## **Retail Food Establishment Inspection Report**

First aid kit
Allergy policy
Vomit clean up
Employee health

Date: 9/24/2024				Time out: 3:55		FS-000			2774			Est. Type Risk Category Page 1 of 2	Page <u>1</u> of <u>2</u>		
		<b>se of</b> ishm			tion: 1-Routine	2-Follow U	Jp 3-Contact/Ow	nplaint ner Name:		4-Inv	estig	atior	ı	5-CO/Construction   6-Other   TOTAL/SCO    * Number of Repeat Violations:	RE
Smallcakes Rockwall   Physical Address:   Pest control :									Hood Grease t			rong	✓ Number of Violations COS: 3/07/1	3/97/A	
	55	Rid	ge	Ro	ckwall, TX	Tri	County Pest/9					Fa	tbo	y/100gal/9-12-2024 No 🗹	
	ark t	the ap	prop	riate	tatus: Out = not in co points in the OUT box for Prio	each numbered is	tem N		heckn uire I	nark i Imme	n app diate	ropria Cor	te bo	plicable COS = corrected on site R = repeat violation W-Watcox for IN, NO, NA, COS Mark an in appropriate box for R  ive Action not to exceed 3 days	2h
O U	I					R			O I N N C U N O A O			Employee Health	R		
Ť	U N O A O (F = degrees Echropheit)						T			Š	12. Management, food employees and conditional employees;				
	~									~				knowledge, responsibilities, and reporting	
	~				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)					°F)							Preventing Contamination by Hands  14. Hands cleaned and properly washed/ Gloves used properly		
		4. Proper cooking time and temperature			<b>;</b>										
	5. Proper reheating procedure for hot holding (				olding (165°F ir	n 2		~				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N )			
	<b>v</b>				6. Time as a Public Hea	alth Control; pro	cedures & reco	ords						Highly Susceptible Populations	
	_	Ш								T				16. Pasteurized foods used; prohibited food not offered	
					•	proved Source						Pasteurized eggs used when required eggs used for baking		Pasteurized eggs used when required eggs used for baking	
	~				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction  Dawn					Chemicals					
	~				8. Food Received at proper temperature									17. Food additives; approved and properly stored; Washing Fruits & Vegetables	
		check at receipt  Protection from Cont				mination			~				18. Toxic substances properly identified, stored and used	+	
	~				Frotection from Contamination     Frod Separated & protected, prevented during food preparation, storage, display, and tasting									Water/ Plumbing	
3				~	10. Food contact surfact Sanitized at			nd		~				19. Water from approved source; Plumbing installed; proper backflow device	
Ĕ				_	11. Proper disposition of			r		+			1	20. Approved Sewage/Wastewater Disposal System, proper	-
	~				reconditioned					~				disposal	
О	I	N	N	С		•		2 Points)	(	o I	N	N	С	rective Action within 10 days	R
U T	N	О	A	o s	21. Person in charge pr	esent_demonstra		dge		U N T	О	A	o s	Food Temperature Control/Identification	
	~				and perform duties/ Ce			4,50,		~				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
	~				22. Food Handler/ no u	nauthorized pers	sons/ personnel			~	•			28. Proper Date Marking and disposition	
					Safe Water, Reco	Safe Water, Recordkeeping and Food Package Labeling								29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips	
	V					r oou r uchuge			-				digital thermo		
					23. Hot and Cold Wate	Labeling r available; adeq	uate pressure, s							Permit Requirement, Prerequisite for Operation	
	~				23. Hot and Cold Wate 24. Required records as destruction); Packaged	Labeling r available; adeq vailable (shellsto	uate pressure, s			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				Permit Requirement, Prerequisite for Operation  30. Food Establishment Permit (Current/insp report sign posted)	
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## **Retail Food Establishment Inspection Report**

Received by: (signature) Heather Roland	Print: Heather Roland	Title: Person In Charge/ Owner OWNEr
Inspected by: Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

							T					
Establishment Name: Smallcakes Rockwall		Physical A 2455	<sup>ddress:</sup> Ridge	City/State: Rocky	vall, TX	FS-0002774	Page <u>2</u> of <u>2</u>					
				OBSERVATIONS	·							
Item/Loc	ation	Temp F	Item/Location	Temp 1	F Item/Loca	tion	Temp F					
reach	in freezer/ambient	-1										
reach	in cooler/sour cream	39										
ice o	cream/ambient	-3										
T4			SERVATIONS AND									
Item Number	AN INSPECTION OF YOUR ES' NOTED BELOW:	TABLISHME	INT HAS BEEN MADE. Y	OUR ATTENTION IS DI	RECTED TO T	HE CONDITIONS OBSER'	VED AND					
	Hand sink 106F equ	uipped										
	3 comp sink 117F											
10	Sani sink and sani b	oucket r	ot setup/COS t	o 100ppm chlo	rine at in	spection						
	Ice cream machine used ab	out twice a	month/cleaned per m	anufacturer's instruc	tions after us	ing Stera Sheen pack	ets					
	All cupcakes are sh	elf stabl	le/only using Sr	nall cakes reci	oes							
	Allergy policy poste											
	• • • • • • • • • • • • • • • • • • • •											
	Conservewell used for dipper well at 168F  Digital thermo and test strips											
	Sneeze guards for ice cream and cupcakes to protect from public											
	Ingredients upon re			<u> </u>								
			o of ready to ea	t and for boxin	g cupcak	es						
	Gloves for icing or any prep of ready to eat and for boxing cupcakes  Discussed storage of peanut butter to be separate											
		-		-								
Donatra-1	hv.		Duint.			Title: Person In Charge/	Owner					
Received (signature)	Heather Roland  Thy:  Chvisty Cov		Hea	ather Rol	and	Owner	Owner					
Inspected	l bv:		Print:									