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

3/1	1/2	25		2:20	3:21	FS-(46	39				CPFM	Food handlers	Page 1 or	<u>2</u>
				tion: 1-Routine	2-Follow U				4-]	Inves	stiga	tion		5-CO/Construction	6-Other	TOTAL/SC	ORE
Establi Crisp				ne:		Contact/Owner Natalie San								Number of Repeat Violat Number of Violations CO	tions: OS:	7/00	/ A
Physical Address: Pest control: 2901 Ridge Rd Rockwall, Tx Rentokil 2/24/25									Follow-up: Yes ✓ No □	7/93/A							
	Com	pliar	ice S	Status: Out = not in co	ompliance IN = in	compliance	NO = n	ot ob	oserv			= nc	ot ap	plicable COS = corrected on s	ite R = repeat vio	lation W= W	atch
Mark t	ne ap	prop	riate	points in the OUT box for Prio								_		ive Action not to exceed 3 day		e box for R	
Compli O I U N	ance N O	Stat N A	tus C O	Time and Ten	nperature for F	ood Safety	R		Co O U	ompli I N	ance N O	N	C O	Emple	owe Heelth		R
T	U	A	s	(F = d	legrees Fahrenhe and temperature	,			T	14	-		s	12. Management, food employ	ees and conditional	employees;	
'				See	•					/				knowledge, responsibilities, an	nd reporting		
/				2. Proper Cold Holding See	g temperature(41	°F/ 45°F)				/				13. Proper use of restriction an eyes, nose, and mouth	d exclusion; No disc	charge from	
/				3. Proper Hot Holding See	temperature(135	F)								Preventing Con	tamination by Han	nds	
		~		4. Proper cooking time						~				14. Hands cleaned and properly			
		•		5. Proper reheating pro Hours)						~				15. No bare hand contact with alternate method properly follo Gloves & utensils			
'				6. Time as a Public Hea	alth Control; pro	cedures & records									ptible Populations		
				Ар	proved Source					~				16. Pasteurized foods used; pro Pasteurized eggs used when re		fered	
_				7. Food and ice obtaine good condition, safe, at destruction Us Foo	nd unadulterated	; parasite								Ch	nemicals		
/				8. Food Received at pro Checking	oper temperature				3					17. Food additives; approved a & Vegetables	and properly stored;	Washing Fruits	-
					n from Contami	ination				~				Veggie wash 18. Toxic substances properly	identified, stored an	d used	
/				9. Food Separated & pr preparation, storage, di	rotected, prevent	ed during food								Water	·/ Plumbing		
/				10. Food contact surfact Sanitized at _200_	ces and Returnab ppm/temperatur	oles; Cleaned and				~			-	19. Water from approved source backflow device City approved	ce; Plumbing installe	ed; proper	
_				11. Proper disposition of reconditioned Disc	of returned, prev	iously served or				~				20. Approved Sewage/Wastew disposal	rater Disposal System	m, proper	
0 1	N	N	C	Pri	iority Founda	ation Items (2 F			_		_			rective Action within 10 days			D
O I U N T	N O	N A	C O S	Demonstration	n of Knowledge	/ Personnel	R		olati O U T	ions I N	Requ N O	N	Cor C O S	•	e Control/ Identific	ation	R
O I N T			О	Demonstration 21. Person in charge pr and perform duties/ Ce 2	n of Knowledge esent, demonstra rtified Food Mar	/ Personnel ation of knowledge nager (CFM)	R		O U	I	N	N	C O	Food Temperature 27. Proper cooling method use Maintain Product Temperature	d; Equipment Adec		R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Natalie Sachez	Print: Natalie Sanchez	Title: Person In Charge/ Owner GM
Inspected by: Richard Hill (signature)	Print: Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

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	ment Name: & Green	Physical A		City/State: Rockwa	II. Tx	License/Permit # Page FS-0002469	2 of 2				
			TEMPERATURE OBSERVAT		,						
Item/Loc		Temp	Item/Location	Temp	Item/Loca	· ·	Temp				
Makeup line			Reach in freezer	N/a	Grap	39/39					
Mix	greens/ lettuce	38/38	WIC	34	Roas	151/162					
So	urce Freezer		Raw chicken/tofu	36	Buffalo chix		155				
Sm	oothie Station		Blue cheese/Lettuce	38/39	Blac	ken chix thigh	150				
Blue	berry/Mango red	38/37	Tomatoes just prepped	44		Squash	148				
С	oconut milk	38	Service Line		Dressing cooler						
Р	rep Freezer	10	Brown /Wild Rice	167/149							
	UC fridge	N/a	Lettuce	38							
		OB	SERVATIONS AND CORRECTIV	E ACTION	NS						
Item Number		N INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND OTED BELOW: all temperatures are taken in F									
	Restrooms equipped t	emp grea	ater than 100 in each room								
	Hand sinks equipped	greater th	an 100 throughout kitchen	except by	sorbet f	freezer, no hot water					
	3comp sink set up, 11	5, quat sa	ani 200ppm								
	Dishwasher confirmed	160st									
37	Time to defrost sorbet freezer, ice buildup on all sides										
	Crathco chiller cleaned										
17	Veggie wash did not re		·								
32	Observed rough green cutting boards, code requires smooth, resurface or replacement are options Red sani buckets filled at 3 comp, towels stored in solution										
			ads to drip dry over mop sin								
		•	l operational, no gaps obse								
42			dge, to store clean when no								
	•		foods, hair restraints also								
			must meet initial drop to 71	within 2	hrs then	to 41 or lower within 4	hrs				
W	Observed a partially o	pen bag	of blue chez without date la	oel. Ever	ything el	se was marked and in	date				
	Tomatoes just prepped	ed in wic temp observed 44									
Received	lbv:		Print:		I	Title: Person In Charge/ Owner					
(signature)	See abov	e/e	See abo	ove							
Inspected (signature)	d by:) R	Richard	Hill		Samples: Y N # collect	ed				
Form FU 0	6 (Revised 09-2015)	•	1			The state of the s	- 44				