	Retail Food Establishment Inspection Report  First aid kit  Allergy policy  Vomit clean up Employee health																
Date:         Time in:         Time out:         License/P           8/30/2024         11:03         11:45         need								re	en	t/t	0	p	OSt Est. Type Risk Category Page <u>1</u> of <u>2</u>				
Purpose of Inspection: 1-Routine 2-Follow Up 3-Compla													5-CO/Construction 6-Other TOTAL/SCORE				
Establishment Name: Contact/Owner N Sprouts Farmer's Market #166 Meat Dept													* Number of Repeat Violations:      ✓ Number of Violations COS:				
Pł	Physical Address: 469 E I-30 Rockwall, TX see Grocery								od d in	fo	G	reas	e trap : Follow-up: Yes				
<b>Compliance Status:</b> Out = not in compliance IN = in compliance NO =									/ed	NA	<b>4</b> = n	not ap	plicable $COS = corrected on site R = repeat violation W- Watch$				
M	Mark the appropriate points in the OUT box for each numbered item Mark '\' a checkmark in appropriate box for IN, NO, NA, COS Mark an X in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																
Compliance Status         Time and Temperature for Food Sofety           0         I         N         C         Time and Temperature for Food Sofety         I											С	s					
U T	N	$\begin{array}{c c} \mathbf{O} & \mathbf{A} & \mathbf{O} \\ \mathbf{S} & & & & \\ \end{array} $ (F = degrees Fahrenheit)						U T	N	0	A	O S					
	~	1. Proper cooling time and temperature							~				<ol> <li>Management, rood employees and conditional employees; knowledge, responsibilities, and reporting</li> </ol>				
	~				2. Proper Cold Holding temperature(41°F/ 45°F)		-	13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth									
	•				3. Proper Hot Holding temperature(135°F)				~								
3					4. Proper cooking time and temperature			Preventing Contamination by Hands 14. Hands cleaned and properly washed/ Gloves used properly									
		~			<ol> <li>Proper reheating procedure for hot holding (165°F in 2</li> </ol>	_	gloves used										
		~			Hours)				~				alternate method properly followed (APPROVED YN)				
F	•         6. Time as a Public Health Control; procedures & records												Highly Susceptible Populations				
Approved Source					Approved Source				~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required				
	~				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction							NO EGGS Chemicals					
				8. Food Received at proper temperature								17. Food additives; approved and properly stored; Washing Fruits					
	~								~				& Vegetables Produce Maxx				
	Protection from Contamination								~				18. Toxic substances properly identified, stored and used				
	~		9. Food Separated & protected, prevented during food preparation, storage, display, and tasting										Water/ Plumbing				
3				~	10. Food contact surfaces and Returnables ; Cleaned and Sanitized at ppm/temperature				~				19. Water from approved source; Plumbing installed; proper backflow device				
	~				11. Proper disposition of returned, previously served or reconditioned				• d			20. Approved Sewage/Wastewater Disposal System, proper disposal					
0	I	N	N	С	Priority Foundation Items (2 Po	oints)	vio	olati 0	ions I	Req N	uire N	Cor	rective Action within 10 days				
Ŭ T	N	0	A	Ö S	Demonstration of Knowledge/ Personnel			Ŭ T	N     O     A     O       S     Food Temperature Control/ Identification								
	~				21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager/ Posted				~				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature				
	~		22. Food Handler/ no unauthorized persons/ personnel				-		~				28. Proper Date Marking and disposition				
	Safe Water, Recordkeeping and Food Package Labeling					29. Thermometers provided, accurate, and calibrated; Thermal test strips Digital system/probe						29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Digital system/probe					
					23. Hot and Cold Water available; adequate pressure, safe							Permit Requirement, Prerequisite for Operation					
	~			24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled				W					30. Food Establishment Permit (Current/insp report sign posted)				
					Conformance with Approved Procedures 25. Compliance with Variance, Specialized Process, and		-						Utensils, Equipment, and Vending 31. Adequate handwashing facilities: Accessible and properly				
	~			HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions				2					supplied, used				
					Consumer Advisory				~				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used				
	~				26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffet Plate)/ Allergen Label								33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided				
0	T	N	N	С	Core Items (1 Point) Violations Require Corrective	e Actio	on N	Vot O	to E. I	xcee N	ed 90 N	0 Da C	ys or Next Inspection , Whichever Comes First				
U T	N	N O	A	o s	Prevention of Food Contamination	K		U T	I N	N 0	A A	o s	Food Identification				
1					34. No Evidence of Insect contamination, rodent/other animals				~				41.Original container labeling (Bulk Food)				
	~				35. Personal Cleanliness/eating, drinking or tobacco use								Physical Facilities				
	~				36. Wiping Cloths; properly used and stored	$\square$			~				42. Non-Food Contact surfaces clean				
	~				37. Environmental contamination				~				43. Adequate ventilation and lighting; designated areas used				
	~		_		38. Approved thawing method		-		~				44. Garbage and Refuse properly disposed; facilities maintained				
					Proper Use of Utensils 39. Utensils, equipment, & linens; properly used, stored,			1					<ul><li>45. Physical facilities installed, maintained, and clean</li><li>46. Toilet Facilities; properly constructed, supplied, and clean</li></ul>				
	~				<ul> <li>39. Utensils, equipment, &amp; linens; properly used, stored, dried, &amp; handled/ In use utensils; properly used</li> <li>40. Single-service &amp; single-use articles; properly stored</li> </ul>				~				46. Totlet Facilities; properly constructed, supplied, and clean 47. Other Violations				
	~				and used				~								

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## 1st followup is free. Any additonal followups will result in a \$50 fee. Retail Food Establishment Inspection Report

Received by: (signature) Melanie Gallegos	Print: Melanie Gallegos	Title: Person In Charge/ Owner Manager
Inspected by: (signature) Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: Farmer's Market #166 Meat Dept	Physical A 469 E		City/State:	all,	II, TX License/Permit # need current/ to pos		Page <u>2</u> of <u>2</u>			
Item/Loc	ation	Temp F	TEMPERATURE OBSERVA	TIONS Temp F	It	Item/Location			Temp F		
	wall ambient	10	Meat cutting room			eni/Locat			Temp I		
k	bacon wall	32	mobile bunker on ice	e 41-4	6						
	beef wall	28-34									
one	pan meal display	32-37									
chic	ken rounder	28-37									
seafo	od freezer rounder										
	WiC	27									
	WIF	-13									
Item			SERVATIONS AND CORRECT								
Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:										
31 31	Hand sink 110F /need soap and paper towels										
51	Need to keep hand sink accessible/ brooms and mops in front One pan meals with cooking instructions as applicable to meat (beef to 155F, chicken to internal 165F)										
2								,			
10	Mobile ice bath bunker/meat to be submerged and not placed on top/to keep meat cold holding at 41F or below from top to bottom/COS To have sani bottles setup during prep/COS at beginning of inspection										
			• · ·	99	<u></u>						
	Meat cutting hand sink 109F equipped Meat cutting 3 comp sink 117F										
	3 comp sink sani di										
	•	•	cutting only/no storage	e as not	41F	or be	elow				
45	To clean floors und		<u> </u>								
			rds kept through Digi								
34	A couple of flies in I										
	Frozen fish thawed per manufacturer's instructions/ released from vacuum sealed packaging prior to thawing										
Received	by		Print:			1	Title: Person In Charge/	0			
(signature)		S		Galle	go		Manager	owner			
Inspected (signature)	Melanie Gallego <sup>1 by:</sup> Chrísty Cov	tez, î	RS Christy C	ortez	, R	S		collected	4		
Form FH-06	5 (Revised 09-2015)	~					Samples: Y N #	concelle	L.		