

Retail Food Establishment Inspection Report

City of Rockwall

- First aid kit
- Allergy policy
- Vomit clean up
- Employee health

Date: 03/27/2025	Time in: 10:50	Time out: 11:41	License/Permit # Fs-0003414	Food handlers 13	CFM 4	Page <u>1</u> of <u>2</u>
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Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine <input type="checkbox"/> 2-Follow Up <input type="checkbox"/> 3-Complaint <input type="checkbox"/> 4-Investigation <input type="checkbox"/> 5-CO/Construction <input type="checkbox"/> 6-Other <input checked="" type="checkbox"/>	TOTAL/SCORE
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Establishment Name: Smoothie King	Contact/Owner Name: Wasilewski	Number of Repeat Violations: 0	Number of Violations COS: 0	3/97/A
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Physical Address: 718 Ei-I-30	Pest control : Rockwall pest control monthly	Hood Na	Grease trap : NA	Follow-up: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W = Watch
 Mark the appropriate points in the OUT box for each numbered item Mark a checkmark in appropriate box for IN, NO, NA, COS Mark an in appropriate box for R

Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Time and Temperature for Food Safety (F = degrees Fahrenheit)						Employee Health					
			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					
1. Proper cooling time and temperature						12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
2. Proper Cold Holding temperature(41°F/ 45°F) See						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth Posted at hand sink					
			<input checked="" type="checkbox"/>								
3. Proper Hot Holding temperature(135°F)						Preventing Contamination by Hands					
			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					
4. Proper cooking time and temperature						14. Hands cleaned and properly washed/ Gloves used properly					
			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					
5. Proper reheating procedure for hot holding (165°F in 2 Hours)						15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y, <input checked="" type="checkbox"/> N, <input type="checkbox"/>) Gloves used to cut bananas, etc.					
			<input checked="" type="checkbox"/>								
6. Time as a Public Health Control; procedures & records Prep only						Highly Susceptible Populations					
			<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>		
Approved Source						16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required Na					
	<input checked="" type="checkbox"/>										
7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction PFG						Chemicals					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
8. Food Received at proper temperature Taking						17. Food additives; approved and properly stored; Washing Fruits & Vegetables Veggie wash					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
Protection from Contamination						18. Toxic substances properly identified, stored and used Watch placement of spray bottles					
	<input checked="" type="checkbox"/>										
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting						Water/ Plumbing					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>150</u> ppm/temperature 200						19. Water from approved source; Plumbing installed; proper backflow device Confirmed air gap under ice machine					
						<input checked="" type="checkbox"/>					
11. Proper disposition of returned, previously served or reconditioned Discarded						20. Approved Sewage/Wastewater Disposal System, proper disposal					

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Demonstration of Knowledge/ Personnel						Food Temperature Control/ Identification					
	<input checked="" type="checkbox"/>								<input checked="" type="checkbox"/>		
21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) 4						27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
22. Food Handler/ no unauthorized persons/ personnel All 16!						28. Proper Date Marking and disposition Using within 24 hours					
						<input checked="" type="checkbox"/>					
Safe Water, Recordkeeping and Food Package Labeling						29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Digital and test strips in date					
	<input checked="" type="checkbox"/>										
23. Hot and Cold Water available; adequate pressure, safe See						Permit Requirement, Prerequisite for Operation					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled Handed to customer or it's comme						30. Food Establishment Permit/Inspection Current/ insp posted Posted					
Conformance with Approved Procedures						Utensils, Equipment, and Vending					
			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions						31. Adequate handwashing facilities: Accessible and properly supplied, used Equipped					
						<input checked="" type="checkbox"/>					
Consumer Advisory						32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used Watch condition of shelves and cart					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label Posted on menus and ingredients available upon request.						33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided Set up					

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Prevention of Food Contamination						Food Identification					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
34. No Evidence of Insect contamination, rodent/other animals						41. Original container labeling (Bulk Food) Yes					
	<input checked="" type="checkbox"/>										
35. Personal Cleanliness/eating, drinking or tobacco use						Physical Facilities					
	<input checked="" type="checkbox"/>					1					
36. Wiping Cloths; properly used and stored Stored in buckets						42. Non-Food Contact surfaces clean See attached					
	<input checked="" type="checkbox"/>					1					
37. Environmental contamination Watch ice in deep freezer						43. Adequate ventilation and lighting; designated areas used Bulb out in freezer					
			<input checked="" type="checkbox"/>			W	<input checked="" type="checkbox"/>				
38. Approved thawing method						44. Garbage and Refuse properly disposed; facilities maintained Watching dumpster					
						1					
Proper Use of Utensils						45. Physical facilities installed, maintained, and clean Under ice machine and equipments					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used Watch						46. Toilet Facilities; properly constructed, supplied, and clean Equipped					
	<input checked="" type="checkbox"/>								<input checked="" type="checkbox"/>		
40. Single-service & single-use articles; properly stored and used Watch						47. Other Violations					

Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Mackynzye Wasilewski	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) <i>Kelly Kirkpatrick RS</i>	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: Smoothie king	Physical Address: Ei-30	City/State: Rockwall	License/Permit # 3414	Page 2 of 2
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TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Water cooler	41	2 door cooler	34.5		
Staging freezer	-6.9	Bananas	37		
Backup cooler		Freezer	8.1		
Mango	37				
Freezer deep freeze	16				
Cold top unit mangos	38				
Inside temp	38				
2 door cooler	34.5				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: temperatures taken in F
	Hot water at bathroom sink 110
	Restroom equipped with hand soap and towels
	Employee hand wash sign is posted
	Hot water in front 125
	Digital thermometer present
	Hand sanitizer bucket at 150ppm and microfiber cloth
45	Minor cleaning underneath the sink
	Hand sanitizer bucket at front rinse seek at 150ppm
Note	Watch chemical storage
	Mop sink and bucket in mop area
	Scoops on dry storage clean nightly
	Hot water in back sink 120
	Sanitation station test strips at 200ppm.
W	Water on cart is washed and dried daily
	Brooms are stored on dirty side of comp sink
	Check all coolers and gaskets for repair or replacement
42	Minor cleaning in upright two door freezer
43	Light is out in back freezer
42	Minor cleaning of shelving various
	Doing their part to keep dumpster area clean.
	Separation of peanut butter and any other known allergens
	Confirmed air gap underneath ice machine.

Received by: (signature) See above	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) <i>[Signature]</i>	Print:	Samples: Y N # collected

Form EH-06 (Revised 09-2015)