



**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							
PR0126897	STEAK N SHAKE STEAK N SHAKE	(702) 480-8478	3100	EE7001207							
ADDRESS 2580 SAINT ROSE PKWY STE 100 Henderson, NV 89074		RISK CAT. 2	P.E. CODE 1007	DISTRICT 56							
		LOCATION	PERMIT STATUS ACTIVE								
NEVADA CLEAN INDOOR AIR ACT: <input type="checkbox"/> COMPLIANCE REQUIRED <input type="checkbox"/> EXEMPT		CONTACT PERSON: Brianna Mattaliano									
CURRENT SERVICE	EHS	SERVICE	DATE	TIME IN	TIME OUT	DEMERITS	FINAL GRADE	TRAVEL MIN	INSPECTION RESULT	SEWER	WATER
	EE7001207	Routine Inspection	7/31/2018	2:05PM	3:30PM	11	Closed	15	Closed with Fees	M	M

SPECIAL NOTES:  
**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 checked="" 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 type="checkbox"/>	<input checked="" 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 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<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 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 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 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. NCIAA 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"/>
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**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"/>	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	Nonfood contact surfaces and equipment properly constructed, installed, maintained and clean.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<input type="checkbox"/>
32	Facility in sound condition and maintained (floors, walls, ceilings, plumbing, lighting, ventilation, etc.).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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
Chilli		146.00 F	HH
Cut tomatoes		40.00 F	CH

**VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS**

Item No	Observations & Corrective Actions
D	Imminent health closure: Water flow/Sewage from the inside of the facility is backing out at the entrance of facility. Solid waste allocated 4 hours for facility to get a plumber on site for repairs.
5	Violation: Sewage backup outside that affects public rights of way. Inspector Observation: Facility is having sewage back up at the front of the entrance door, water flow/sewage from the inside is contributing to the back up outside. Corrective Action: Dispose of all waste water into an approved sewer system and repair (5-205; 5-403.11)
16	Violation: Pests observed in facility. Inspector Observation: Flies observed at facility in the seating area 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)
23	Violation: Refrigerated, ready-to-eat, PHF (TCS) food not properly labeled for a 7 day use by date. Inspector Observation: All PHF foods in walk labeled with day labels without a date on them Corrective Action: Date label foods prepared on site or open food products stored in facility for 24 hours or more. (1-202; 3-305.11; 3-302.12)

**Overall Inspection Comments:**


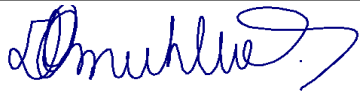
*DUE TO AN IMMINENT HEALTH HAZARD FACILITY IS BEING CLOSED DOWN. ALL FOOD ACTIVITIES MUST REMAIN SUSPENDED UNTIL REPAIRS AND CORRECTIONS HAS BEEN MADE TO THE FACILITY. A FEE OF \$716 MUST BE PAID PRIOR TO SCHEDULING A RE-INSPECTION DURING REGULAR BUSINESS HOURS (MONDAY-FRIDAY 8:00-4:30PM EXCLUDING HOLIDAYS), PAYMENT CAN BE MADE ONLINE OR ON LOCATION AT 280 S DECATUR BLVD. INSPECTION MUST RESULT IN 10 DEMERITS OR LESS, WITH ALL PREVIOUS VIOLATIONS CORRECTED. FAILURE TO ON THE RE-INSPECTION WILL RESULT IN ADDITIONAL FEES AND A CONTINUED CLOSED STATUS.*

FOR PAYMENT USE INVOICE NUMBER: IN0203565

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.)</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. <b>Failure on re-inspection will result in a "C" grade with associated fee and may require a supervisory conference.</b></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. <b>Failure on re-inspection will result in a closure of the facility with associated fee and may require a supervisory conference.</b></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. <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	6	
Total Demerits	11	
Initial Inspection Grade	Closed	
<input type="checkbox"/> This grade resulted from a repeat critical or major violation.		
<b>Reinspection Fee:</b>	<b>\$716.00</b>	

Fee required to be paid within 10 business days or prior to reinspection	Inspector name: <b>Diane Umuhoza</b>
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Received by (signature)	Received by (printed)	EHS (signature)
	brianna mattaliano  General manager	  Diane Umuhoza

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 V18



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.**