



SOUTHERN NEVADA HEALTH DISTRICT
FOOD ESTABLISHMENT PERMIT EVALUATION
 333 N RANCHO DR • SUITE 450 • LAS VEGAS, NV • 89106 • 702-759-1258

FACILITY INFORMATION

PERMIT #	SR #	NAME	PHONE #	SQ. FOOTAGE	PRIMARY EHS							
PR0143268	SRMVSZ0DZ	STRONG START ACADEMY ELEMENTARY SCHOOL STRONG START ACADEMY ELEMENTARY SCHOOL	(702) 757-0811	500	EE7001076							
ADDRESS 302 S 9TH ST Las Vegas, NV 89101			RISK CAT.	P.E. CODE	DISTRICT	LOCATION	PERMIT STATUS					
			4	5103	80		PENDING					
NEVADA CLEAN INDOOR AIR ACT: <input type="checkbox"/> COMPLIANCE REQUIRED <input type="checkbox"/> EXEMPT						CONTACT PERSON:						
CURRENT ACTION	EHS	SERVICE	DATE	TIME IN	TIME OUT	TRAVEL MIN	RESULT	SEWER	WATER	FUTURE ACTION	ACTION	DATE
	EE7001039	929	8/03/2022	11:40AM	12:30PM	0	80	M	M		53	

SPECIAL NOTES:

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

GENERAL EQUIPMENT

	IN	OUT	NA	NO	COS
1 BEVERAGE / FROZEN DISPENSING	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 COLD HOLDING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 COOKING	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 FOOD PROCESSING / PREPARATION / SPECIALTY EQUIPMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 FOOD SHIELD / SPLASH GUARD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 HOT HOLDING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 ICE MACHINE / BIN	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 LIVE AQUATIC STORAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 SHELVING / WORKTABLES / AMBIENT DISPLAY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PHYSICAL FACILITY

	IN	OUT	NA	NO	COS
10 EXTERIOR OPENINGS / PEST CONTROL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 FINISHES / CABINETRY / COUNTERTOPS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 FLOORS / WALLS / CEILINGS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 LIGHTING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 SEALS / SEAMS / FLASHING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 TRASH / OUTDOOR WASH AREA	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 VENTILATION	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PLUMBING

	IN	OUT	NA	NO	COS
17 ADEQUATE BACKFLOW PREVENTION	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 FLOOR SINK / DRAINS / LIQUID WASTE DISPOSAL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19 GREASE CAPTURE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 HAND SINK(S)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21 MOP SINK	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22 OVERHEAD WASTE / UTILITY LINES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23 PREPARATION SINK / DUMP SINK / RINSE SINK / DIPPER WELL	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24 RESTROOM(S)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25 WARE WASH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OTHER PERMIT REQUIREMENTS

	IN	OUT	NA	NO	COS
26 ACCURATE THERMOMETER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27 FOOD HANDLER / EMPLOYEE HEALTH / PERSON IN CHARGE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28 GAS, ELECTRICITY, SEWER, AND WATER UTILITIES FULLY OPERATIONAL	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29 GENERAL MAINTENANCE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30 HACCP, WAIVER, LABEL, OR OTHER AGENCY APPROVALS AS REQUIRED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31 MENU / ADVISORIES / SIGNS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32 NCIAA COMPLIANCE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33 SANITIZER SOLUTION & TEST KIT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TEMPERATURE OBSERVATIONS

Item	Location	Measurement	Comment
reach in		38 F	
hot water	hand sink	112 F	
hot water	3 comp	124 F	



VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS

Item No	Observations & Corrective Actions
26	<p>VIOLATION: A stem thermometer is not available in the facility.</p> <p>INSPECTOR OBSERVATION: NO probe thermometer available</p> <p>CORRECTIVE ACTION: Prior to operating, provide an accurate stem thermometer for checking internal food temperatures.</p>
33	<p>VIOLATION: Sanitizer solution not available or not at recommended concentration.</p> <p>INSPECTOR OBSERVATION: NO sanitizer provided in kitchen</p> <p>CORRECTIVE ACTION: Prior to operating, provide sanitizer solution, prepared per manufacturer specifications for food contact surfaces, and ensure proper concentration is maintained.</p> <p>VIOLATION: Sanitizer test strips or kit not available for testing sanitizer concentration.</p> <p>INSPECTOR OBSERVATION: NO test strips available</p> <p>CORRECTIVE ACTION: Prior to operating, provide test strips or test kit for all sanitizers that are in use at the facility.</p>

Overall Inspection Comments:

Project description: FINAL PERMITTING OF NEW ELEMENTARY SCHOOL KITCHEN

Permit is approved



Training materials, including information on handwashing, employee health policy, and food safety may be found at www.snhd.info/ferl

Team inspection conducted with EHS Heather MacDavid

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

Inspector Name: Jennifer Johnson

Signature Note: mbenitez@clvstrongstartes.org

Received by (signature)	Received by (printed)	EHS (signature)
	M Benitez director	 Jennifer Johnson

Your signature on this form: 1) Does not constitute agreement with its contents. The permit holder or authorized representative may contact the Environmental Health Division to discuss this report. They may also appeal any notice or inspection findings if a written request for a hearing is filed within 15 business days. Until 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.

What You Should Know About COVID-19 to Protect Yourself and Others



What is coronavirus disease 2019 (COVID-19)?

COVID-19 is an illness caused by a virus that can spread from person to person. The virus that causes COVID-19 is a new coronavirus that has spread worldwide. Symptoms can range from mild to severe illness. People can also be asymptomatic (no symptoms) and still spread the virus to others.

How does COVID-19 spread?

The virus is primarily spread from person to person. You can become infected from:



- Close contact (about 6 feet or two arm lengths) with a person who has COVID-19.
- Respiratory droplets when an infected person coughs, sneezes, or talks.
- Touching a surface with the virus on it, then touching your mouth, nose, or eyes.

How can I protect myself and others from COVID-19?



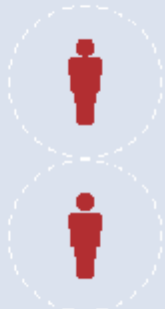
There is currently no vaccine to protect against COVID-19. The best way to protect yourself is to avoid being exposed to the virus that causes COVID-19.

- Stay home as much as possible and avoid close contact with others.
- Wear a cloth face covering that covers your nose and mouth in public.
- Wash hands often with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer with 60% alcohol if soap and water aren't available.
- Clean and disinfect frequently touched surfaces.

Practice social distancing.

Buy your groceries and medicine, go to the doctor, and complete your banking activities online as much as possible.

- If you must go in person, stay at least 6 feet away from others.
- Always wear a cloth face covering that covers your mouth AND nose.



Prevent the spread of COVID-19 if you are sick.



Stay home if you are sick, except to get medical care when needed.

- Avoid public transportation, ride-sharing, or taxis.
- Separate yourself from people and pets in your home.
- If you need medical attention, call ahead of time so your medical provider can take the appropriate precautions.

Know your risk for severe illness.



- Everyone is at risk of getting COVID-19.
- Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more severe illness.