contact surfaces located in the splash zone of a sink.</p> <p>Inspector Observation: Kegs and BIB's located in the splash zone of the paper towel dispenser.</p> <p>Corrective Action: Protect food from contamination. Do not store food within splash zone of a sink. Install a splash guard, relocate the food, and/or relocate the paper towel dispenser.(3-302; 3-303; 3-304; 3-30)</p>
12	<p>Violation: Chemicals stored on, over, next to or with food products or food contact surfaces.</p> <p>Inspector Observation: Chemical wipes (for non-food contact surfaces) stored next to sugar cubes on shelf. COS: PIC voluntarily discarded wipes.</p> <p>Corrective Action: Protect food from contamination. Store chemicals under and away from food and food contact surfaces. (Chapter 7; 4-201.15; 4-30)</p>
23	<p>Violation: Facility has removed or obstructed "B" or "C" grade card or closure sign.</p> <p>Inspector Observation: Closure sign removed from door.</p> <p>Corrective Action: Post current grade card conspicuously in view of public. Removing or obscuring of the grade card may result in suspension of the health permit. (8-204.12; 3-306.13; Appen)</p>
28	<p>Violation: Ice machine with a small amount of rust, hard water (calcium) buildup, or microbial growth.</p> <p>Corrective Action: Clean and sanitize. (3-304.13;3-304.14; 4-2; 7)</p>
32	<p>Violation: Dirt and debris accumulated on floors or under equipment. Floor not maintained clean.</p> <p>Inspector Observation: Floors are excessively sticky and dirty in corners, inside walk in under shelving, beneath the BIB's, and under equipment.</p> <p>Corrective Action: Maintain clean and in good repair. (Chapter 5; 6-1; 6-2; 6-3;)</p> <p>Violation: Floors and base coving showing signs of disrepair.</p> <p>Corrective Action: Maintain clean and in good repair. (Chapter 5; 6-1; 6-2; 6-3;)</p> <p>Violation: Improper or missing air gap between equipment drain and floor sink. Inspector Observation:</p> <p>Corrective Action: Provide a 1 inch air gap between base of equipment drain pipe and the rim of the floor sink. (Chapter 5; 6-1; 6-2; 6-3;)</p> <p>Violation: Walls are dirty, especially beneath the hand sink.</p> <p>Corrective Action: Maintain clean and in good repair. (Chapter 5; 6-1; 6-2; 6-3;)</p> <p>Violation: Leaks observed in plumbing and fixtures beneath the hand sink.</p> <p>Corrective Action: Repair. (Chapter 5; 6-1; 6-2; 6-3;)</p>

Overall Inspection Comments:

Service bar is released to open and operate contingent upon prior deep cleaning of the permitted area and correction of all major violations. The floors must be thoroughly washed, rinsed, and sanitized beneath all equipment such as below walk in shelving, beneath BIB's, and under the ice machine. The mats on the floor



must be removed and cleaned thoroughly to remove any sticky residue.

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

Section 1 Demerits	0	<p>0 to 10 demerits = A (Identical consecutive critical or major violations shall be downgraded to next lower grade.)</p> <p>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. Failure on re-inspection will result in a "C" grade with associated fee and may require a supervisory conference.</p> <p>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. Failure on re-inspection will result in a closure of the facility with associated fee and may require a supervisory conference.</p> <p>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. Failure on re-inspection will result in continued closed status with associated fee and may require a supervisory conference.</p>
Section 2 Demerits	9	
Total Demerits	9	
Initial Inspection Grade	A	
<input type="checkbox"/> This grade resulted from a repeat critical or major violation.		
Reinspection Fee:	N/A	

Fee required to be paid within 10 business days or prior to reinspection
Inspector name: Victoria Rich

Received by (signature)	Received by (printed)	EHS (signature)
	Doc Mullin Beverage manager	 Victoria Rich

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.