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

Date: 9/30/24		Ļ	Time in: Time out: 9:12			License/Permit # FS-9486					CPFM	Food handlers	Page <u>1</u> of <u>2</u>				
Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain							_	nvest	igati	on	5-CO/Cons	truction	6-Other	TOTAL/SCORE			
					ne: 21A Rusk		Contact/O			tma	il co	m			of Repeat Viol of Violations (
	ysic				2 IA NUSK		t control :	Toulya	-	Ноо			Greas	se trap :/ waste oi		Follow-up: Yes	3/97/A
10					vall, Tx 75087		tokil 9/24/24		-	N/A				/24/24 5 gallons		No 🗌	<u> </u>
M					Status: Out = not in co points in the OUT box for	impliance IN = in c	em		= not o					pplicable COS ox for IN, NO, NA	= corrected on , COS Ma	site \mathbf{R} = repeat vio	olation W= Watch te box for R
~					Prio	rity Items (3 I	Points) viol	ations 1	Requir	_				tive Action not to	exceed 3 da	iys	
0		N	N	C	Time and Ten	perature for Fo	od Safety		R	О		N N	C				R
U T	N	О	A	o s		egrees Fahrenheit	t)			U T	N	O A	S	12 M		oloyee Health	11
		/			1. Proper cooling time a No left overs	and temperature					/			knowledge, resp		oyees and conditional and reporting	remployees;
					2. Proper Cold Holding	temperature(41°F	F/ 45°F)									and exclusion; No dis	scharge from
	•				See									eyes, nose, and Employee h		m posted	
	/				3. Proper Hot Holding t See	temperature(135°I	F)							Pı	reventing Co	ntamination by Har	nds
		/			4. Proper cooking time See	and temperature					/			14. Hands clear	ned and prope	erly washed/ Gloves u	used properly
	5. Proper reheating procedure f				5. Proper reheating prod	cedure for hot hole	or hot holding (165°F in 2							15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)			
		•			,	11.0 . 1	1 0			Ш		\perp		Gloves in u		HOWEU (AFFROVEL	J IN)
	'				6. Time as a Public Hea	alth Control; proce	edures & rec	cords								ceptible Populations	
					Ap	proved Source					/			16. Pasteurized Pasteurized egg		orohibited food not of required	ffered
					7. Food and ice obtaine	d from approved s	source; Food	; Food in									
	'				good condition, safe, and destruction 7-Eleve	n	parasite								C	Chemicals	
	/				8. Food Received at pro Checking	oper temperature					/			17. Food additiv & Vegetables N/a	ves; approved	and properly stored;	; Washing Fruits
					Protection	from Contamin	ation				/					y identified, stored ar	nd used
	/				9. Food Separated & pr preparation, storage, dis			I						Stored low a	-	er/ Plumbing	
					10. Food contact surfac			and								rce; Plumbing install	led; proper
	•				Sanitized at <u>200</u>						/			backflow device City appr	oved		
	~				11. Proper disposition of reconditioned Disc	_	ously served	or		3				20. Approved Solisposal See	ewage/Waste	water Disposal Syste	em, proper
	-																
					Pri	ority Foundat	tion Items	(2 Poir	_			_	_	rrective Action w	vithin 10 day	?S	
O U T	I N	N O	N A	C O S	Demonstration	n of Knowledge/ l	Personnel		nts) vi	O U T	I	equin N N O A	C	Food	l Temperatu	re Control/ Identific	
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Abaynesh	Print: Abaynesh	Title: Person In Charge/ Owner MOD
Inspected by: Richard Hill (signature)	Print: Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: 7-Eleven	Physical A		City/State: Rockwal	l. Tc	License/Permit # FS-9486	Page	2 of 2				
,	1000	TEMPERATURE OBSERVAT		.,							
Item/Location	Temp	Item/Location	Temp	Item/Loca	tion		Temp				
Drinks merchandiser	37-40	Roller left	154				8/6				
1 door beer coole	28	Hot dog	148,144	1 1224 3 3 1114 g 3			32				
2 door freezer	-5.1	Cheddar brat	144	Pizza UC freezer htt			2.1				
Open top freezer	-6.6	Chili/Chz unit	142/139				153				
Mini melts	-25.1	Pico	39	Wings/ mini tacos			137				
Roller Right	148	UC fridge back	44	165,162, 162							
Chicken&cheese	138	No tcs foods		Milk	coffee sta	tion	38				
Steak &cheese	137	Cold wall	35-37	Bever	age cooler no	on tcs	78				
	OB	SERVATIONS AND CORRECTIV	VE ACTION	IS							
Item Number AN INSPECTION OF YOUR EN NOTED BELOW: all temperatures		NT HAS BEEN MADE. YOUR ATTENT F	ION IS DIRE	CTED TO T	HE CONDITIONS OBS	ERVED A	ND				
Nitro cold brew unit in	noperable	during inspection									
Dumpster area looks	good, kee	p up the good work									
Allergen notice noted	on pastry	door									
Restrooms equipped	, temp gre	ater than 100 in each room	1								
UC hot hold and cabi	net hot ho	ld on right not in use									
Best practice to hang	mop head	d up to drip dry over mop si	nk, not si	tting on f	floor						
Hand sinks equipped	temp great	ater than 105 throughout th	e kitchen	<u> </u>							
3 comp sink 115, Qua	3 comp sink 115, Quats sani 200ppm, strips current										
20 Drain clogged under	erly										
		s, yellow digital thermo ons									
		then discarded, wings and	mini tacc	os are ne	ela for 2 nours tr	nan dis	carded				
Roller items are hot h			omonto o	nd bot b	ald at 125 or big	hor					
		nsite to manufacture require	ements a	na not n	eid at 135 of nig	ner					
Pizza slicer /spatula Tongs are cleaned ev		•									
-											
	Good practice to allow mop head to drip dry over mop sink										
	Using sani spray bottle 200ppm Permit current, posted by cigarette storage in front										
r ciriii carrent, poste	Permit current, posted by cigarette storage in front										
Received by:		Print:			Title: Person In Char	_					
See abo	ve	See abo	ove		Manage	r					
Inspected by: (signature)	SI	Richard	l Hill		Complete V N	# - 11	a.d				
Form EH-06 (Revised 09-2015)	07	,			Samples: Y N	# collect	eu				