Followup Fee of \$50.00 after First Followup

Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

City of Rockwall

9/23/24		ļ	10:00	2:20		FS-9							4	All	Page 1	of 2	
Purpose of Inspec				tion: 1-Routine	2-Follow	2-Follow Up		int	4	4-Investigat			1	5-CO/Construction	6-Other	TOTAL/S	CORE
Establishment Name: Contact/Owner N Kroger 574 Bakery Lance Sayen							Vame	:					Number of Repeat Violations: 1 V Number of Violations COS:			/ A	
Physical Address: 1950 North Goliad, Rockwall, Tx Pest control: See grocery insp								ood ole b 8	3/9/24			e trap :/ waste oil	Follow-up: Yes	9/91	/ A		
	Com	plia	nce S	Status: Out = not in co	ompliance IN = i	in compliar	nce NO		ot obse	rved	N.	A = n	ot ap	, .	site \mathbf{R} = repeat vio	olation W= V	Vatch
Mark tl	ne ap	prop	riate	points in the OUT box for	r each numbered	l item	Mark '							ox for IN, NO, NA, COS Maive Action not to exceed 3 da		e box for R	
Compli	ance N	Sta N	tus C					R			lianc				•		R
U N T	N O A O Find and Temperature for Food Safety (F = degrees Fahrenheit)						J N	0	A	O S	Employee Health						
	~			1. Proper cooling time	and temperatur	re				~				12. Management, food emplo knowledge, responsibilities, a	•	employees;	
.,				2. Proper Cold Holding	g temperature(4	1°F/ 45°F)		3	,				13. Proper use of restriction a eyes, nose, and mouth	and exclusion; No disc	charge from	
				3. Proper Hot Holding	temperature(13	85°F)				<u> </u>				Émployee health forr	•		
	'			4. Proper cooking time										Preventing Co 14. Hands cleaned and prope	ntamination by Han		
	V			5. Proper reheating pro	*		65°F in 2			~			/	15. No bare hand contact with	•		-
	'			Hours)						•				alternate method properly fol Gloves			
/				6. Time as a Public Hea	alth Control; pr	rocedures	& records								ceptible Populations		
				Ар	proved Source	e				•				16. Pasteurized foods used; p Pasteurized eggs used when i		fered	
				7. Food and ice obtaine													
~				good condition, safe, and unadulterated; parasite destruction Kroger									Chemicals				
./				8. Food Received at pro	oper temperatur	re				_				17. Food additives; approved & Vegetables	and properly stored;	Washing Frui	is
				Checking	e C 1	• ,•				-	,			Water 18. Toxic substances properly	y identified, stored an	d used	_
				9. Food Separated & pr	n from Contan		g food			'				Stored low and separa			
				preparation, storage, di											er/ Plumbing		
/				10. Food contact surfact Sanitized at 200	ces and Returna ppm/temperatu	ables ; Clea ure	aned and			~	,			19. Water from approved sou backflow device	rce; Plumbing install	ed; proper	
				11. Proper disposition of returned, previously served or							,			City approved 20. Approved Sewage/Waste disposal	water Disposal System	m, proper	
				reconditioned Disc	ard									uisposai			
						1 T.	(A.D.			-	_	_	~				
0 I	N	N A	C		iority Found			ints)) I	N	N	C	rective Action within 10 day		ation	R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Janet Jones	Print: Janet Jones	Title: Person In Charge/ Owner Asst Manager
Inspected by: Richard Hill	Print: Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

Establishn	ment Name:	Physical A	Address:	City/State:	License/Permit #	Page 2 of 2					
	er 574 Bakery			Rockwall Tx	FS-9356	1 age 2 01 2					
T. (T		TD.	TEMPERATURE OBSERVAT			_ m					
Item/Loca WIC at		Temp	Item/Location	Temp Item/Lo	ocation	Temp					
		37	Dessert Island								
Che	erry filling ref	38	34,35,33								
Ore	o buttercream	37	Cake display								
			33,34								
Self	f serve cakes		WIF htt	-8.1							
	31,32,32										
Ca	ıke Freezers										
	-6.9,-2.4										
	,	OF	SERVATIONS AND CORRECTIVE	VE ACTIONS							
Item Number	AN INSPECTION OF YOUR ES' NOTED BELOW: all temperature		ENT HAS BEEN MADE. YOUR ATTENT 1 F	TION IS DIRECTED TO	THE CONDITIONS OBS	ERVED AND					
31	Hand sinks equipped,	greater t	han 104 throughout kitchen	, front sink miss	sing papertowels,	cos					
		_	00 ppm, test strips current								
	Dry storage looks good	t									
45	General detail cleaning		• • •								
	Allergen statement cor										
	Bagel /donut self serve using paper to handle Rte foods and bags to transport										
39	Labels on back of package seem to be correct, good dates observed for rotation of stock										
	Observed tongs laying in self serve sub rolls, not tissue available, tongs are not attached, discarded 1 contained Need employee health form posted at all hand sinks										
	Need to post permit in each department										
Received (signature)	See abov	 'е	See abo	ove	Title: Person In Char	ge/ Owner					
Inspected (signature)		$\overline{}$	Richard								