ALLEGHENY COUNTY HEALTH DEPARTMENT

FOOD SAFETY PROGRAM

FOOD SAFETY ASSESSMENT REPORT

2121 NOBLESTOWN RD, SUITE #210 PITTSBURGH, PA 15205 PHONE: 412-578-8044 FAX: 412-578-8190

Client ID: FSP-MFF-202508280023 Client Name: Los Cabos Mobile

Address: 5013 BUTLER ST Inspection Date: 8/28/2025

City: PITTSBURGH State: PA Zip: 15201 Purpose: Consultation

Municipality: CITY OF PITTSBURGH - Inspector: Tyler Wolfe Permit Exp. Date: 8/28/2025

Category Code: Priority Code: Re-Inspection Date: Class:

| Re-inspection. | le. | | | | JId55. | | | | | |
|---|-----|------|-------|------|--------|----------------|----|-------|--------|----------|
| Food Safety Assessment Categories | Ass | men | t Sta | itus | | Violation Risk | | | | |
| | • | S | NA | NO | V | Hi | gh | Med. | Low | Imminent |
| 1 Food Source/Condition | | | | | | | | | | |
| 2 Cooking Temperatures # | | | | | | | | | | |
| 3 Consumer Advisory | | | | | | | | | | |
| 4 Reheating Temperatures # | | | | | | | | | | |
| 5 Cooling Food # | | | | | | | | | | |
| 6 Hot Holding Temperatures # | | | | | | | | | | |
| 7 Cold Holding Temperatures # | | | | | | | | | | |
| 8 Facilities to Maintain Temperature | | | | | | | | | | |
| 9 Date Marking of Food | | | | | | | | | | |
| 10 Probe-Type Thermometers | | | | | | | | | | |
| 11 Cross-Contamination Prevention # | | | | | | | | | | |
| 12 Employee Health # | | | | | | | | | | |
| 13 Employee Personal Hygiene # | | | | | | | | | | |
| 14 Cleaning and Sanitization # | | | | | | | | | | |
| 15 Water Supply | | | | | | | | | | |
| 16 Waste Water Disposal | | | | | | | | | | |
| 17 Plumbing | | | | | | | | | | |
| 18 Handwashing Facilities | | | | | | | | | | |
| 19 Pest Management # | | | | | | | | | | |
| 20 Toxic Items | | | | | | | | | | |
| 21 Certified Food Protection Manager | | | | | | | | | | |
| 22 Demonstration of Knowledge | | | | | | | | | | |
| 23 Contamination Prevention - Food, Utensils and Equipment | | | | | | | | | | |
| 24 Fabrication, Design, Installation and Maintenance | | | | | | | | | | |
| 25 Toilet Room | | | | | | | | | | |
| | 0 | 0 | 0 | 0 | 0 | |) | 0 | 0 | 0 |
| General Sanitation | Ass | essi | ment | Stat | us | • | | Viola | tion F | Risk |
| | • | S | NA | NO | V | Hi | gh | Med. | Low | Imminent |
| 26 Garbage and Refuse | | | | | | | | | | |
| 27 Floors | | | | | | | | | | |
| 28 Walls and ceilings | | | | | | | | | | |
| 29 Lighting | | | | | | | | | | |
| 30 Ventilation | | | | | | | | | | |
| 31 Dressing rooms and Locker rooms | | | | | | | | | | |
| 32 General Premises | | | | | | | | | | |
| 33 Administrative | | | | | Х | | | | Х | |
| # U.S. Centers for Disease Control and Prevention "high risk" for | 0 | 0 | 0 | 0 | 1 | |) | 0 | 1 | 0 |
| foodborne illness and establishment of priority of inspection. | 0 | 0 | 0 | 0 | 1 | | | | | |

◆ - Diamond Exceptional

S - SATISFACTORY NO - NOT OBSERVED NA - NOT APPLICABLE V - VIOLATION



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INSPECTION DETAILS

Inspector Name: Tyler Wolfe Balance Amount: \$0.00

Placarding: Ordered to Close Contact: Eduardo Ojeda

Start Time: 1:00 PM End Time: 2:00 PM

Violation: 33 Administrative

Comments: *LOW RISK*

- Facility observed open and operating without ACHD Mobile Food Facility Permit

Food Code Section(s): 302

Corrective Action: Approval of construction plans and specifications must be obtained prior to Construction

Corrective Action: Do not conceal, remove or cover placard.

Corrective Action: Obtain a valid Allegheny County Health Department permit from Food Safety Program.

Corrective Action: Post valid health permit in location conspicuous to the public.

Corrective Action: Provide at least a 10-day notice prior to scheduling a pre-operational inspectionCorrective Action: Submit complete construction plans and specifications to the Food Safety Program.

Corrective Action: Submit Mobile Food Facility Permit Application to the Allegheny County Health Department Food

Safety Program

OTHER ASSESSMENT OBSERVATIONS AND COMMENTS

Satisfactory Observations:

Exceptional Observations:

General Comments:

Consultation conducted between Area Supervisor and Owner/Operator. Operator was instructed to cease operations of mobile food facility until ACHD Mobile Food Permit has been issued to Operator. Options and instructions regarding submitting ACHD Mobile Food Facility application were discussed during consultation.

The mobile food facility located @ 5013 Butler St. Pittsburgh, PA 15201 has been ordered closed.

Red "Closed" placard installed on front window of mobile facility, facing Butler St. The red "Closed" placard must remain visible to the public. The red "Closed' placard may not be removed, blocked from view, covered, or otherwise obstructed from view to the public. Red "Closed" placard will be removed by, and only by, Area Inspector once facility has been issued current and valid ACHD Mobile Food Facility permit.

Area Supervisor D.McKee present during consultation.