

Additional followups
\$50.00 fee

Retail Food Establishment Inspection Report
City of Rockwall

- First aid kit
- Allergy policy/training
- Vomit clean up
- Employee health

| | | | | | | |
|----------------------------|-------------------------|--------------------------|--------------------------------------|-----------------------------|---------------------------|---------------------------|
| Date: 08/31/2024 | Time in: 3:45 | Time out: 4:50 | License/Permit # Food 5181 | Food handlers All | Food managers 5 | Page <u>1</u> of <u>2</u> |
|----------------------------|-------------------------|--------------------------|--------------------------------------|-----------------------------|---------------------------|---------------------------|

| | | | | | | | |
|--|--------------------------------------|--------------------------------------|--|--|----------------------------------|-------------------------------------|--------------------|
| Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine | <input type="checkbox"/> 2-Follow Up | <input type="checkbox"/> 3-Complaint | <input type="checkbox"/> 4-Investigation | <input type="checkbox"/> 5-CO/Construction | <input type="checkbox"/> 6-Other | <input checked="" type="checkbox"/> | TOTAL/SCORE |
|--|--------------------------------------|--------------------------------------|--|--|----------------------------------|-------------------------------------|--------------------|

| | | | |
|---|--|--------------------------------------|--------------|
| Establishment Name: Dominos pizza | Contact/Owner Name: Team wow | * Number of Repeat Violations: _____ | 5/95A |
| | | ✓ Number of Violations COS: _____ | |

| | | | | |
|--|---|--------------------------|--|--|
| Physical Address: 2330 green crest | Pest control : Massey monthly | Hood Need info | Grease trap/ waste oil Trimble 7-17-2924 | Follow-up: Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> |
|--|---|--------------------------|--|--|

Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- Watch
Mark the appropriate points in the OUT box for each numbered item Mark in appropriate box for IN, NO, NA, COS Mark an in appropriate box for R

Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days

| Compliance Status | | | | | | Compliance Status | | | | | |
|---|-------------------------------------|-------------------------------------|----|-----|---|--|-------------------------------------|----|----|-----|---|
| OUT | IN | NO | NA | COS | R | OUT | IN | NO | NA | COS | R |
| Time and Temperature for Food Safety (F = degrees Fahrenheit) | | | | | | Employee Health | | | | | |
| | | <input checked="" type="checkbox"/> | | | | | <input checked="" type="checkbox"/> | | | | |
| 1. Proper cooling time and temperature Cook serve | | | | | | 12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting | | | | | |
| | <input checked="" type="checkbox"/> | | | | | W | | | | | |
| 2. Proper Cold Holding temperature(41°F/ 45°F) | | | | | | 13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth To post hand sink | | | | | |
| | <input checked="" type="checkbox"/> | | | | | Preventing Contamination by Hands | | | | | |
| 3. Proper Hot Holding temperature(135°F) | | | | | | 14. Hands cleaned and properly washed/ Gloves used properly | | | | | |
| | <input checked="" type="checkbox"/> | | | | | | <input checked="" type="checkbox"/> | | | | |
| 4. Proper cooking time and temperature | | | | | | 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N) | | | | | |
| | <input checked="" type="checkbox"/> | | | | | Highly Susceptible Populations | | | | | |
| 5. Proper reheating procedure for hot holding (165°F in 2 Hours) | | | | | | 16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required | | | | | |
| | <input checked="" type="checkbox"/> | | | | | Chemicals | | | | | |
| 6. Time as a Public Health Control; procedures & records | | | | | | 17. Food additives; approved and properly stored; Washing Fruits & Vegetables Prewashed | | | | | |
| | <input checked="" type="checkbox"/> | | | | | | <input checked="" type="checkbox"/> | | | | |
| Approved Source | | | | | | 18. Toxic substances properly identified, stored and used Watch | | | | | |
| | <input checked="" type="checkbox"/> | | | | | Water/ Plumbing | | | | | |
| 7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Corp / own. Commissary | | | | | | 19. Water from approved source; Plumbing installed; proper backflow device Watch storage under | | | | | |
| W | | | | | | | <input checked="" type="checkbox"/> | | | | |
| 8. Food Received at proper temperature To have vendor put temp on invoice | | | | | | 20. Approved Sewage/Wastewater Disposal System, proper disposal | | | | | |
| Protection from Contamination | | | | | | | <input checked="" type="checkbox"/> | | | | |
| W | <input checked="" type="checkbox"/> | | | | | Water/ Plumbing | | | | | |
| 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting Watch boxes | | | | | | 19. Water from approved source; Plumbing installed; proper backflow device Watch storage under | | | | | |
| | <input checked="" type="checkbox"/> | | | | | | <input checked="" type="checkbox"/> | | | | |
| 10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature | | | | | | 20. Approved Sewage/Wastewater Disposal System, proper disposal | | | | | |
| | <input checked="" type="checkbox"/> | | | | | | <input checked="" type="checkbox"/> | | | | |
| 11. Proper disposition of returned, previously served or reconditioned Discard / customer keeps | | | | | | | | | | | |

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days

| Compliance Status | | | | | | Compliance Status | | | | | |
|---|-------------------------------------|----|-------------------------------------|-----|---|---|-------------------------------------|----|-------------------------------------|-----|---|
| OUT | IN | NO | NA | COS | R | OUT | IN | NO | NA | COS | R |
| Demonstration of Knowledge/ Personnel | | | | | | Food Temperature Control/ Identification | | | | | |
| | <input checked="" type="checkbox"/> | | | | | | | | <input checked="" type="checkbox"/> | | |
| 21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) 5 | | | | | | 27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature | | | | | |
| W | <input checked="" type="checkbox"/> | | | | | | <input checked="" type="checkbox"/> | | | | |
| 22. Food Handler/ no unauthorized persons/ personnel Need all certified 3 | | | | | | 28. Proper Date Marking and disposition 7days | | | | | |
| Safe Water, Recordkeeping and Food Package Labeling | | | | | | 29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Digital /test strips | | | | | |
| | <input checked="" type="checkbox"/> | | | | | Permit Requirement, Prerequisite for Operation | | | | | |
| 23. Hot and Cold Water available; adequate pressure, safe | | | | | | 30. Food Establishment Permit (Current/ insp sign posted) Posted | | | | | |
| | | | <input checked="" type="checkbox"/> | | | Utensils, Equipment, and Vending | | | | | |
| 24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled | | | | | | 31. Adequate handwashing facilities: Accessible and properly supplied, used Equipped | | | | | |
| | <input checked="" type="checkbox"/> | | | | | | <input checked="" type="checkbox"/> | | | | |
| Conformance with Approved Procedures | | | | | | 32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used Watch pans/ shelving | | | | | |
| | <input checked="" type="checkbox"/> | | | | | W | | | | | |
| 25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions Taking temps 2 times per day | | | | | | 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided | | | | | |
| | <input checked="" type="checkbox"/> | | | | | | <input checked="" type="checkbox"/> | | | | |
| Consumer Advisory | | | | | | 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided | | | | | |
| | <input checked="" type="checkbox"/> | | | | | 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided | | | | | |
| 26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label Ingredients / from box | | | | | | 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided | | | | | |

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First

| Compliance Status | | | | | | Compliance Status | | | | | |
|---|-------------------------------------|-------------------------------------|----|-------------------------------------|---|---|-------------------------------------|-------------------------------------|----|-----|---|
| OUT | IN | NO | NA | COS | R | OUT | IN | NO | NA | COS | R |
| Prevention of Food Contamination | | | | | | Food Identification | | | | | |
| 1 | | | | | | | | <input checked="" type="checkbox"/> | | | |
| 34. No Evidence of Insect contamination, rodent/other animals | | | | | | 41. Original container labeling (Bulk Food) | | | | | |
| | <input checked="" type="checkbox"/> | | | | | Physical Facilities | | | | | |
| 35. Personal Cleanliness/eating, drinking or tobacco use | | | | | | 42. Non-Food Contact surfaces clean See | | | | | |
| 1 | | | | <input checked="" type="checkbox"/> | | | <input checked="" type="checkbox"/> | | | | |
| 36. Wiping Cloths; properly used and stored To protect on shelf | | | | | | 43. Adequate ventilation and lighting; designated areas used | | | | | |
| | | <input checked="" type="checkbox"/> | | | | | <input checked="" type="checkbox"/> | | | | |
| 37. Environmental contamination Watch | | | | | | 44. Garbage and Refuse properly disposed; facilities maintained Watch | | | | | |
| | | <input checked="" type="checkbox"/> | | | | 1 | | | | | |
| 38. Approved thawing method | | | | | | 45. Physical facilities installed, maintained, and clean See | | | | | |
| Proper Use of Utensils | | | | | | 46. Toilet Facilities; properly constructed, supplied, and clean Equipped | | | | | |
| | <input checked="" type="checkbox"/> | | | | | | <input checked="" type="checkbox"/> | | | | |
| 39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used Watch/ | | | | | | 47. Other Violations | | | | | |
| 1 | | | | <input checked="" type="checkbox"/> | | | | <input checked="" type="checkbox"/> | | | |
| 40. Single-service & single-use articles; properly stored and used Paper towels in RR | | | | | | | | | | | |

