## Followup fee of \$50.00 after initial Followup

## Retail Food Establishment Inspection Report City of Rockwall

✓ First aid kit
Allergy policy/training
Allergy policy/training Vomit clean up Employee health
Employee health

Date: Time			Time out: License/F S 90									Page P		Page 1 of	2			
	09/12/12024 2:35 3:35 Fs 90  Purpose of Inspection: 1-Routine 2-Follow Up 3-Compla								tion				TOTAL/SCO					
Establishment Name: Contact/Owner												uon		* Number of Repeat Violations:		TOTAL/SCO	KE	
Tom Thumb 2964 Fuel center Tom thumb  Physical Address: Pest control:							ımb		Hood Grease		.0000	✓ Number of Violations COS: e trap://waste oil Follow-up: Yes		6/94/	Α			
North Goliad See grocery									Na Na No Pics				Pics Pics					
Compliance Status: Out = not in compliance IN = in compliance Mark the appropriate points in the OUT box for each numbered item  NO = not observed NA = not applicable COS = corrected on site Mark in appropriate box for IN, NO, NA, COS Mark an in appropriate box for R												ch						
Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																		
O U	mpi I N	N	1 Inne and Temperature for Food Safety						R	O	I N	N O	N C A O		Employee Health			R
T		_		(F = degrees Fahrenheit)  1. Proper cooling time and temperature						T		_		S	12. Management, food employe		employees;	
		~			1. 11 oper cooming time and temperature						<b>/</b>				knowledge, responsibilities, and		r systay	
	_				2. Proper Cold Holding temperature(41°F/45°F)						7				13. Proper use of restriction and eyes, nose, and mouth	d exclusion; No disc	charge from	
					See  3. Proper Hot Holding temperature(135°F)				_						Posted at hand sink in	kitchen		
		•													Preventing Conta	amination by Han		
		<b>✓</b>			4. Proper cooking time and temperature			in 2			<b>/</b>				15. No bare hand contact with r			
		~			5. Proper reheating procedure for hot holding (165°F in 2 Hours)							/			alternate method properly follow No direct food handling	wed (APPROVED		
		6. Time as a Public Health Control; procedures & records Stocking only				cords								otible Populations				
					,						$\neg$	T			16. Pasteurized foods used; prol	hibited food not off	fered	
						proved Source									Pasteurized eggs used when req	juired		
					7. Food and ice obtaine good condition, safe, ar			l in							Chr	emicals		
					destruction													
	/				8. Food Received at pro At receiving	oper temperature									<ul><li>17. Food additives; approved ar</li><li>&amp; Vegetables</li></ul>	nd properly stored;	Washing Fruits	
					,	r from Contomir	notion			3	-				18. Toxic substances properly in	dentified, stored an	d used	
		Protection from Contamination  9. Food Separated & protected, prevented during food				d		٥					Store low and off sink / no ra	id pesticides to be	used or stored	ı		
	preparation, storage, display, and tasting													Water/	Plumbing			
	/				10. Food contact surfact Sanitized at 200	ces and Returnable ppm/temperature	les ; Cleaned a	and			/			î	19. Water from approved source backflow device	e; Plumbing installe	ed; proper	
	_				11. Proper disposition of					-	_	+		1	City approved  20. Approved Sewage/Wastewa	ater Disposal System	m. proper	
		~			reconditioned		, <b>,</b>				<b>/</b>				disposal	··· ·· ·· ·· ·· · · · · · · · · · · ·	71 -1	
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0		NT.	NT.	С	111	iority Founda	tion Items								rective Action within 10 days			D
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## Retail Food Establishment Inspection Report

## City of Rockwall

Received by: Johnny Mendoza	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: Tom Thumb 2964		Physical Address: North Goliad		City/Sta Roc	ate: kwall	License/Permit # FS 9053	Page 2 of 2				
			TEMPERATURI	E OBSERVATIONS	S						
Item/Loc		Temp F	Item/Location	<u>Ter</u>	np F Item/	<u>Location</u>	<u>Temp</u>				
Using	reddy ice units	9.1									
	4 door unit	34									
	Freezer	12									
	1 100201	12									
			DOEDNIA THONG A NID	CORRECTIVE	OFFICE						
Item	AN INSPECTION OF YOUR ES		BSERVATIONS AND ENT HAS BEEN MADE.			O THE CONDITIONS OBSE	ERVED AND				
Number	NOTED BELOW: all temps F										
14/	Using reddy ice IPIA										
W	Watch ice build up in i	ice unit o	utside								
	Hot water in rr 125										
47	Restroom looks good		oomn								
47	Dirty rags to address  Need to clean under s										
42	Clean inside coolers v										
3				remove							
	No use of home pesticides Raid spray on site to remove  Watch storage of chemicals on side of sinks- sinks not in use while on site										
	Sink sanitizer 200 ppm										
	Nightly cleaning of soda station - new one										
47	Watch cardboard. On	shelves	under cans best t	o use somethin	ıg washab	le					
47	Need to secure co2 tank										
	Remodel is ongoing										
Received	bv:		Print:			Title: Person In Charg	e/ Owner				
(signature)		/e				o de la companya de l	,				
Inspecte	d by:	<del>-                                    </del>	Print:								
(signature)	Kelly Kírkpa	atríck	RS			Complete V	#11. · · 1				
	- 1					Samples: Y N	# collected				