Followup fee of \$50.00 after First Followup

Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

City of Rockwall

12		7/2			Time in:	Time out: 3:15		FS-0	004						CPFM 3	Food handlers	Page 1	
Pu	rpo	se o	f Ins	Spec	tion: 1-Routine	2-Follow U		3-Compla act/Owner N		4-I	Inves	stiga	ation	1	5-CO/Construction Number of Repeat Viole	6-Other	TOTAL/S	SCORE
36 Ph	0 l	Ba al A	r &	ss:	ounge	Pe		Flecter		Ноо	od		Gı	rease	Number of Repeat Violations C	COS: Follow-up: Yes	3/97	7/A
21	<u>01</u>	S	um	ım	<u>er Lee Dr Roc</u>	kwall, Ke		eepers 5/22		April		3			ys 5/8/24 1500g	No 🔽		
Ma	ırk t	Com	plia pprop	riate	points in the OUT box for		item	Mark '		ckma	rk in	appr	opria	ite bo	ox for IN, NO, NA, COS Ma	site R = repeat vio	lation W= e box for R	Watch
Co	mnli	ona	e Sta	trac	Prio	ority Items (3	Points) violations	Requir		<i>med</i> ompli				ive Action not to exceed 3 da	ys		
O U	I I N	N O	N A	C O		nperature for F		ety	R	OU	I N	N O	N A	C O	Emp	loyee Health		R
Т				S	1. Proper cooling time	legrees Fahrenhe and temperature				Т				S	12. Management, food emplo	yees and conditional	employees;	
			•		/a						~				knowledge, responsibilities, a			
	/				2. Proper Cold Holding See	g temperature(41	°F/ 45°F)			/				13. Proper use of restriction a eyes, nose, and mouth		charge from	
		_			3. Proper Hot Holding	temperature(135	5°F)		\vdash		l				Have state hand sink	torm ntamination by Han	ds	
		<u> </u>			4. Proper cooking time	and temperature	e				<u>, </u>				14. Hands cleaned and prope			7
					5. Proper reheating pro	cedure for hot h	olding (1	65°F in 2			•				15. No bare hand contact with			
					Hours)						•				alternate method properly followes	lowed (APPROVED	YN.	.)
	/				6. Time as a Public Hea	alth Control; pro	ocedures	& records							,	eptible Populations		
					Ap	proved Source					~				16. Pasteurized foods used; p. Pasteurized eggs used when r Shell eggs		ered	
					7. Food and ice obtaine good condition, safe, a											D		
	•				destruction Sysco/										C	hemicals		
	~				8. Food Received at pro Checking tem		е				~				17. Food additives; approved & Vegetables Water	and properly stored;	Washing Fru	iits
					Protection	n from Contami	ination				~				18. Toxic substances properly	identified, stored an	d used	
	~				9. Food Separated & preparation, storage, di			g food			· ·				Wate	er/ Plumbing		
	~				10. Food contact surfact Sanitized at _200_			aned and			~				19. Water from approved sou backflow device City approved	rce; Plumbing install	ed; proper	
	~				11. Proper disposition of reconditioned Disca		iously se	erved or			~				20. Approved Sewage/Waster disposal	water Disposal System	n, proper	
					Pri	iority Founda	ation It	ems (2 Po							rrective Action within 10 day	S		
O U T	I N	N O	N A	C O S	Demonstration	n of Knowledge	/ Person	nel	R	O U T	I N	N O	N A	C O S	Food Temperatur	re Control/ Identific	ation	R
1	/				21. Person in charge pr and perform duties/ Ce 3						~			· S	27. Proper cooling method us Maintain Product Temperatur		quate to	T
	/				22. Food Handler/ no u All before firs	nauthorized pers	sons/ pers	sonnel			~				28. Proper Date Marking and Great date labels	disposition		
					Safe Water, Reco		Food Pa	ckage							29. Thermometers provided, a	accurate, and calibrate	ed; Chemica	1/
					23. Hot and Cold Wate	Labeling				2					Digital thermo, no	o quat test s	<u>trips</u>	
	/				106, good pre	essure					1		1		Permit Requirement 30. Food Establishment Per	·		ata d
	•				destruction); Packaged Commercial	Food labeled abels	ock tags,	parasite			~				Current & posted		ent/ msp pos	itea
					Conformance v 25. Compliance with V	with Approved					1				Utensils, Equ 31. Adequate handwashing fa	ipment, and Vendin		
	~				HACCP plan; Variance processing methods; m	e obtained for sp	ecialized				~				supplied, used Equipped		۲۰۰۲	
					Con	sumer Advisor	у				~				32. Food and Non-food Conta designed, constructed, and us		, properly	
	~				26. Posting of Consum- foods (Disclosure/Rem On menu						~				33. Warewashing Facilities; i Service sink or curb cleaning Equipped confirm	facility provided		am.
						nt) Violations	Require	Corrective	Action	Not	to E.	хсеє	ed 90) Da	ys or Next Inspection, Whic		<u>1 100p</u>)
O U	I N	N O	N A	C O S	Prevention	of Food Contar	mination		R	O U T	I N	N O	N A	C O S	Food	Identification		R
1				5	34. No Evidence of Ins	ect contamination	on, rodent	t/other		Т	~			8	41.Original container labeling	g (Bulk Food)		
	✓				animals 35. Personal Cleanlines	ss/eating, drinkir	ng or toba	acco use			<u> </u>				Physi	ical Facilities		
	<u>,</u>				36. Wiping Cloths; pro	perly used and s	stored		+		~				42. Non-Food Contact surface			
 	<u>,</u>				Using spray bo 37. Environmental con				++	\vdash	<u>, </u>				43. Adequate ventilation and	lighting; designated a	reas used	+
<u> </u>	<u> </u>				38. Approved thawing Refrigerator	method			H	\vdash	•				44. Garbage and Refuse propo	erly disposed; facilitie	es maintaine	:d
	•						ila.			H	•				45. Physical facilities installe			-+
					39. Utensils, equipmen	t, & linens; prop		l, stored,		\vdash	~				46. Toilet Facilities; properly			$\overline{}$
	/				dried, & handled/ In us	se utensils; prop	erly used				~				Stocked and clea			
	/				and used		1 7011	· · · · =					~		N/A			

Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Marcus Moehler	Print: Marcus Moehler	Title: Person In Charge/ Owner Chef
Inspected by: Richard Hill	Print:Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: Steak House		Address: Summer Lee Dr	City/State: Rockwall	Tx	License/Permit # Page 2 of FS-0004228					
		1	TEMPERATURE OBSI								
Item/Loc	cation	Temp	Item/Location	Temp	Item/Lo	cation	Temp				
Beer c	cooler	38									
	Olasa alaillan	0.4									
	Glass chiller	24									
			DBSERVATIONS AND CORR	ECTIVE ACTION	S						
Item		ESTABLISHN	MENT HAS BEEN MADE. YOUR A			THE CONDITIONS OBSERV	ED AND				
Number	NOTED BELOW: all temperatures are taken in F										
	Restrooms please refer to Sear Steak House inspection report										
	Dishwasher confirmed 100ppm, chlorine strips current										
	Hand sink equipped, greater than 106 in bar										
34	Observed fruit flies when turned on hand sink and cycled dish washer										
	At glasses inverted and stored on drain nats										
	Using unsleeved straws, not stored on bar top to protect from consumers, reminder to only										
	middle area not where mouth goes on straw										
	Using spray bottle 200ppm and stemine tabs										
29	No quat test strips										
Received			Print:	_		Title: Person In Charge/	Owner				
(signature)	See abo	ve	See a	above							
Inspecte	$\overline{}$										
(signature	(F) (H)	SI	[Richa	ard Hill							
	, <u> </u>	07	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	<u> </u>		Samples: Y N #	collected				