Foll			•		e of													
\$50 Firs					D	Retail F	ood Esta	ıblish	ıme	nt I	ns	peo	ctio	on Report		First aid		
First Followup								.							Allergy policy			
City of Rockwall										Employe	e health							
Date: Time in: Time out: License/Pe 9/22/24 10:00 2:15 FS-93										срғм 4	Food handlers Page 1 of 2		2					
					tion: 🖌 1-Routine	2-Follow Up	3-Compla		_	nvesti	iga	tion		5-CO/Const	-	6-Other	TOTAL/SCO	RE
Establishment Name: Contact/Owner N Kroger 574 Starbucks Lance Sayen							ie:				×Number of ✓ Number of			0/07/	٨			
Physical Address: 1950 N Goliad Rockwall, Tx See grocery insp							Hoo N/a	d				trap :/ waste oil cery insp		Follow-up: Yes	3/97//	A		
	Compliance Status: Out = not in compliance IN = in compliance NC							$\mathbf{O} = \text{not } \mathbf{c}$	observ			= not	t appli	licable COS =		site \mathbf{R} = repeat vio		ch
Mark	the	app	prop	riate	points in the OUT box for Prio	rity Items (3 Poin						-		t for IN, NO, NA, the Action not to		rk an 🗙 in appropriat ys	e box for R	
Compliance Status Image: Complexity of the status 0 I N N C U N O A O Time and Temperature for Food Safety					R	Co O U	mplian I I N (N	Ν	IS C O		F	1		R			
U I T	•	0	A	s	(E. de anne a Eshrenheit)				T				s	12. Management		loyee Health yees and conditional	employees;	-
			/							~				knowledge, resp		1 0	* •	
					2. Proper Cold Holding temperature(41°F/45°F) See				3				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth					
					3. Proper Hot Holding t					Need employee health form at hand sinks Preventing Contamination by Hands						-		
			/		4. Proper cooking time	and temperature				~			1			rly washed/ Gloves u		T
					5. Proper reheating proc Hours)	Proper reheating procedure for hot holding (165°F in 2				15. No bare hand contact with ready to a							+	
	-				6. Time as a Public Hea	alth Control: procedure	s & records							alternate method properly followed (APPROVED YN_ Gloves				
									T		1	Highly Susceptible Populations 16. Pasteurized foods used; prohibited food not offered						
					Apj	proved Source				~			I	Pasteurized eggs				
					7. Food and ice obtained good condition, safe, an										C	hemicals		
					destruction Kroger													
L					8. Food Received at pro Checking	oper temperature				~			ć	17. Food additive & Vegetables N/A	es; approved	and properly stored;	Washing Fruits	
					Protection	n from Contamination	l			~					nces properly	videntified, stored an	d used	+
		T			9. Food Separated & pro preparation, storage, dis	· 1	ing food							Stored IOW	Wate	er/ Plumbing		
$\left \right ^{\bullet}$		_			10. Food contact surface		leaned and	+					-	19. Water from a		rce; Plumbing install	ed; proper	_
Ľ					Sanitized at 200					~				backflow device City appro	oved	-		
	11. Proper disposition of returned, previously served or reconditioned Discard						~				20. Approved Se disposal	wage/Waster	water Disposal System	m, proper				
							oints) vi	nts) violations Require Corrective Action within 10 days										
0 1 U 1 T	I N	N O	N A	C O S	Demonstration	n of Knowledge/ Perso	onnel	R	O U T	I I N (N O	Α	C O S	Food	Temperatu	re Control/ Identific	ation	R
·	/			~	21. Person in charge pre and perform duties/ Cer					~			2	27. Proper coolir Maintain Produc		ed; Equipment Ade	quate to	
4 22. Fo All wit						Handler/ no unauthorized persons/ personnel							2	28. Proper Date	Marking and			+
					Safe Water, Reco			•			2	Good date la 29. Thermomete Thermal test stri	rs provided, a	accurate, and calibrat	ed; Chemical/	+		
					23. Hot and Cold Water							Digital the	<u>mo, stri</u>					
-					115, good press 24. Required records av	sure									<u> </u>	, Prerequisite for O mit/Inspection Curr	-	
Ľ				destruction); Packaged Food labeled Commercial labels										Posted an		-	- F F	
			_		Conformance v 25. Compliance with Va	with Approved Proce ariance, Specialized Pr							3			ipment, and Vendin cilities: Accessible a		-
					HACCP plan; Variance processing methods; ma	e obtained for specializ anufacturer instruction	ed			~			5	supplied, used Equipped	-		-	
					Temps recorded Cons	d 2x daily sumer Advisory							3	32. Food and No	n-food Conta	act surfaces cleanable	e, properly	+
			-		26. Posting of Consume	er Advisories: raw or u	nder cooked							designed, constru		nstalled, maintained,	used/	_
					foods (Disclosure/Remi Display case					~			5		urb cleaning	facility provided		
0	r	N	N	C	Core Items (1 Poin	nt) Violations Requi	re Corrective	Action	Not a							hever Comes First		R
		0	A	0 S		of Food Contamination			U T	N C		Α	o s			Identification		
┝					34. No Evidence of Inse animals	*				~			4	41.Original conta	uner labeling	g (Buik Food)		
┝					35. Personal Cleanlines 36. Wiping Cloths; prop		oracco use	\square						42. Non-Food Co		es clean		
┝┝		4			37. Environmental cont	es 200ppm		\parallel	$\left - \right $							lighting; designated a	areas used	-
		+	-					$\left \right $	$\left - \right $					Ŷ		erly disposed; faciliti		+
	<u> </u>				38. Approved thawing r Refrigerator				\mid					6		d, maintained, and cl		+
		Τ			39. Utensils, equipment										ies; properly	constructed, supplied	l, and clean	+
					dried, & handled/ In us				Ц	~				Stocked	-			
					40. Single-service & sin and used	ngle-use articles; prope	eriy stored			v	/			47. Other Violati N/a	ons			
டட									1 1									

Retail Food Establishment Inspection Report <u>City</u> of Rockwall

Received by: (signature) Theo Madeesuksathit	Print: Theo Madeesuksathit	Title: Person In Charge/ Owner Asst GM
Inspected by: (signature) Richard Hill	Print: Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: Kroger 574 Starbucks	Physical A 1950	^{ddress:} N Goliad St	City/State: Rockwa	ll, Tx	License/Permit # Page FS-9360					
		TEMPERATURE OBSERVA		T						
Item/Location	Temp	Item/Location	Temp	Item/Locat	tion	Temp				
Expresso Cooler amb		Self serve bev	32							
Coconut milk	38									
HWC	38									
Half & Half	39									
Whole Milk	38									
Whip	39									
Sandwich Cooler amb	35									
	OB	SERVATIONS AND CORRECT	TIVE ACTION	NS		<u> </u>				
ItemAN INSPECTION OF YOUR ESNumberNOTED BELOW: all temperature		NT HAS BEEN MADE. YOUR ATTEN F	NTION IS DIRE	CTED TO TH	IE CONDITIONS OBSI	ERVED AND				
Hand sink equipped g										
3 comp sink set up, 11										
Ice machine looks gre	· · · · · · · · · · · · · · · · · · ·	•								
Now observed using r		•								
		beal only and items are dis								
	All food arrives frozen, thawed in refrigerator, cooked to order, no hot holding									
	Utensils and cutting board w/r/s once every 4 hours or as needed									
· · ·	Using sani wipes to clean Espresso wand between orders and for clean all food contact surfaces									
Permit posted and upo	d and updated									
Oven is spotless, look	is spotless, looks amazing ap confirmed at ice machine									
Air gap confirmed at id	ed at ice machine gloves to transfer hot foods to sleeved packaging									
	Using tongs or gloves to transfer hot foods to sleeved packaging									
Self service items are	all Rte ite	ems with manufacturer lab	els on bac	k						
Using digital thermo, t	Using digital thermo, test strips current									
13 Need employee health	n form po	sted at hand sinks								
(signature) See abov	/e	See ab	ove		Title: Person In Charg	ge/ Owner				
Inspected by: (signature)	ST	(Print: Richard	d Hill		Samples: Y N	# collected				
Form EH-06 (Revised 09-2015)										