## **Retail Food Establishment Inspection Report**

First aid kit
Allergy policy
Vomit clean up
Employee health

1,	Date: Time in: Time out: 1/21/2025 12:15 1:25			License/Permit # FS-0001761							Est. Type Risk Category Page 1 of _	2				
Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain Establishment Name: Contact/Owner Na						4-Investigation					* Number of Repeat Violations:	TOTAL/SCORE				
Trevino's  Physical Address: Pest control:								Hood Grease trap :			Gr	eace	e trap : Follow-up: Yes 🗸 12/88/	B		
10	1 N	l Go	olia	d R	lockwall, TX	ow	ner to email		GI	Globla/1	12-12-		ow	nei	r to email	
	ark t	he ap	prop	riate	Status: Out = not in corpoints in the OUT box for Prior	each numbered it	tem Ma		chec	ekmaı e <i>Im</i> i	rk in <b>med</b>	appro iate	opriat <i>Cort</i>	te bo	pplicable COS = corrected on site R = repeat violation W-Wate ox for IN, NO, NA, COS Mark an in appropriate box for R rive Action not to exceed 3 days	ch
O	I N	iance N O	Sta N A	C O		perature for Fo		R	•	O U	mpli I N	N O	N	us C O	Employee Health	R
Т				S	1. Proper cooling time a	egrees Fahrenhei and temperature	it)			Т				S	12. Management, food employees and conditional employees;	
	~				2 December Cold Holding	t(419	0E/ 4 <b>5</b> 0E)				-				knowledge, responsibilities, and reporting	
	~				2. Proper Cold Holding	temperature(41	r/ 43 r)				~				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
	~				3. Proper Hot Holding to	emperature(135°	°F)								Preventing Contamination by Hands	
	~				4. Proper cooking time a	and temperature					~				14. Hands cleaned and properly washed/ Gloves used properly <b>QIOVES USEO</b>	
3					<ol><li>Proper reheating proc Hours)</li></ol>	cedure for hot ho	olding (165°F in 1	2			~				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N )	
	~				6. Time as a Public Hea	alth Control; prod	cedures & record	ls	i						Highly Susceptible Populations	
					Anr	proved Source					~				16. Pasteurized foods used; prohibited food not offered     Pasteurized eggs used when required	
					7. Food and ice obtained		l source; Food in								eggs cooked	
	~				good condition, safe, and destruction BeneK	Ceith									Chemicals	
	~				8. Food Received at pro						~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables Water only	
						from Contami	nation		•		~				18. Toxic substances properly identified, stored and used	t
3					9. Food Separated & propreparation, storage, dis				•	ı	·				Water/ Plumbing	
	~				10. Food contact surface Sanitized at 200 p	es and Returnabl ppm/temperature	les ; Cleaned and e				~			1	19. Water from approved source; Plumbing installed; proper backflow device	
	~				11. Proper disposition of reconditioned disca		iously served or		•		~			İ	20. Approved Sewage/Wastewater Disposal System, proper disposal	
	<u> </u>									Щ						
					Prio	ority Founda	tion Items (2	Points	) vio	olati	ons .	Requ	uire	Cor	rrective Action within 10 days	
O U T	I N	N O	N A	C O S	Prio Demonstration	•		Points R	) via	olatio O U T	I N	Requ N O	N	Cor C O S	Food Temperature Control/ Identification	R
		N O		О		of Knowledge/	Personnel	R	) via	O U T	I	N	N	C O	·	R
	N	N O		О	Demonstration 21. Person in charge pre and perform duties/ Cer	of Knowledge/ esent, demonstra rtified Food Mar	Personnel ation of knowled nager/ Posted	R	) via	O U T	I N	N	N	C O	Food Temperature Control/ Identification  27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature  28. Proper Date Marking and disposition	R
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## **Retail Food Establishment Inspection Report**

Received by: (signature) Toshua Seabolt	Print: Joshua Seabolt	Title: Person In Charge/ Owner Manager
Inspected by: Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

Establishr Trevi	ment Name:	Physical A		City/State: Rockwa	ıll. TX	License/Permit # Page FS-0001761	e <u>2</u> of <u>2</u>				
11011		1011	TEMPERATURE OBSERVAT		, 173						
Item/Loc	ation	Temp F	Item/Location	Temp F	Item/Loca		Temp F				
cold to	op/cheese	40	shredded chicken			dded cheese					
	guac	37	ground beef	151	reac	h in cooler/flan	41				
	pico	39	chicken on stove	187	rea	ch in freezer	-25				
ur	nder/shrimp	37	beans on stove	46/47							
ra	aw chicken	38	WIC/beans	37							
	flautas	38	soup	38							
stea	ım table/beans	148	soup	38							
	rice	145	cut tomatoes	39							
		OF	SERVATIONS AND CORRECTIV	VE ACTION	IS						
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:										
	Bar hand sink 107F	equipp	ed								
		112F usimg Steramine tabs for sanitizer/sani sink setup too strong, COS by diluting									
34	•		droppings. Need to call		-						
9	Need to cover and protect	flour and p	panko in dry storage/do not leave	e open in b	ags while	not in use or overnight					
45	Need to clean floors	s and ur	nder equipment/ food de	bris							
42	Need to clean in/ard		• •								
	Kitchen hand sink 100+F equipped										
	Dishwasher sanitizing at 100ppm chlorine										
5	Beans pulled out on stove to be reheated/discussed not pulling out till needed and reheat to 165+F within 2 hours										
	COS to 165+F as had been out for 1.5 hours										
	Sani buckets setup										
	Test strips current a	ips current and digital thermo									
	3 comp sink 115F										
42	To clean shelves in kitchen										
	Frying oil discarded weekly										
36 Store wiping cloths in sani buckets, not on apron or back pocket											
45	, , , , , ,										
45/32	5/32 Chipping paint in various places throughout										
Soda/tea nozzles WRS daily											
32	To clean cutting box										
W											
Received (signature)	•		Print:	<u> </u>	14	Title: Person In Charge/ Owner	r				
(signature)	Toshua Seabolt		Joshua	Seak	oolt	Manager					
Inspected (signature)		ton 1	RS Christy Co	ortez		<u> </u>					
Form FH-06	Cru Usty COT	very, 1	Commisty Co	) (GZ,	110	Samples: Y N # collect	ted				