

Retail Food Establishment Inspection Report

- First aid kit
- Allergy policy
- Vomit clean up
- Employee health

| | | | | | | |
|----------------------------|-------------------------|---------------------------|---|-----------|---------------|---------------------------|
| Date: 11/14/2024 | Time in: 9:45 | Time out: 11:00 | License/Permit # need to post current | Est. Type | Risk Category | Page <u>1</u> of <u>2</u> |
|----------------------------|-------------------------|---------------------------|---|-----------|---------------|---------------------------|

| | | | | | | | |
|--|--|--|--|--------------------|---|---|--------------------|
| Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine <input type="checkbox"/> 2-Follow Up <input type="checkbox"/> 3-Complaint <input type="checkbox"/> 4-Investigation <input type="checkbox"/> 5-CO/Construction <input type="checkbox"/> 6-Other | | | | | | | TOTAL/SCORE |
| Establishment Name: Bin 303 | | | Contact/Owner Name: Matt Nugent | | * Number of Repeat Violations: _____ ✓ Number of Violations COS: _____ | | 8/92/A |
| Physical Address: 105 Olive Rockwall, TX | | | Pest control : EnviroTech/10-28-2024/2x month | Hood J's/9-2024 | Grease trap : LES/1000gal/11-13-2024 | Follow-up: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |

Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- Watch
 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 X in appropriate box for R

| Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days | | | | | | | | | | | |
|---|----|----|----|-----|---|--|----|----|----|-----|---|
| Compliance Status | | | | | | Compliance Status | | | | | |
| OUT | IN | NO | NA | COS | R | OUT | IN | NO | NA | COS | R |
| Time and Temperature for Food Safety (F = degrees Fahrenheit) | | | | | | Employee Health | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | Preventing Contamination by Hands | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | Highly Susceptible Populations | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | Chemicals | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | Water/ Plumbing | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |

| Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days | | | | | | | | | | | |
|--|----|----|----|-----|---|---|----|----|----|-----|---|
| Compliance Status | | | | | | Compliance Status | | | | | |
| OUT | IN | NO | NA | COS | R | OUT | IN | NO | NA | COS | R |
| Demonstration of Knowledge/ Personnel | | | | | | Food Temperature Control/ Identification | | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |
| Safe Water, Recordkeeping and Food Package Labeling | | | | | | Permit Requirement, Prerequisite for Operation | | | | | |
| | ✓ | | | | | | W | | | | |
| | ✓ | | | | | Utensils, Equipment, and Vending | | | | | |
| | ✓ | | | | | | 2 | | | | |
| Consumer Advisory | | | | | | | 2 | | | | |
| | ✓ | | | | | | ✓ | | | | |

| Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First | | | | | | | | | | | |
|---|----|----|----|-----|---|----------------------------|----|----|----|-----|---|
| Compliance Status | | | | | | Compliance Status | | | | | |
| OUT | IN | NO | NA | COS | R | OUT | IN | NO | NA | COS | R |
| Prevention of Food Contamination | | | | | | Food Identification | | | | | |
| | 1 | | | | | | ✓ | | | | |
| | ✓ | | | | | Physical Facilities | | | | | |
| | ✓ | | | | | | 1 | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | ✓ | | | | |
| Proper Use of Utensils | | | | | | | 1 | | | | |
| | ✓ | | | | | | ✓ | | | | |
| | ✓ | | | | | | 1 | | | | |

