	Followup Fee of															
\$50.00 after Retail Food Establishment Inspection Report Image: Constraint of the second																
• •	Solution Retail Food Establishment Inspection Report Image: First aid kit First Followup Allergy policy City of Pockwall Image: First aid kit															
Date: Time in: Time out: License/Per 12/19/24 11:00 11:26 To pc														$\begin{array}{c} CPFM \\ \textbf{f} \\ $	_	
Purpose of Inspection: 11.CO 11.CO 10 PC						ost permit				tion	-1	5-CO/Construction 6-Other TOTAL/SCORI	E			
E	Establishment Name: Contact/Owner I Agua de Vida Mel Morgan								Name: XNumbe					Number of Repeat Violations: Number of Violations COS:		
Pl	Physical Address: Pest control :								Hood Grease trap :/ waste oil					se trap :/ waste oil Follow-up: Yes O/100/A	4	
1201 N Goliad Rockwall, Tx Landlord - Terminex N/a N/a Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected of										$No \square No \square$						
М	Compliance Status:Out = not in complianceIN o = not observedNA = not applicableCOS = corrected on site $R =$ repeat violation $W =$ WatchMark the appropriate points in the OUT box for each numbered itemMark ' \checkmark ' a checkmark in appropriate box for IN, NO, NA, COSMark an in appropriate box for RPriority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days															
C	mpli	iance N	e Sta N	tus C		v ×		R	_	ompli		e Statu N			R	
U T	N	$\mathbf{V} = \mathbf{O} = \mathbf{A} = \mathbf{O} = \mathbf{A}$ $\mathbf{F} = \mathbf{C} = \mathbf{F}$			ĸ	U T	Ň	0	A	o s	Employee Health	N				
		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					
		2 Proper Hot Helding temperature(125%)					W					eyes, nose, and mouth Need state handsink poster	_			
		3. Proper Hot Holding temperature(135°F)								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					~				Hand sanitizer available 15. No bare hand contact with ready to eat foods or approved					
		Hours)						~				alternate method properly followed (APPROVED Y_N_) Gloves available				
			~		6. Time as a Public Hea	lth Control; procedures	& records					Highly Susceptible Populations				
	Approved Source									~		16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required N/a				
					7. Food and ice obtained good condition, safe, an			11				Chemicals				
	~				destruction City of F 8. Food Received at pro							~		17. Food additives; approved and properly stored; Washing Fruits & Vegetables		
_					N/a But the	for a contraction time						-		N/a 18. Toxic substances properly identified, stored and used		
					Protection from Contamination 9. Food Separated & protected, prevented during food									Clean chemicals stored low and separate		
	~				preparation, storage, display, and tasting									Water/ Plumbing		
	~				10. Food contact surface Sanitized at		eaned and			~				19. Water from approved source; Plumbing installed; proper backflow device City approved		
	 11. Proper disposition of returned, previously served or reconditioned Cleaned using ozone 						~				20. Approved Sewage/Wastewater Disposal System, proper disposal					
Priority Foundation Items (2 Poi					oints) v	violat	ions	Req	uire	Cor	prrective Action within 10 days					
O U T	I N	N N C				R	O U T	N	N O	N A	C O S	Food Temperature Control/ Identification	R			
	~			5	21. Person in charge pre and perform duties/ Cer							~	5	27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature N/a		
	~	1 22. Food Handler/ no unauthorized persons/ personnel 1		ersonnel					~		28. Proper Date Marking and disposition N/a					
	Safe Water, Recordkeeping and Food Package Labeling						~		-		29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips					
23. Hot and Cold Water available; adequate pressure, safe										_		Permit Requirement, Prerequisite for Operation	_			
	-	24. Required records available (shellstock tags; parasite									30. Food Establishment Permit/Inspection Current/ insp posted	_				
	~	destruction); Packaged Food labeled					V	1				To post permit	_			
					25. Compliance with Va		ocess, and		_					Utensils, Equipment, and Vending 31. Adequate handwashing facilities: Accessible and properly		
	~				HACCP plan; Variance processing methods; ma					~				supplied, used Using restroom sink		
	11				Cons	sumer Advisory				~				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used		
	~				26. Posting of Consume foods (Disclosure/Remi N/a					~				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided		
						nt) Violations Requir	e Corrective							ays or Next Inspection , Whichever Comes First		
O U T	I N	N O	N A	C O S	Prevention of	of Food Contaminatio	n	R	O U T	I N	N O	N A	C O S	Food Identification	R	
	~				34. No Evidence of Inse animals					~				41.Original container labeling (Bulk Food)		
	~				35. Personal Cleanliness		bacco use							Physical Facilities		
	~				36. Wiping Cloths; prop	•				~	\square			42. Non-Food Contact surfaces clean		
			~		37. Environmental conta N/a					~				43. Adequate ventilation and lighting; designated areas used		
			~		38. Approved thawing r N/a	nethod				~	\square			44. Garbage and Refuse properly disposed; facilities maintained45. Physical facilities installed, maintained, and clean		
					Prope 39. Utensils, equipment	er Use of Utensils	ad stored			~				45. Physical facilities installed, maintained, and clean 46. Toilet Facilities; properly constructed, supplied, and clean		
	~				dried, & handled/ In us	e utensils; properly use	d			~				Equipped		
F					40. Single-service & sin and used	ngle-use articles; proper	ly stored	\uparrow				~		47. Other Violations		
												-		N/a		

Retail Food Establishment Inspection Report

City of Rockwall

(signature) Mel Morgan	^{Print:} Mel Morgan	Title: Person In Charge/ Owner Owner
Inspected by: (signature) Richard Hill	Print: Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: De Vida	Physical Ac	idress:	City/State:		License/Permit # Page 2 of 2		<u>2</u> of <u>2</u>			
		1	TEMPERATURE OBSERVA	ATIONS			1				
Item/Loc	ation	Temp	Item/Location	Temp	Item/Loca	tion		Temp			
		OB	SERVATIONS AND CORRECT	TIVE ACTION	NS						
Item	AN INSI ECTION OF TOOR ESTABLISHMENT HAS BEEN MADE. TOOR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND										
Number	NOTED BELOW: all temperature										
	Glass and plastic bottles purchased from Brio, wholesale distribution Hand sanitizer available										
	70% Isopropyl alcohol	-	n sprav hottle								
			rs, auto recalibration on/o	ff switch							
	•		325 before filling contain		tered wa	ter					
	•		.				clean	towel			
	Customer may return lid which is sanitized by same above method, exterior bottle wiped with clean towel and 70% iso alcohol										
	New containers come	with lids,	if returning customer fails	to bring lie	d, new lic	ls are available fo	r puro	chase			
	City water is tested da	ily using	oH and TDS meter								
	All containers are BPA	free									
	Towels are single use	and wasl	ned as needed								
	Filters are changed ev	ery 6 mo	nths, confirmed filter chan	ged 6/202	4. Revie	wed onsite logs					
	Water tanks are disass	embled re	emoved, cleaned with pow	ver washer	, soap wa	ater and use a food	d grad	le sani			
	allowing tanks to air dry.										
	All plastic piping in filter room is replaced every 6 months during routine maintenance, confirmed 6/2024										
	Micro Ozone CD325 is a residential unit approved through building division										
	Discourage residential equipment usage, when unit needs replaced it will require a commercial unit to be installed										
	All equipment approved by Building Department										
	Restroom equipped, temp greater than 112										
D	•						0				
Received (signature)	See abov	'e	See ab	ove		Title: Person In Charge/	Owner				
Inspected (signature)	-	St	Richar	d Hill		Samples: Y N #	collecte	ed.			
Form EH-06	(Revised 09-2015)	<u> </u>				Sampios. 1 IN #	concett	~u			