













# County of Sacramento

## Retail Food Facility

### Official Inspection Report

Date:	03/27/2024
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ESTABLISHMENT NAME: DOS COYOTES BORDER CAFE Permit Holder: COLTAM INC

Address: 1735 Arden Way Ste 230 City Sacramento Zip Code 95815 Phone (916) 927-0377

FA FA0001508 Program Identifier	PR PR0001631	Type of Inspection INSPECTION
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Items listed on this report as violations do not meet the requirements set forth in the California Health and Safety Code commencing with section 7; 113700. All violations must be corrected within specified timeframe. Violations that are classified as "Major" pose an immediate threat to public health and have the potential to cause foodborne illness. All major violations must be corrected immediately. Non-compliance may warrant immediate closure of the food facility.

#### OBSERVATIONS

Name on Food Safety Certificate Victor Garcia Expiration Date 03/11/2028

Warewash Chlorine (Cl) \_\_\_\_\_ ppm Quaternary Ammonia (QA) \_\_\_\_\_ ppm Heat \_\_\_\_\_ °F DDBSA \_\_\_\_\_ ppm  
Water/Hot Water Ware Sink Temp 138 °F Hand Sink Temp 131 °F Wiping Cloth \_\_\_\_\_ ppm

#### FOOD ITEM / LOCATION / TEMP °F DOCUMENTATION

shredded cheese / ice bath / 42F	cooked beans & corn / cold-top cooler / 41F
cooked black beans / hot-holding unit / 146F	grilled chicken / hot-holding unit / 152F
raw shrimp / 6-drawer cooler / 42F	crispy chicken tacos / walk-in cooler / 37F

#### NOTES

Recommend installation of insect glue traps throughout facility to monitor for any vermin activity. None observed at time of inspection.

#### Inspection receives a Yellow placard

Due to receipt of yellow placard, a reinspection will be conducted within 24-72 hours. Additional fees apply. To receive a green placard, all major violations must remain corrected. Posted placard may not be moved or blocked.

<b>STATUS</b>
<input type="checkbox"/> GREEN - Pass
<input checked="" type="checkbox"/> YELLOW - Conditional Pass; Reinspection required
<input type="checkbox"/> RED- Closed; Suspension of permit to operate
<input type="checkbox"/> Placard program not applicable at this time
<b>ACTIONS</b>
<input type="checkbox"/> Photographic documentation obtained
<input type="checkbox"/> Compliance conference required
<input type="checkbox"/> Food / equipment impounded (50)
<input type="checkbox"/> Food safety education required; # of employees _____
<input type="checkbox"/> Permit Suspension; facility closure required

The person in charge is responsible for ensuring that the above mentioned facility is in compliance with all applicable sections of the California Health and Safety Code. If a reinspection is required, fees may be assessed as authorized by current Sacramento County Code, Chapter 6.99.150.

Accepted by: \_\_\_\_\_

Name and Title: Emailed to: Victor / Manager

Specialist: M. Cuevas Phone: (916) 639-3418

Co-Inspector: \_\_\_\_\_