	Retail Food Establishment Inspection Report																
Vomit clean up Employee health																	
Date: Time in: Time out: License/Per 11/13/2024 2:50 3:35 FOOI									' `				Est. Type Risk Category Page <u>1</u> of <u>2</u>				
Purpose of Inspection: 1 - Routine 2 - Follow Up 3-Complai											atio	n	5-CO/Construction 6-Other TOTAL/SCORE				
Establishment Name: Contact/Owner Name: Contact/Owner Name:													* Number of Repeat Violations:				
Physical Address: Pest control :								Hoo	od				e trap : Follow-up: Yes 5/95/A				
2779 Ridge Rd Rockwall, TX Ecolab/11-5-2024 Compliance Status: Out = not in compliance IN = in compliance							n/a refer to city No \checkmark = not observed NA = not applicable COS = corrected on site R = repeat					· · ·					
Mark the appropriate points in the OUT box for each numbered item Mark '√' a checkmark in appropriate box for IN, NO, NA, COS Mark an Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days										Dox for IN, NO, NA, COS Mark an X in appropriate box for R							
Co	Compliance Status							-		npliance Status I N N C							
U T	N	0	$ \begin{array}{c c} A & O \\ S \end{array} \end{array} $ (F = degrees Fahrenheit)					U T	N	0	A	O S	Employee Health				
	~	1. Proper cooling time and temperature							~				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 eves, nose, and mouth					
	•	3. Proper Hot Holding temperature(135°F)															
		4. Proper cooking time and temperature					Preventing Contamination by Hands						Preventing Contamination by Hands 14. Hands cleaned and properly washed/ Gloves used properly				
		 4. Proper cooking time and temperature 5. Proper reheating procedure for hot holding (165°F in 2 							~				15. No bare hand contact with ready to eat foods or approved				
		~			Hours)				~				alternate method properly followed (APPROVED YN)				
	~				6. Time as a Public Health Control; procedures & records								Highly Susceptible Populations				
					Approved Source				~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required				
	good condit				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction		no raw						Chemicals				
					8. Food Received at proper temperature				1				17. Food additives; approved and properly stored; Washing Fruits				
	~				check at receipt				~				& Vegetables				
					Protection from Contamination		18. Toxic substances properly identified, stored a					18. Toxic substances properly identified, stored and used					
	<	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting											Water/ Plumbing				
	~				10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature				~				19. Water from approved source; Plumbing installed; proper backflow device				
	~	11. Proper disposition of returned, previously served or reconditioned discarded							~	•			20. Approved Sewage/Wastewater Disposal System, proper disposal				
0	Priority Foundation Items (2 Po					oints R) vio	olati O	ions I	Req N	uire N	Cor	rective Action within 10 days				
U T	N	N O	N A	C O S	Demonstration of Knowledge/Personnel			U T	N	0	A	o s	Food Temperature Control/ Identification				
	~				21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager/ Posted 5				~				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature				
	22. Food Handler/ no unauthorized persons/ pers			22. Food Handler/ no unauthorized persons/ personnel				~				28. Proper Date Marking and disposition					
					Safe Water, Recordkeeping and Food Package Labeling				~				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips digital				
~			23. Hot and Cold Water available; adequate pressure, safe								Permit Requirement, Prerequisite for Operation						
	~	24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled					~				30. Food Establishment Permit (Current/insp report sign posted)						
		Conformance with Approved Procedures									12/31/2024 Utensils, Equipment, and Vending						
	~		25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions					~				31. Adequate handwashing facilities: Accessible and properly supplied, used					
			Consumer Advisory				2					32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used					
	~	26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffet Plate)/ Allergen Label							~				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided				
0	Ι	Core Items (1 Point) Violations Require Corrective A				e Acti R	ion i	0	Ι	I N		С	F				
U T	N	0	A	0 S	Prevention of Food Contamination 34. No Evidence of Insect contamination, rodent/other			U T	N	0	A	0 S	41.Original container labeling (Bulk Food)				
┡	•				 34. No Evidence of Insect containination, rodent/other animals 35. Personal Cleanliness/eating, drinking or tobacco use 				~								
4	~				36. Wiping Cloths; properly used and stored			4					Physical Facilities 42. Non-Food Contact surfaces clean				
 					37. Environmental contamination	-		1					43. Adequate ventilation and lighting; designated areas used				
╞	~ ~	_		38. Approved thawing method					~				44. Garbage and Refuse properly disposed; facilities maintained				
								1	~				45. Physical facilities installed, maintained, and clean				
			Proper Use of Utensils 39. Utensils, equipment, & linens; properly used, stored,			1		-			46. Toilet Facilities; properly constructed, supplied, and clean						
	~				dried, & handled/ In use utensils; properly used				~								
	~				40. Single-service & single-use articles; properly stored and used				~				47. Other Violations				

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Received by: ^(signature) Tina Rodriguez	Print: Tina Rodriguez	Title: Person In Charge/ Owner Manager
Inspected by: (signature) Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	^{ment Name:} cks Coffee #6259 (Ridge)	Physical A 2779	^{ddress:} Ridge Rd	City/State: Rockwa	all, TX	License/Permit # Page <u>2</u> of FOOD5073		<u>2</u> of <u>2</u>				
Itom/Loc	otion	Tomp F	TEMPERATURE OBSERV		Itom/I coot	Hon		Tomp F				
Item/Loc under	counter ambient	Temp F	Item/Location	Temp F	Item/Locat	non		Temp F				
under	counter cooler ambient	38										
unde	r counter cooler/milk	41										
unde	counter cooler/milk	41										
unde	r counter cooler/milk	41										
front s	elf serve cooler ambient	33										
2 do	or cooler ambient	33										
2 0	loor freezer	-2										
Item			SERVATIONS AND CORRECT									
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:											
	Front Hand sink 100+F equipped											
	Back hand sink 100+F equipped 3 comp sink 110+F											
	Dishwasher sanitizing per Temp strips											
	Digital thermo	01										
36	Store wiping cloths	in sani b	ouckets/not around ha	nd sink								
	Sani buckets at 20	· · ·										
	-		anitized after every us									
32	•		cash register/on prep a		e sealed							
42			oment/Expresso mach	ines								
	Packaged items pro All TCS foods comr											
45	To clean floors in ba		•									
42			• •									
42												
Received (signature)			Tina Ro	odriau	lez	Title: Person In Charge/	Owner					
Inspected (signature)		to- 6	RS Christy C									
Form FH-0	5 (Revised 09-2015)	iez, r			NO	Samples: Y N #	collecte	ed				