

Retail Food Establishment Inspection Report

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

| | | | | | | |
|---------------------------|--------------------------|---------------------------|--------------------------------------|-----------|---------------|---------------------------|
| Date: 9/24/2024 | Time in: 10:00 | Time out: 12:20 | License/Permit # FS2024-11 | Est. Type | Risk Category | 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 | | | | | | | TOTAL/SCORE |
| Establishment Name: Wade's Landing | | | Contact/Owner Name: | | * Number of Repeat Violations: _____ ✓ Number of Violations COS: _____ | | 16/84/B |
| Physical Address: 308 N Fannin Rockwall, TX | | | Pest control : ABC/8-27-2024 | Hood Hit that Spot/6-2024 | Grease trap : Jerry's/9-19-2024/1000gal | Follow-up: Yes <input checked="" type="checkbox"/> No <input 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 '✓' 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 | | | | | | 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 | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | | ✓ | | | | Preventing Contamination by Hands | | | | | |
| | | ✓ | | | | | ✓ | | | | |
| | | ✓ | | | | | ✓ | | | | |
| | ✓ | | | | | Highly Susceptible Populations | | | | | |
| Approved Source | | | | | | | ✓ | | | | |
| | ✓ | | | | | Chemicals | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| Protection from Contamination | | | | | | 3 | | | | | |
| | ✓ | | | | | Water/ Plumbing | | | | | |
| 3 | | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |

| 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 | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |
| Safe Water, Recordkeeping and Food Package Labeling | | | | | | | ✓ | | | | |
| | ✓ | | | | | Permit Requirement, Prerequisite for Operation | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| Conformance with Approved Procedures | | | | | | Utensils, Equipment, and Vending | | | | | |
| | ✓ | | | | | 2 | | | | | |
| Consumer Advisory | | | | | | 2 | | | | | |
| | ✓ | | | | | 2 | | | | | |

| 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 | | | | | | | ✓ | | | | |
| | ✓ | | | | | Physical Facilities | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |
| Proper Use of Utensils | | | | | | | ✓ | | | | |
| 1 | | | | | | | ✓ | | | | |
| 1 | | | | | | 1 | | | | | |

Retail Food Establishment Inspection Report

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|--|---------------------------|--|
| Received by: (signature) <i>Kamakana Hoaeae</i> | Print: Kamakana Hoaeae | Title: Person In Charge/ Owner Manager |
| Inspected by: (signature) <i>Christy Cortez, RS</i> | Print: Christy Cortez, RS | Business Email: |

Form EH-06 (Revised 09-2015)

| | | | | |
|--|--|------------------------------------|--------------------------------------|---------------------------|
| Establishment Name: Wade's Landing | Physical Address: 308 N Fannin | City/State: Rockwall, TX | License/Permit # FS2024-11 | Page <u>2</u> of <u>2</u> |
|--|--|------------------------------------|--------------------------------------|---------------------------|

TEMPERATURE OBSERVATIONS

| Item/Location | Temp F | Item/Location | Temp F | Item/Location | Temp F |
|----------------------------|--------|-----------------------|--------|-----------------------|--------|
| prep cooler/Bufalo sauce | 41 | raw chicken | 41 | Desert cold top/aioli | 42 |
| cooked wings | 41 | hotdogs | 41 | 2 door cooler | 10 |
| grill drawers/hamburgers | 41 | boiled deviled eggs | 41 | reach in freezer | 6 |
| steak/ salmon | 41/41 | salad cold top/hummus | 41 | | |
| shrimp/precooked chicken | 41/41 | cut tomatoes | 41 | | |
| under counter cooler/ranch | 41 | shredded chicken | 41 | | |
| WIC/ribeye | 41 | cheese | 41 | | |
| hamburgers | 41 | under/steak | 41 | | |

OBSERVATIONS AND CORRECTIVE ACTIONS

| Item Number | AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: |
|-------------|---|
| 31 | Coffee bar hand sink at 80F/needs to be 100+F |
| 18 | Chemicals need to be stored low and separate/not with food contact items/under coffee bar hand sink |
| 39/40 | Avoid storing food contact items such as salt and pepper shakers, espresso cups and packaged salt and sugar under plumbing under coffee hand sink |
| W | Coffee bar hand sink slow draining |
| 31 | Hand sink adjacent to salad cold top/hot water handle broken/to be repaired to dispense water at 100F |
| | Will use other hand sinks in kitchen |
| 31 | Hand sink near WIC at 116F/needs paper towels/COS |
| 31 | Avoid storing mop bucket directly in front of hand sink/needs to be accessible |
| 47 | Need mop rack to be re-installed over mop sink to store wet mops to dry |
| W | Items in prep cooler at 45 however every pan is refreshed with a new pan in the morning/giving to elevated temps/cooler at correct temps to cold hold |
| 39 | To store handled scoops out of bulk spices |
| | Sani buckets at 200ppm quats |
| 32 | To address cutting boards where scored and discolored |
| | No specialized processes, no raw meats, eggs,for service etc |
| 10/33 | Dishwasher not sanitizing at inspection/will use 3 comp sink until repaired/not open till 3 today/could be repaired before service |
| 34 | Flies |
| | 3 comp sink 128F |
| 31 | warewash hand sink 100F/needs paper rowels/COS |
| 40 | Avoid using cardboard for lining shelves in storage building |
| | Storage building used for liquor, beer, and paper goods, chemicals |
| | Bar hand sink 100F equipped |
| 10 | Bar dishwasher not sanitizing/ repair person coming today |
| 34 | Fruit flies in bar/to address breeding sites |
| | If using raw eggs in bar for drinks, to use pasteurized eggs |
| | RR sinks 100+F equipped |
| | |
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|--|---------------------------|--|
| Received by: (signature) <i>Kamakana Hoaeae</i> | Print: Kamakana Hoaeae | Title: Person In Charge/ Owner Manager |
| Inspected by: (signature) <i>Christy Cortez, RS</i> | Print: Christy Cortez, RS | Samples: Y N # collected |

Form EH-06 (Revised 09-2015)