Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

| | ate: | | | | l l | Time out: | | nse/Perr | | | | | | | Est. Type | Risk Category | 5 1 .2 | 2 |
|--|---------------------------------------|--|-------------------------------------|-------------|--|--|--|--|--------|-----------------------|---|----------------|---|--|--|--|--|----|
| l | | | | | | | | | 001872 | | | | r | | | Page <u>1</u> of <u>2</u> | | |
| | | se o i ishm | | | etion: 1-Routine | 2-Follow U | Jp 3-Co Contact/Ov | mplaint vner Na | | 4- | Inves | tiga | tion | 1 | 5-CO/Construction * Number of Repeat Viol | 6-Other | TOTAL/SCOR | RE |
| _ | | | | | kies | | | | | ** | | | | | ✓ Number of Violations | | 10/90/ | Α |
| | | al A I-3 | | | kwall, TX | Roa | est control : adrunner/1-6-2 | 2025/20 | | | | | | | se trap : Follow-up: Yes Vall Pest Control/2-17-2025 | | | |
| Compliance Status: Out = not 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 NO = not observed NA = not applicable COS = corrected on site R = repeat violation W-Watch Mark '\sigma' a checkmark in appropriate box for IN, NO, NA, COS Mark an in appropriate box for R | | | | | | | | | | | | h | | | | | | |
| Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days | | | | | | | | | | | | | | | | | | |
| O U | Î | iance N | N | С | Time and Temp | perature for F | ood Safety | | R | O | | N N C O A O | | | Foundation Worlds | | | R |
| T | IN | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | | | | | | | T | N | 0 | A | s | 12. Management, food emplo | ovees and conditional | employees: | |
| | ~ | | Proper cooling time and temperature | | | | | | | | ~ | | | | knowledge, responsibilities, | | emproyees, | |
| | ~ | 2. Proper Cold Holding temperature(41°F/45°F) | | | | | | | | | 7 | | | | 13. Proper use of restriction eyes, nose, and mouth | and exclusion; No disc | charge from | |
| | | | | | | | | | | | | | | | eyes, nose, and moun | | | |
| | | ~ | | | | | | | | | 14 Hands cleaned and properly was | | | | ontamination by Han | | | |
| | | 4. Proper cooking time and temperature | | | | | . 2 | | | ~ | | | | gloves used 15. No bare hand contact with | | | | |
| | | ~ | | | 5. Proper reheating proce Hours) | edure for hot ho | olding (165°F ii | n 2 | | | ~ | | | | alternate method properly for | | | |
| | | ~ | | | 6. Time as a Public Healt | th Control; pro | cedures & reco | ords | | | | | | | Highly Sus | ceptible Populations | | |
| | | Ľ | | <u> </u> | | | | | | | | | | | 16. Pasteurized foods used; p | prohibited food not off | | |
| | | | | | | roved Source | | | | | ' | | | | Pasteurized eggs used when liquid pasteurize | | | |
| 3 | | 7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite | | | | in | | | | | | | Chemicals | | | | | |
| | | | | | destruction dented | | | | | | | | | | · | chemicais | | |
| | ~ | | | | 8. Food Received at prop | _ | ; | | | | / | | | | 17. Food additives; approved& Vegetables | l and properly stored; | Washing Fruits | |
| | | | | <u> </u> | check at receip | • | nation | | | | ~ | | | | 18. Toxic substances properl | y identified, stored an | d used | |
| | | Protection from Contamination 9. Food Separated & protected, prevented during food | | | | | | | | _ | | | | | | | | |
| | ~ | | | | preparation, storage, disp | olay, and tasting | g | | | | | | | | | er/ Plumbing | | |
| 3 | | | | ~ | 10. Food contact surfaces Sanitized at pp | | | nd | | | ~ | | | ı | 19. Water from approved sou backflow device | urce; Plumbing installe | ed; proper | |
| | | | | | 11. Proper disposition of reconditioned disca | returned, prev | iously served o | r | | | ~ | | | | 20. Approved Sewage/Waste disposal | ewater Disposal Syster | m, proper | |
| | ~ | | | | uisca | alucu | | | | | | | | | | | | |
| | _ | N. | 3.7 | - | | | ation Items (| | | | | | | | rective Action within 10 day | ys | | |
| O U T | I | N O | N A | C O S | | rity Founda | | | ts) vi | iolati O U T | | Requ N O | uire N A | Cor C O S | | ys ıre Control/ Identific | ation | R |
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| Received by: | Print: Alexis Jones | Title: Person In Charge/ Owner |
|----------------------------------|---------------------------|--------------------------------|
| (signature) Alexis Jones | Alexis Jones | Manager |
| Inspected by: Christy Cortez, RS | Print: Christy Cortez, RS | Business Email: |

Form EH-06 (Revised 09-2015)

| D : 1*** | (A) | l pi | 11 | G: /g. | | 11 /0 11 // | I D | | | | |
|--|--|---|-----------------------------|--------------------|-------------|--------------------------|---------------------------|--|--|--|--|
| Crun | nent Name: nbl Cookies | Physical A | | City/State: Rockwa | II, TX | FS-0001872 | Page <u>2</u> of <u>2</u> | | | | |
| | | | TEMPERATURE OBSEI | RVATIONS | | | | | | | |
| Item/Loc | | Temp F | Item/Location | Temp F | Item/Loca | tion | Temp F | | | | |
| under | counter cooler/butter | 42 | | | | | | | | | |
| far left cooler/ambient | | 37 | | | | | | | | | |
| | cooler 3 | 35 | | | | | | | | | |
| | cooler 2 | 32 | | | | | | | | | |
| | cooler 1 | 33 | | | | | | | | | |
| d | airy cooler | 32 | | | | | | | | | |
| cł | nilled cooler | 36 | | | | | | | | | |
| rea | ch in freezer | -1 | | | | | | | | | |
| | | OB | SERVATIONS AND CORRE | CCTIVE ACTION | IS | | | | | | |
| Item Number | AN INSPECTION OF YOUR ES NOTED BELOW: | TABLISHME | NT HAS BEEN MADE. YOUR AT | TENTION IS DIREC | CTED TO TI | HE CONDITIONS OBSERV | /ED AND | | | | |
| | Front hand sink 107 | 7F equip | ped | | | | | | | | |
| | Butter is held at 41F | in cool | in cooler until baking time | | | | | | | | |
| | Butter is pulled an h | nour befo | ore baking to soften | | | | | | | | |
| | Butter is no longer | pulled to | ulled to soften overnight | | | | | | | | |
| 10 | Sani buckets at 0pp | m quats | s/sani dispenser at 3 | comp sink | low | | | | | | |
| | Sani sink at 200ppr | Sani sink at 200ppm/had just been filled prior to sani buckets being filled | | | | | | | | | |
| | Will hand mix with remaining sanitizer in jug/very low/COS to 200ppm quats | | | | | | | | | | |
| | Truck is coming tome | orrow mo | orning at 8am/otherw | se will get sa | anitizer | from Roweltt sto | re | | | | |
| | Back hand sink 108 | +F equi | pped | | | | | | | | |
| | 3 comp sink 112+F | | | | | | | | | | |
| 45 | 45 Food debris on floor | | | | | | | | | | |
| | Test strips on site/c | urrent 2027 | | | | | | | | | |
| 45 | Moldy caulking behind 3 comp sink/to replace to be cleanable | | | | | | | | | | |
| 7 | Removed 3 dented cans | | | | | | | | | | |
| | Nuts labeled in bulk | storage and nuts go back into same nut containers | | | | | | | | | |
| Allergen label posted at ordering window | | | | | | | | | | | |
| | Using liquid pasteu | rized eg | gs only | | | | | | | | |
| 35 | To store employee | drinks lo | w and separate in c | ooler/not ov | er resta | aurant products | | | | | |
| 34 Some fruit flies in back near 3 comp sink | | | | | | | | | | | |
| | Using gloves and s | | | | | | | | | | |
| 42 | To clean inside coo | | ne food debris | | | | | | | | |
| | Sysco is food suppl | ier | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Received (signature) | · · | | Print: | Jones | 2 | Title: Person In Charge/ | Owner | | | | |
| | Mexis Vones | | AIGXIS | JULIES | > | Manager | | | | | |
| Inspected (signature) | | tez, 1 | Christy | Cortez, | RS | Samples: Y N # | collected | | | | |