



SOUTHERN NEVADA HEALTH DISTRICT  
FOOD ESTABLISHMENT INSPECTION

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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							
PR0006321	DOUBLE DOWN SALOON DOUBLE DOWN SALOON	(702) 791-5775	250	EE7001208							
ADDRESS 4640 S Paradise RD Las Vegas, NV 89169-8000		RISK CAT. 2	P.E. CODE 1016	DISTRICT 98	LOCATION	PERMIT STATUS ACTIVE					
NEVADA CLEAN INDOOR AIR ACT: <input type="checkbox"/> COMPLIANCE REQUIRED <input checked="" type="checkbox"/> EXEMPT		CONTACT PERSON: Brett Balu									
CURRENT SERVICE	EHS	SERVICE	DATE	TIME IN	TIME OUT	DEMERITS	FINAL GRADE	TRAVEL MIN	INSPECTION RESULT	SEWER	WATER
	EE7001208	Reinspection	7/31/2018	10:55AM	12:55PM	0	A	10	"A" Grade	M	M

SPECIAL NOTES: RPZ - BEHIND BAR IN CORNER ACROSS FROM PHOTO BOOTH - 4/18--Facility 24 hours and busier at night

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 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 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 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 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 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 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 type="checkbox"/>	■	<input type="checkbox"/>
8	PHF/TCSs properly cooled.	<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 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 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 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Food protected from potential contamination by employees and consumers.	■	<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 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 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	Hot and cold holding equipment present; properly designed, maintained and operated.	■	<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 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	■	<input type="checkbox"/>	<input type="checkbox"/>
20	Single use items not reused or misused.	■	<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 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 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. NCIAA compliant. PHFs labeled and dated as required. Food sold for offsite consumption labeled properly.	■	<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.	■	□			□	
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.

No Temperature Observations

**VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS**

Item No	Observations & Corrective Actions
30	<p>Violation: Nonfood contact surfaces of equipment are not maintained clean and kept in good repair.</p> <p>Inspector Observation: Foam on chase lines with sticky residue at exterior</p> <p>Corrective Action: Maintain clean and in good repair. (4-410; 4-2)</p>
32	<p>Violation: Facility does not have at least 50 foot-candles of light where food handlers are working with food or in ware washing areas.</p> <p>Inspector Observation: Significantly less than 50 foot-candles at warewash area and above jockey boxes (3 compartment sink) even after facility added bulb lighting under counter which is battering operated.</p> <p>Corrective Action: Provide at least 50 foot-candles of light where food handlers are working with food and in ware washing areas. Installation of LED strip lights will greatly increase visibility and aid in the observation of pests. (Chapter 5;6-1; 6-2; 6-3;)</p> <p>Violation: Improper or missing air gap between equipment drain and floor sink.</p> <p>Inspector Observation: Several drain lines extending into floor sink: near 3 comp sink, by mop sink; including drain line from ice machine.</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: Wet zones are not lined with FRP.</p> <p>Inspector Observation: Wooden walls in splash zone of 3 compartment sink and hand sink</p> <p>Corrective Action: Walls in splash zones must be covered with an impervious material. (Chapter 5; 6-1; 6-2; 6-3;)</p> <p>Violation: Floors are not smooth, durable and easily cleanable.</p> <p>Inspector Observation: Floors with tiles and peeling materials in disrepair and not easily cleanable</p> <p>Corrective Action: Floors must be constructed of smooth, cleanable material, including but not limited to sealed concrete, terrazzo, quarry tile, ceramic tile, commercial grades of vinyl composition tile, or as approved by the health authority. (Chapter 5; 6-1; 6-2; 6-3;)</p> <p>Violation: Walls are in disrepair.</p> <p>Inspector Observation: Holes in ceiling in back storage area, holes in walls in womens restroom.</p> <p>Corrective Action: Maintain clean and in good repair. (Chapter 5; 6-1; 6-2; 6-3;)</p>

**Overall Inspection Comments:**

Note: Pest fumigation conducted by Progressive Pest Control 7/30/18. While fumigation was being conducted, all food product removed from bar area and relocated to pool tables and covered it with visqueen during and following fumigation. Shockwave used to flush roaches. Pest control operator to return within 3 days to confirm progress of fumigation following facility deep clean and will return in 15 days. Dead roaches observed in vacuum and no live roaches observed at time of inspection. Per PIC gaming department arrived and lifted machines to provide access to wooden cabinetry beyond 3 compartment sink and allow pest control access. Doors repaired as to remove visible light. Splash guard to be welded to hand sink.

Note: Facility to complete all items on compliance schedule action plan by 11/1/18, including repairing floors, walls and 3 compartment sink foundation, maintaining





and providing records for biweekly pest control, repairing wet zones to be splash resistant and gap at hand sink/3 compartment sink connection.

Note: Invoice for permit fees payed with information provided via email to EHS. Closure fee to be paid via web.

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

Section 1 Demerits	0	0 to 10 demerits = A (Identical consecutive critical or major violations shall be downgraded to next lower grade.)
Section 2 Demerits	0	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>
Total Demerits	0	
Initial Inspection Grade	A	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>
<input type="checkbox"/> This grade resulted from a repeat critical or major violation.		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>
Reinspection Fee:	N/A	
Fee required to be paid within 10 business days or prior to reinspection	Inspector name: Willandra Whiting	

Received by (signature)	Received by (printed)	EHS (signature)
	Chris Andrasfay  GM	 Willandra Whiting

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.

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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.**