Retail Food Establishment Inspection Report

V	First aid kit
\square	Allergy policy
ママ	Vomit clean up
٧	Employee health

	ite: /6/	/2	02	25	Time in: 1:20	Time out: 2:30		icense/Pe							Est. Type Risk Category Page 1 of 2	<u>)</u>
Es		ishn	nent		tion: 1-Routine ne:	2-Follow U		- Complai /Owner N		4-	Inve	stiga	atior	1	* Number of Repeat Violations: Vumber of Violations COS: 1	
Pł	ysic	al A	ddre	ess: Rd	Rockwall, TX		est control PT/1-15-20		hly	Ho Bare	od Metal/1	-2025			se trap : Follow-up: Yes V No	Д
		Con	ıplia	nce S	Status: Out = not in co	пірпансс	n compliance item	110	o = not ✓' a ch						pplicable COS = corrected on site R = repeat violation W-Watch	a
Co	mpli	iance	e Sta	tus	Prio	ority Items (3	Points)	violations	Requi	_	n <i>med</i> Compl				tive Action not to exceed 3 days	
O U T	I N	N O	N A	C O S		nperature for F legrees Fahrenhe		,	R	O U T	N	N O		C O S	Employee Health	R
W					1. Proper cooling time	and temperature					~				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
	>				2. Proper Cold Holding	g temperature(41	1°F/ 45°F)				_				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
		/			3. Proper Hot Holding	temperature(135	5°F)								Preventing Contamination by Hands	
	~	-			4. Proper cooking time	and temperature	e				~				14. Hands cleaned and properly washed/ Gloves used properly	
			~		5. Proper reheating pro Hours)	cedure for hot he	olding (165	°F in 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 He	alth Control; pro	ocedures &	records							Highly Susceptible Populations	
					Ap	proved Source					~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
	~				7. Food and ice obtaine good condition, safe, a destruction PFG			ood in							no eggs Chemicals	
	/				8. Food Received at pr		e				_				17. Food additives; approved and properly stored; Washing Fruits & Vegetables	
					check at rece	PIPT n from Contami	ination				~				Water only 18. Toxic substances properly identified, stored and used	
	~				9. Food Separated & pr preparation, storage, di	rotected, prevent	ted during f	ood			<u> </u>				Water/ Plumbing	
3					10. Food contact surfact Sanitized at			ed and			~				19. Water from approved source; Plumbing installed; proper backflow device	
	\				11. Proper disposition reconditioned diac		viously serv	ed or			~				20. Approved Sewage/Wastewater Disposal System, proper disposal	
							ation Iter	ns (2 Poi	ints) ı	violai	tions	Req	uire	Cor	rrective Action within 10 days	
O U T	I N	N O	N A	C O S		n of Knowledge			R	O U T	I N	N O	_	C O S	Food Temperature Control/ Identification	R
_	~			~	21. Person in charge prand perform duties/ Ce					2				~	27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
	~				22. Food Handler/ no u	nauthorized pers	rsons/ person	nnel			~				28. Proper Date Marking and disposition	
					Safe Water, Reco	rdkeeping and Labeling	Food Pack	age			~				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips digital	
	'				23. Hot and Cold Water	r available; adeq	quate pressu	ire, safe			1				Permit Requirement, Prerequisite for Operation	
	~				24. Required records a destruction); Packaged		ock tags; pa	rasite			~				30. Food Establishment Permit (Current/insp report sign posted) 12/31/2025	
	✓				25. Compliance with V HACCP plan; Variance processing methods; m	e obtained for sp	lized Proces pecialized			2					Utensils, Equipment, and Vending 31. Adequate handwashing facilities: Accessible and properly supplied, used	
					Con	sumer Advisor	у				~				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used	
	~				26. Posting of Consum foods (Disclosure/Rem						~				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided	
0	I	N	N	C	Core Items (1 Poin	nt) Violations	Require C	orrective .	Action	n Not		xce		Da C	ays or Next Inspection , Whichever Comes First	R
U T	N	0	A	o s		of Food Contar		41		U T	N	O	A	o s	Food Identification	
	~				34. No Evidence of Insanimals35. Personal Cleanlines						~				41.Original container labeling (Bulk Food)	_
	~				36. Wiping Cloths; pro			to use		4	1	l			Physical Facilities 42. Non-Food Contact surfaces clean	
_	~				37. Environmental con					1	-				43. Adequate ventilation and lighting; designated areas used	
1					38. Approved thawing					-	-				44. Garbage and Refuse properly disposed; facilities maintained	
	~						9-				V				45. Physical facilities installed, maintained, and clean	
	~				39. Utensils, equipmen dried, & handled/ In u		perly used, s	stored,		\vdash	\(\triangle \)				46. Toilet Facilities; properly constructed, supplied, and clean	
					40. Single-service & si		•	tored		1					47. Other Violations	
	~				and used											

Retail Food Establishment Inspection Report

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

Form EH-06 (Revised 09-2015)

B - 12.1	W			3'. (9		T (D)					
Wing	ment Name: ISTOD	Physical A 2455	Ridge Rd	City/State: Royse C	itv. TX	License/Permit # FS-8207	Page <u>2</u> of <u>2</u>				
	,		TEMPERATURE OBSERVAT		,, ,						
Item/Loc	eation	Temp F	Item/Location	Temp F	Item/Locat	ion	Temp F				
reach	in freezer	12	WIF ambient	14							
reach	n in cooler/chicken	42	cheese dispenser/cheese	142							
par f	fried fries on rack	92-118									
	WIC/fries	39									
	fries	40									
	fries	41									
	corn	40									
reac	h in cooler/ranch	41									
		OB	SERVATIONS AND CORRECTI	VE ACTION	IS		-				
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW:	TABLISHME	NT HAS BEEN MADE. YOUR ATTENT	TON IS DIRE	CTED TO TH	IE CONDITIONS OBSI	ERVED AND				
	Discussed only using Peroxide spray on non food contact only										
	Front hand sink 105+F										
	Need health posters at hand wash sinks										
42	To clean inside reach in cooler and freezers/some food debris										
	•	•	evious/COS by placing i								
27			ours to 70 then 4 hours		r below						
	Spent grease discarded 2 fryers a day/or every 3 days										
47	Internal grease disposal/Mahoney picks up and disposes										
47	Odor present around WIC/ this is an ongoing issue Warewash hand sink 100F										
37	3 comp sink 110F Condensation in vents in kitchen/ need to protect when prepping under										
W			h rack/to store in appro	•							
42	·		nachine in kitchen/lots o	•	<u></u>						
10	Sani buckets less tl	nan 150	opm quats/COS to 200p	pm							
	Need to change sani buckets every 2 hours or as often as necessary to keep at required ppm										
31	Back hand sink leaking from faucet/hot water/to repair										
	Soda and tea nozzles WRS daily										
	All Wingstops to move to frozen fries in March/no par fry fries after this switch over										
Received (signature)	Manieal Marine		Print: Marisol	Maci	as	Title: Person In Charge Manage					
Inspected (signature)	d by:	ton 1	Christy Co			<u> </u>					
	6 (Revised 09-2015)	104, 1	Co Chillsty Co	JI LOZ,	110	Samples: Y N	# collected				