## **Retail Food Establishment Inspection Report**

First aid kit
Allergy policy
Vomit clean up
Employee health

		DD6350						Est. Type Risk Category Page 1	of <u>2</u>							
Es	tabli	se of ishm <b>er'</b> s	ent i		etion: 1-Routine ne:	2-Follow U		3-Compla ct/Owner I			-Inve	estig	atior	1	* Number of Repeat Violations:  Number of Violations COS:	
		al A Rid			Rockwall, TX	Ma	est contro	2-9-202	24		ood cia's/10-1	2-2024	Gı LE	rease S/1	e trap : Follow-up: Yes 1500gal/11-19-2024 No 1	./A
Ma					Status: Out = not in con points in the OUT box for e	mpliance IN = in each numbered it	compliand tem	ce N Mark	<b>O</b> = not '✓' a cl						oplicable $COS = corrected on site R = repeat violation W-V ox for IN, NO, NA, COS Mark an in appropriate box for R$	7atch
Co	mpli	iance	Sta	tus	Prior	rity Items (3	Points)	violations	Requ	_	<i>mmed</i> Compl				ive Action not to exceed 3 days	
O U T	I N	N O	N A	C O S	Time and Tem	perature for Fo		ty	R	U T	J N	N O	N A	C O S	Employee Health	R
1	~			ы	1. Proper cooling time as	-				1	~			ю	12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
	· •				2. Proper Cold Holding t	temperature(41°	°F/ 45°F)				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
					3. Proper Hot Holding te	emperature(135°	°F)		+		<u> </u>					
	~	• /			4. Proper cooking time a	and temperature	<u>,                                     </u>		+		~				Preventing Contamination by Hands  14. Hands cleaned and properly washed/ Gloves used properly	
					Proper reheating process	edure for hot ho	olding (16	55°F in 2	+		1				IS. No bare hand contact with ready to eat foods or approved	_
		~			Hours)										alternate method properly followed (APPROVED Y. N)	
	6. Time as a Public Health			h Control; procedures & records			Ш						Highly Susceptible Populations			
					Арр	proved Source					~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
	~	7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction GFS											Chemicals			
	/				8. Food Received at prop		;				_				17. Food additives; approved and properly stored; Washing Frui & Vegetables	is
					check at recei	pt from Contami	nation				\ <u>\</u>				18. Toxic substances properly identified, stored and used	
					9. Food Separated & pro			food								
	~				preparation, storage, disp										Water/ Plumbing	
3					10. Food contact surface Sanitized at p			ned and		3					19. Water from approved source; Plumbing installed; proper backflow device	
	~				11. Proper disposition of reconditioned disca						~				20. Approved Sewage/Wastewater Disposal System, proper disposal	
									inte)	wiola	tions	Rea	uire	Cor	rrective Action within 10 days	_
	-		2.7	~	l .	,	ition itt	1113 (2 1 0							,	
O U T	I N	N O	N A	C O S	Demonstration	of Knowledge/	/ Personn	iel	R	O U T	J I	N O	N A	C O S	Food Temperature Control/ Identification	R
				0	Demonstration  21. Person in charge pre and perform duties/ Cert	of Knowledge/	/ Personn	nel nowledge,		U	J I	N	N	C 0		R
	N			0	Demonstration 21. Person in charge pre	of Knowledge/ esent, demonstra tified Food Mar	/ Personn ation of ki nager/ Pos	nowledge, sted		U	J N	N	N	C 0	Food Temperature Control/ Identification  27. Proper cooling method used; Equipment Adequate to	R
	N V			0	Demonstration  21. Person in charge pre and perform duties/ Cert 12  22 Food Handler/ no un 50  Safe Water, Recor	of Knowledge/ esent, demonstra tified Food Mar nauthorized person	/ Personn ation of ki nager/ Pos sons/ person	nowledge, sted		U	I N	N	N	C 0	Food Temperature Control/ Identification  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	
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Received by: (signature) Becky Lapp	Print: Becky Lapp	Title: Person In Charge/ Owner OWNEr
Inspected by: Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

Establish	ment Name: <b>er's</b>	Physical A	ddress: Ridge Rd	City/State: Rockwa	all, TX	License/Permit # Pa	ige <u>2</u> of <u>2</u>				
		1	TEMPERATURE OBSERVA	TIONS							
Item/Loc		Temp F	Item/Location	Temp F	Item/Loca	· ·	Temp F				
	vells/fish	41	cold top/Hamburgers			ooler drawers ambient					
rea	ach in freezer	-1	corned beef	38	custard ambient		-10				
stea	steam wells/butter gravy		steam wells/mushrooms	165							
			WIC/pot roast	38							
be	eef pot roast	168	roast	41							
cold t	top/shredded chicken	41	WIF	-4							
Cl	cut tomatoes		Shake machine	41/41							
unde	under/cheese sauce		dessert cooler/cheesecake 38								
		OF	SERVATIONS AND CORRECT	VE ACTION	NS						
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND										
	Line hand sink 106-	+F eaui	pped								
45			some food debris, part	cularly u	ınder sh	nake area					
	Sani bucket setup to	•	•								
	Warewash hand sir		•								
			• • •								
45	3 comp sink 120F equipped  Need to clean mold behind 3 comp sink/to replace moldy caulking										
10			•	Tholay 0	aantii ig						
	Dishwasher sanitizing at 100ppm chlorine  Test strips on site/current										
42	To clean carts/some food debris										
19	Need air gap under										
10	Watch ice deflector panel/to clean/some slime buildup										
42	To clean in/around/on equipment and behind to go coffee station										
		•	nachines broken down			lly					
			ed before refiling with ne			•					
	Custard pints prope		•								
45	To clean grout by fr										
	,										
Received (signature)			Print: Recky I	ann		Title: Person In Charge/ Own	ner				
_	Decky Lapp		Becky I	<u>-app</u>		Owner					
Inspected (signature)		ten 1	RS Christy C	ortez	RS						
	Civi Usey COT			J. 102,		Samples: Y N # coll-	ected				