Department of Public Health and Social Services
Division of Environmental Health

Food Establishment Inspection Report

INSPECTION	RSN	TYPE	GRADE
Regular			(1)
Follow-up	✓	✓	
Complaint			RATING
Investigation			A
Other:			

INSPECTION DATE	TIME IN	TIME OUT	ESTABLISHMENT NAME
08 / 14 / 2018	2:00 PM	3:30 PM	SANOCASTLE, INC. (THE) GLOBE DISCO

PERMIT HOLDER	SANITARY PERMIT NO.	LOCATION (Address)
SANOCASTLE, INC. (THE)	180001688	1199 PALE SAN VITORES TUMON, GU

ESTABLISHMENT TYPE	AREA	TELEPHONE			RISK CATEGORY
BAR	5	648-8113	No. of Risk Factor/Intervention Violations	8	1
			No. of Repeat Risk Factor/Intervention Violations	3	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

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

	Compliance Status		COS	R	PTS
	Supervision				
1	IN OUT	Person in charge present, demonstrates knowledge, and performs duties			6
	Employee Health				
2	IN OUT	Management awareness; policy present			6
3	IN OUT	Proper use of reporting, restriction & exclusion			6
	Good Hygienic Practices				
4	IN OUT N/A N/O	Proper eating, tasting, drinking, beteinut, or tobacco use			6
5	IN OUT N/A N/O	No discharge from eyes, nose, and mouth			6
	Preventing Contamination by Hands				
6	IN OUT N/A N/O	Hands clean and properly washed			6
7	IN OUT N/A N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed			6
8	(IN) OUT	Adequate handwashing facilities supplied & accessible			6
	Approved Source				
9	IN OUT	Food obtained from approved source			6
10	IN OUT N/A N/O	Food received at proper temperature			6
11	IN OUT	Food in good condition, safe, and unadulterated			6
12	IN OUT N/A N/O	Required records available: shellstock tags, parasite destruction			6
	Protection from Contamination				
13	IN OUT N/A	Food separated and protected			6
14	(IN) OUT N/A	Food contact surfaces: cleaned & sanitized			6
15	IN OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food			6

	Compliance Status		COS	R	PTS
	Potentially Hazardous Food (TCS Food)				
16	IN OUT N/A N/O	Proper cooking time and temperatures			6
17	IN OUT N/A N/O	Proper reheating procedures for hot holding			6
18	IN OUT N/A N/O	Proper cooling time and temperatures			6
19	IN OUT N/A N/O	Proper hot holding temperatures			6
20	IN OUT N/A	Proper cold holding temperatures			6
21	IN OUT N/A N/O	Proper date marking and disposition			6
	Consumer Advisory				
22	IN OUT N/A	Consumer Advisory provided for raw or undercooked foods			6
	Highly Susceptible Populations				
23	IN OUT N/A	Pasteurized foods used; prohibited foods not offered			6
	Chemical				
24	IN OUT N/A	Food additives: approved and properly used			6
25	IN OUT	Toxic substances properly identified, stored, used			6
	Conformance with Approved Procedures				
26	IN OUT N/A	Compliance with variance, specialized process, and HACCP plan			6

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box: If numbered item is not in compliance and/or if COS and/or R. COS =Corrected on-site during inspection R =Repeat violation PTS =Demerit points

	Compliance Status		COS	R	PTS
	Safe Food and Water				
27		Pasteurized eggs used where required			1
28		Water and Ice from approved source			2
29		Variance obtained for specialized processing methods			1
	Food Temperature Control				
30		Proper cooling methods used; adequate equipment for temperature control			1
31		Plant food properly cooked for hot holding			1
32		Approved thawing methods used			1
33		Thermometer provided and accurate			1
	Food Identification				
34		Food properly labeled; original container			1
	Prevention of Food Contamination				
35		Insects, rodents, and animals not present			2
36		Contamination prevented during food peparation, storage & display			1
37		Personal cleanliness			1
38		Wiping cloths: properly used and stored			1
39		Washing fruits and vegetables			1

	Compliance Status		COS	R	PTS
	Proper Use of Utensils				
40		In-use utensils: properly stored			1
41		Utensils, equipment and linens: properly stored, dried, handled			1
42		Single-use/single-service articles: properly stored, used			1
43		Gloves used properly			1
	Utensils, Equipment and Vending				
44		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			1
45		Warewashing facilities: installed, maintained, used; test strips			1
46		Nonfood-contact surfaces clean			1
	Physical Facilities				
47		Hot & cold water available, adequate pressure			2
48		Plumbing installed; proper backflow devices			2
49		Sewage and wastewater properly disposed			2
50		Toilet facilities: properly constructed, supplied, & cleaned			2
51		Garbage/refuse properly disposed; facilities maintained			2
52		Physical facilities installed, maintained, and clean			1
53		Adequate ventilation and lighting; designated areas use			1
	Documents and Placards				
54		Sanitary Permit, Health Certificates valid and posted			2

I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.

Person-in Charge (Print and Sign): [illegible]

Date: 8-14-2018

DEH Inspector (Print and Sign): KATHERINE DUENAS / VENER RAYMUNDO

Follow-up (Circle one): YES (NO)

Follow-up Date: N/A

Department of Public Health and Social Services
Division of Environmental Health

Food Establishment Inspection Report

ESTABLISHMENT NAME		LOCATION (Address)
SANDCASTLE, INC. (THE) GLOBE DISCO		1199 PALE SAN VITORES TUMON, GU
INSPECTION DATE	SANITARY PERMIT NO.	PERMIT HOLDER
08/14/2018	180001688	SANDCASTLE, INC. (THE) GLOBE DISCO

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE

Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

A FOLLOW-UP INSPECTION WAS CONDUCTED IN RESPONSE TO A RE-INSPECTION REQUEST SUBMITTED BY THE ESTABLISHMENT FOR THE INSPECTION CONDUCTED ON 08/08/2018, WHICH RESULTED IN THE SUSPENSION OF SANITARY PERMIT DUE TO IMMINENT HEALTH HAZARD.

THE FOLLOWING VIOLATIONS WERE CORRECTED: #8, 14, 35, 36, 44, 52, AND 53.

NO COCKROACH AND RODENT ACTIVITY OBSERVED DURING TIME OF INSPECTION. INFORMED MANAGER TO WORK WITH THEIR PEST CONTROL COMPANY AND CONTINUE MONITORING AND TREATMENT FOR AN ADDITIONAL SEVEN (7) DAYS TO ENSURE ANY UNHATCHED OOTHECAE (EGG CASINGS) ARE ADDRESSED. COPY OF PEST CONTROL REPORTS FOR ADDITIONAL SEVEN (7) DAYS MUST BE PROVIDED DAILY TO THE DIVISION OF ENVIRONMENTAL HEALTH (DEH).

REMOVED "NOTICE OF CLOSURE" PLACARD.
ISSUED "A" PLACARD NO. 02780 AND POSTED ON TICKETING BOOTH WINDOW.
ISSUED HRE CLOSURE, SANITARY PERMIT PAYMENT ROUTING SLIP, PROVIDED GUIDANCE ON WHERE TO PAY. INFORMED MANAGER PAYMENT MUST BE RECEIVED PRIOR TO RE-INSTATEMENT OF SANITARY PERMIT.

PHOTOS WERE TAKEN.
BRIEFED MANAGER, CARLA SILVA ON ABOVE.

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign): Carla Silva — Date: 8/14/2018

DEH Inspector (Print and Sign): K. DUENAS, EPHO III; V. RAYMUNDO, EPHO I — Date: 08/14/2018