Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

| 10 |)/2 | 9/2 | 202 | 24 | | Time out: 12:30 | | License/P FS-7 | | | | | | | Est. Type Risk Category Page 1 of | 2 |
|------------------|---|---------------------|-------------|-------------|--|--|--|--|---------------------------|--------|---|---------------|---|--------------|---|------------|
| | | | | | tion: 1-Routine | 2-Follow U | | 3-Compla | | 4- | -Inve | stig | ation | 1 | 5-CO/Construction 6-Other TOTAL/SCO * Number of Repeat Violations: | ORE |
| Si | ubv | ishm va y | ment / # | 37 | 568 (Wal-Mart) | | Conta | ct/Owner I | Name: | | | | | | Number of Repeat Violations: Number of Violations COS: English Type Sollow-up: Ves 8/92/ | / / |
| Pł 78 | ysic 2 E | al A | ddre 0 F | ess: Roc | kwall, TX | | st contro | ol : 0-11-202 | 24 | Но | od | | G ₁ | rease S/v | e trap : Follow-up: Yes O/92/ with WalMart No 🗸 | _ |
| | | Com | plia | nce S | Status: Out = not in com | npliance IN = in | complian | ce No | $\mathbf{O} = \text{not}$ | | | | A = n | ot ap | pplicable COS = corrected on site R = repeat violation W-Wa | itch |
| M | ark t | he ap | prop | riate | points in the OUT box for e | each numbered it | tem | Mark ' | | | | | _ | | ox for IN, NO, NA, COS Mark an in appropriate box for R ive Action not to exceed 3 days | |
| Co | mpli I | iance N | Sta N | C | Time and Temp | | | | R | _ | ompl | iance N | e Stat | | | R |
| U T | N | 0 | A | o s | (F = de) | grees Fahrenhei | | | | U T | | O | A | o S | Employee Health | |
| | ~ | | | | Proper cooling time ar | nd temperature | | | | | 1 | | | | 12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting | |
| | | | | | 2. Proper Cold Holding t | temperature(41° | °F/ 45°F) | 1 | | | | | | | 13. Proper use of restriction and exclusion; No discharge from | + |
| | ~ | | | | | | | | | | 1 | | | | eyes, nose, and mouth | |
| | ~ | | | | 3. Proper Hot Holding te | emperature(135° | °F) | | | | | | | | Preventing Contamination by Hands | |
| | ~ | | | | 4. Proper cooking time a | and temperature | : | | | | 1 | | | | 14. Hands cleaned and properly washed/ Gloves used properly | |
| | 7 | | | | Proper reheating proce Hours) | edure for hot ho | olding (16 | 55°F in 2 | | | 1 | | | | 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N) | |
| | | | | | 6. Time as a Public Heal | th Control; prod | cedures a | & records | | | | | | | W.H.G., GH.B. Le | |
| | ~ | | | | | | | | | | | | | | Highly Susceptible Populations 16. Pasteurized foods used; prohibited food not offered | |
| | | | | | Арр | oroved Source | | | | | ~ | | | | Pasteurized eggs used when required | |
| | | | | | 7. Food and ice obtained good condition, safe, and | | | | | | | | | | | |
| | ~ | | | | destruction | | , _F | | | | | | | | Chemicals | |
| | ~ | | | | 8. Food Received at prop | per temperature | : | | | | 1 | | | | 17. Food additives; approved and properly stored; Washing Fruits & Vegetables | |
| | | | | | check at recei | pt | | | | L | _ | | | | 18. Toxic substances properly identified, stored and used | |
| | | | | | Protection 1 9. Food Separated & pro | from Contamin | | food | | 3 | | | | ~ | 16. Toxic substances properly identified, stored and used | |
| | ~ | | | | preparation, storage, disp | | | ; 100 u | | | | | | | Water/ Plumbing | |
| | ~ | | | | 10. Food contact surface Sanitized at 200 p | es and Returnabl | les ; Clea | ned and | | | \ <u>\</u> | | | ı | 19. Water from approved source; Plumbing installed; proper backflow device | |
| | • | | | | 11. Proper disposition of | | | mind on | | | _ | | | | 20. Approved Sewage/Wastewater Disposal System, proper | |
| | ~ | | | | reconditioned | rieturned, previ | lously sel | ved of | | | ~ | | | | disposal | |
| | | | | | | | | | | | | | | | | |
| | | | | | Prio | ority Founda | tion Ite | ems (2 Po | ints) ı | | | | | | rective Action within 10 days | |
| O U | I N | N O | N A | COS | Prio Demonstration | | | | ints) i | O U | I | Req N O | n N A | C O | rective Action within 10 days Food Temperature Control/ Identification | R |
| Т | I N | | | | Demonstration 21. Person in charge pre- | of Knowledge/ | Personn | nel mowledge, | | 0 | I N | N | N | С | Food Temperature Control/ Identification 27. Proper cooling method used; Equipment Adequate to | R |
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| 2 0 U T | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | O | A N | O S | 21. Person in charge preand perform duties/ Cert 22. Food Handler/ no un Safe Water, Record 23. Hot and Cold Water 24. Required records avadestruction); Packaged F Conformance with Variance of processing methods; man Consumption of Consumer foods (Disclosure/Remin of Core Items (1 Point) Prevention of Consumer foods (Disclosure/Remin of Core Items (1 Point) Prevention of Core Items (1 Point) | sent, demonstratified Food Marketified Food Marketified Food Marketified Food Marketified Food Marketified Food Industrial authorized personal authorized personal authorized personal authorized personal authorized Industrial authorized Industrial Indust | depth and the second se | nowledge, sted connel ckage sure, safe parasite cess, and cer cooked gen Label corrective cooked, stored, stored, | R Action | O U T | I N V V V V V V V V V V V V V V V V V V | N O | N A N A N A N A N A N A N A N A N A N A | C O S | 27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature 28. Proper Date Marking and disposition 29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Probe Permit Requirement, Prerequisite for Operation 30. Food Establishment Permit (Current/insp report sign posted 12/31/2024 Utensils, Equipment, and Vending 31. Adequate handwashing facilities: Accessible and properly supplied, used 32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided 29. Thermometers provided in the strip in the | dd |

Retail Food Establishment Inspection Report

| Received by: (signature) Stephanie Rossi | Print: Stephanie Rossi | Title: Person In Charge/ Owner Manager |
|--|---------------------------|--|
| Inspected by: Christy Cortez, RS (signature) | Print: Christy Cortez, RS | Business Email: |

Form EH-06 (Revised 09-2015)

| | ment Name: ay #37568 (Wal-Mart) | Physical A | | City/State: Rockwa | II TX | License/Permit # FS-7849 | Page <u>2</u> of <u>2</u> | | | | | |
|-----------------------|---|------------|--------------------------|-----------------------|-----------|--------------------------|---------------------------|--|--|--|--|--|
| | ay worded (real marry | 702 L | TEMPERATURE OBSERVAT | | 11, 170 | 107010 | | | | | | |
| Item/Loc | ation | Temp F | Item/Location | Temp F | Item/Loca | tion | Temp F | | | | | |
| under c | counter cooler/cut tomatoes | 40 | teriyaki chicken | 40 | | | | | | | | |
| front v | reggie cold table/lettuce | 41 | steam wells/meatballs | 149 | | | | | | | | |
| CL | ıt tomatoes | 41 | WIC/turkey | 41 | | | | | | | | |
| meat | t cold table/turkey | 40 | ham | 41 | | | | | | | | |
| | ham | 39 | tomatoes | 41 | | | | | | | | |
| | cheese | 41 | WIC | 10 | | | | | | | | |
| | roast beef chicken | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | OB | SERVATIONS AND CORRECTIV | E ACTION | S | | | | | | | |
| Item Number | AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: | | | | | | | | | | | |
| | Front line hand sink 140F equipped | | | | | | | | | | | |
| | Gloves used for all prep and ready to eat | | | | | | | | | | | |
| | Sani bucket at 200ppm quats | | | | | | | | | | | |
| 18 | | | and separate/ not on cut | ting boa | rds nex | t to soup wells | 3 | | | | | |
| 42 | Some cleaning in/ar | | | | | | | | | | | |
| 21 | To have CFM on duty during prep and service | | | | | | | | | | | |
| | Using a bleach product on slicer only to clean then hot water then quat sanitizer | | | | | | | | | | | |
| W | These steps above are followed pee manufacter's and Subway standards Avoid mixing/he sure to follow instructions carefully to avoid chemical cross contamination | | | | | | | | | | | |
| VV | Avoid mixing/be sure to follow instructions carefully to avoid chemical cross contamination Back hand sink 100+F equipped | | | | | | | | | | | |
| | 3 comp sink 115F | | | | | | | | | | | |
| | Sani dispenser at 3 comp sink at 200-400ppm quats | | | | | | | | | | | |
| | Test strips on site | | | | | | | | | | | |
| | Probe thermo | | | | | | | | | | | |
| | Temp logs kept/current | | | | | | | | | | | |
| 34 | | | | | | | | | | | | |
| 45 | | | | | | | | | | | | |
| 45 | To clean floors/mino | | | | | | | | | | | |
| | Soda/tea nozzles WRS daily | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
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| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Received | by: | | Print: | | Ī | Title: Person In Charge | e/ Owner | | | | | |
| (signature) | · · | | | e Ros | ssi | Manage | | | | | | |
| Inspected (signature) | | to= 0 | Print: Christy Co | ortoz | | | | | | | | |
| Form FIL 00 | 6 (Revised 09-2015) | vez, 1 | RS Christy Co | л ι С ∠, | 110 | Samples: Y N | # collected | | | | | |