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| * Number of Repeat Violations: | | | | | | | | | |
| Image: Status Image: Status Served NA = not applicable COS = corrected on site No S and properties box for IN, NO, NA, COS Mark and in appropriate box for R mark in appropriate box for IN, NO, NA, COS Mark and in appropriate box for R mark in appropriate box for IN, NO, NA, COS Mark and in appropriate box for R mark in appropriate box for IN, NO, NA, COS Mark and in appropriate box for R mark in appropriate box for IN, NO, NA, COS Mark and in appropriate box for R mark in appropriate box for IN, NO, NA, COS Mark and in appropriate box for R mark in approprise box for R mark in appropriate box for R mark in appro | | | | | | | | | |
| Index Instruction Instruction actidants-2024 district to send/refer to Teddy No \square served NA = not applicable COS = corrected on site mark in appropriate box for IN, NO, NA, COS Mark an in appropriate box for R Immediate Corrective Action not to exceed 3 days Compliance Status R To a site of in NO, NA, COS Mark an in appropriate box for R Remployee Health R To b A O A O S Employee Health To b A O S Employee Health Immediate Corrective Action not to exceed 3 days Compliance Status R To b A O S Employee Health R Immediate Corrective Action not to exceed 3 days Openational employees; knowledge, responsibilities, and reporting I 10. Management, food employees and conditional employees; knowledge, responsibilities, and reporting I 10. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth I Preventing Contamination by Hands I 4. Hands cleaned and properly washed/ Gloves used properly Glovee (APPROVED Y, N,) <td colsp<="" td=""></td> | | | | | | | | | |
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| Image: Normal Science Preventing Contamination by Hands Image: Normal Science 14. Hands cleaned and properly washed/ Gloves used properly GloveS USEC Image: Normal Science 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_N_) Image: Normal Science 16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required liquid pasteurized eggs only Image: Normal Science 16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required liquid pasteurized eggs only Image: Normal Science 16. Pasteurized foods used; prohibited food not offered Pasteurized eggs only Image: Normal Science 17. Food additives; approved and properly stored; Washing Fruits & Vegetables Image: Normal Science 18. Toxic substances properly identified, stored and used Image: Normal Science 19. Water from approved source; Plumbing installed; proper backflow device | | | | | | | | | |
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| Image: Cloves Used Image: Cloves Used Image: Cloves Used 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_N_) Image: Cloves Used 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_N_) Image: Cloves Used Highly Susceptible Populations Image: Cloves Used 16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required liquid pasteurized eggs only Image: Cloves Used 16. Pasteurized eggs only Image: Cloves Used Chemicals Image: Cloves Used 17. Food additives; approved and properly stored; Washing Fruits & Vegetables Image: Vegetables 18. Toxic substances properly identified, stored and used Image: Vegetables 19. Water from approved source; Plumbing installed; proper backflow device | | | | | | | | | |
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| ✓ & Vegetables ✓ 18. Toxic substances properly identified, stored and used ✓ 19. Water from approved source; Plumbing installed; proper backflow device | | | | | | | | | |
| Image: Constraint of the second se | | | | | | | | | |
| Water/Plumbing 19. Water from approved source; Plumbing installed; proper backflow device | | | | | | | | | |
| Image: Water from approved source; Plumbing installed; proper backflow device | | | | | | | | | |
| ✓ backflow device | | | | | | | | | |
| 20. Approved Sewage/Wastewater Disposal System, proper | | | | | | | | | |
| ✓ disposal | | | | | | | | | |
| Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days 0 I N N C R N N C R R N N C R R N N C R <t< td=""></t<> | | | | | | | | | |
| U N O A O T S 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 dial calibrated | | | | | | | | | |
| Permit Requirement, Prerequisite for Operation | | | | | | | | | |
| 30. Food Establishment Permit (Current/insp report sign posted) | | | | | | | | | |
| Utensils, Equipment, and Vending | | | | | | | | | |
| 31. Adequate handwashing facilities: Accessible and properly | | | | | | | | | |
| supplied, used 32. Food and Non-food Contact surfaces cleanable, properly | | | | | | | | | |
| W designed, constructed, and used | | | | | | | | | |
| 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided | | | | | | | | | |
| Not to Exceed 90 Days or Next Inspection , Whichever Comes First | | | | | | | | | |
| U N O A O Food Identification T S S S S S | | | | | | | | | |
| A = (1 priminal contains table 1 is (10 Hz + 1)) | | | | | | | | | |
| ✓ 41.Original container labeling (Bulk Food) | | | | | | | | | |
| Physical Facilities | | | | | | | | | |
| Physical Facilities 42. Non-Food Contact surfaces clean | | | | | | | | | |
| Physical Facilities ✓ 42. Non-Food Contact surfaces clean ✓ 43. Adequate ventilation and lighting; designated areas used | | | | | | | | | |
| Physical Facilities ✓ 42. Non-Food Contact surfaces clean ✓ 43. Adequate ventilation and lighting; designated areas used ✓ 44. Garbage and Refuse properly disposed; facilities maintained | | | | | | | | | |
| V Physical Facilities ✓ 42. Non-Food Contact surfaces clean ✓ 43. Adequate ventilation and lighting; designated areas used ✓ 44. Garbage and Refuse properly disposed; facilities maintained ✓ 45. Physical facilities installed, maintained, and clean | | | | | | | | | |
| Physical Facilities ✓ 42. Non-Food Contact surfaces clean ✓ 43. Adequate ventilation and lighting; designated areas used ✓ 44. Garbage and Refuse properly disposed; facilities maintained ✓ 45. Physical facilities installed maintained and clean | | | | | | | | | |
| Not to Exceed 90 Days or Next Inspection , Whichever Comes First 0 I N N C U N O A O Food Identification T S S Food Identification | | | | | | | | | |

| Received by: (signature) Valerie Simmons | Print: Valerie Simmons | Title: Person In Charge/ Owner Manager |
|---|---------------------------|---|
| Inspected by: (signature) Christy Cortez, RS | Print: Christy Cortez, RS | Business Email: |

Form EH-06 (Revised 09-2015)

| | ^{nent Name:} Iebbie Williams Elementary) | Physical A 350 D | ^{ddress:} | City/State: Rockwall, TX | | License/Permit # FOOD6673 | Page <u>2</u> of <u>2</u> | 2 | |
|--------------------------|---|---|------------------------------|-----------------------------|------------|----------------------------------|---------------------------|-----|--|
| Idams/I and | -4: | Tome F | TEMPERATURE OBSERVA | | 14/1 | 4° | Tomo | - F | |
| Item/Loo | | Temp F | Item/Location | Temp F | Item/Loca | uon | Temp | рг | |
| CHICKE | en from oven | | WIC/chicken | | | | | | |
| | chicken | 195 | WIF | -6 | | | | | |
| | Milk cooler | 30 | | | | | | | |
| stea | am wells/chile | 205 | | | | | | | |
| steam wells/beans | | 185 | | | | | | | |
| reach i | n cooler/shredded cheese | 41 | | | | | | | |
| white | e shredded cheese | 41 | | | | | | | |
| reach | in hot holding ambient | 165 | | | | | | | |
| • | | | SERVATIONS AND CORRECT | | | | | | |
| Item Number | AN INSPECTION OF YOUR ES NOTED BELOW: | TABLISHME | NT HAS BEEN MADE. YOUR ATTEN | TION IS DIRE | CTED TO TH | HE CONDITIONS OBSERV | ED AND | | |
| | Line hand sink 113+F equipped | | | | | | | | |
| | | ouckets at 200ppm quats | | | | | | | |
| W | | ge sani buckets every 2 to 3 hours or as necessary to required ppm | | | | | | | |
| | Cooking logs, start temps records kept and current/HACCP | | | | | | | | |
| | Temp logs kept on outside of each cooling and hot holding unit | | | | | | | | |
| | Sanitizer logs kept daily with strips | | | | | | | | |
| | Allergy records on file per student | | | | | | | | |
| | Menus posted and on website Disbwasher, sanitizing per Temp strips | | | | | | | | |
| | Dishwasher sanitizing per Temp strips | | | | | | | | |
| | warewash hand sink 113F equipped Receiving records and temps on file/current | | | | | | | | |
| | 3 comp sink 118F | | | | | | | | |
| | Calibration logs kept for dial thermos | | | | | | | | |
| | No raw meat or raw shelled eggs | | | | | | | | |
| | Liquid pasteurized eggs only | | | | | | | | |
| | | | | | | | | | |
| | warewash sink 110+F equipped | | | | | | | | |
| W | | | isty grates (in milk coo | ler) | | | | | |
| | Ice machine clean/scoop stored correctly | | | | | | | | |
| | | sposable utensils and washable trays used elf serve water with disposable cups | | | | | | | |
| W | | but need the paper showing expiration and parameters | | | | | | | |
| 7 | 2 dented cans/removed | | | | | | | | |
| | WiF had a leak or sprinkler leak/work order in and facility on site at inspection to repair | | | | | | | | |
| | Anything under/con | taminate | ed was removed and d | iscarded | per dist | rict | | | |
| | LaBatt food supplie | r | | | | | | | |
| | | | | | | | | | |
| | - | | | | | | | | |
| Received (signature) | by: Valerie Simmons | | | Simmo | ons | Title: Person In Charge/ OMANAGE | Jwner | | |
| Inspected (signature) | | tez, î | RS Christy C | ortez, | | • | collected | | |
| Form EH-0 | 5 (Revised 09-2015) | ~ | I | | | Sumpros. 1 18 # | concettu | | |