



CITY OF HOUSTON
Department of Health and Human Services
Consumer Health Services
8000 N Stadium Dr., Suite 200
Houston, TX 77054
832-393-5100

MENU DISCLOSURE:(New units & units changing ownership. Fill out before inspection)

Business name/negocio	Unit # (inspector only)
Mailing address/domicilio:	Phone #:

1. Where will you buy your food supplies? (names and streets of all permitted businesses/suppliers)
Pon el nombre y calle de cada tienda/bodega que sule tu negocio)
2. List all food supplies/ingredients you will have on unit (in order to prepare products listed in #5):
Haz lista completa de abastos/ingredientes que se van a encontrar en la unidad (para poder preparar los productos en #5).
3. How and where will you store the supplies? (Note: must be on unit or in commissary)
Donde vas a almacenar los abastos? (En la unidad o en la comisaria?)
4. How will you make sure food supply items that require refrigeration are kept at required 41 degrees F or colder? Como vas a asegurar que los abastos que requieren de refrigeracion van a mantenerse a los 41 grados F o mas frio?

5. On the back, name all products/menu items served, (except for foods obtained and sold in manufacturer's unopened package that do not require refrigeration) AND steps of preparation (including final cooking temperatures of meats, thawing, cooling methods, equipment/utensils used, hot-holding equipment & temperatures, cooling methods).

5.. Identifica cada producto que vas a servir (taco de fajita, menudo, etc.) Y los pasos de preparacion, (incluso la temperatura final de cocimiento de las carnes, metodos de descongelamiento, el equipo/utensilios que vas a ocupar, metodo de enfriarlo o mantenerlo caliente hasta que se sirve).

FOOD MENU ITEM/

ALIMENTO:

HOW PREPARED/ PREPARACION:

INSPECTOR'S NOTES:

FOOD MENU ITEM/ ALIMENTO:	HOW PREPARED/ PREPARACION:	INSPECTOR'S NOTES:

Owner/representative's name

signature/firma

date/fecha