

# Retail Food Establishment Inspection Report

## City of Rockwall

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

Date: <b>03/13/2025</b>	Time in: <b>10:42</b>	Time out: <b>11:55</b>	License/Permit # <b>Fs-0000940</b>	Food handlers <b>5</b>	CFM <b>1</b>	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	<b>TOTAL/SCORE</b>
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Establishment Name: <b>Sharetea</b>	Contact/Owner Name: <b>Angel</b>	Number of Repeat Violations: <b>0</b>	Number of Violations COS: <b>0</b>
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Physical Address: <b>2676 market center Dr</b>	Pest control : <b>Lake zone monthly</b>	Hood <b>NA</b>	Grease trap : <small>Fatboy 3/11/2025 50 gallon (inside in the floor in the back room)</small>	Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<b>5/95/A</b>
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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 with a checkmark in appropriate box for IN, NO, NA, COS Mark an X 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
<b>Time and Temperature for Food Safety</b> (F = degrees Fahrenheit)						<b>Employee Health</b>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<b>Preventing Contamination by Hands</b>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					<b>Highly Susceptible Populations</b>					
						<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					<b>Chemicals</b>					
	<input checked="" type="checkbox"/>								<input checked="" type="checkbox"/>		
						<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					<b>Water/ Plumbing</b>					
	<input checked="" type="checkbox"/>					<b>3</b>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					

### 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
<b>Demonstration of Knowledge/ Personnel</b>						<b>Food Temperature Control/ Identification</b>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					<b>W</b>	<input checked="" type="checkbox"/>				
<b>Safe Water, Recordkeeping and Food Package Labeling</b>						<b>Permit Requirement, Prerequisite for Operation</b>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					<b>Utensils, Equipment, and Vending</b>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
<b>Consumer Advisory</b>						<b>W</b>	<input checked="" type="checkbox"/>				
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					

### 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
<b>Prevention of Food Contamination</b>						<b>Food Identification</b>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					<b>Physical Facilities</b>					
	<input checked="" type="checkbox"/>					<b>W</b>	<input checked="" type="checkbox"/>				
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
<b>Proper Use of Utensils</b>						<b>W</b>					
	<input checked="" type="checkbox"/>					<b>1</b>					
<b>1</b>						<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				

# Retail Food Establishment Inspection Report

City of Rockwall

<b>Received by:</b> <small>(signature)</small> <b>Angel HU</b>	<b>Print:</b>	<b>Title: Person In Charge/ Owner</b>
<b>Inspected by:</b> <small>(signature)</small> <i>Kelly Kirkpatrick RS</i>	<b>Print:</b>	<b>Business Email:</b>

Form EH-06 (Revised 09-2015)

<b>Establishment Name:</b> <b>Sharetea</b>	<b>Physical Address:</b> <b>2675 market center street</b>	<b>City/State:</b> <b>Rockwall</b>	<b>License/Permit #</b>	<b>Page 2 of 2</b>
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### TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Cold top table/ egg pudding upper temp	<b>35</b>				
<b>Soy milk below</b>	<b>40</b>				
Up right glass front/egg pudding	<b>38</b>				
<b>Milk</b>	<b>40</b>				

### OBSERVATIONS AND CORRECTIVE ACTIONS

<b>Item Number</b>	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 in restrooms. Mens room 110. Women's room 104. Soap and hand towels provided in both rooms.
46	Need self closers on the bathroom doors.
	Hot water in kitchen is 112
19	New Residential pull out faucets in front prep front do not self retract.
	Reminder to use NSF approved equipment.
W	Keep an eye on ice build up in deep freeze
	Digital fold up thermometer
COS	Need date mark when opened 6 days out soy milk
	Keep an eye on use of residential containers
	Keep an eye on flooring. Looks like it's becoming unwashable
40	Any storage of any cardboard should be original product.
	Watch storage of dish soap next to three comp
	Tphc used for tapioca pearls. She will discard on time written on pan
	Using milk after opening within 24 hours
	Using plastic containers for storage. Keep an eye on Storage containers
19COS	Reminder to keep fall proper while maintaining air gap at ice machine drains pipe
	(At inspection pipes were slightly raised at the end and were tilted towards the drain for proper drainage.
	There is a back flow prevention device at sprayer attached to pipe behind ice machine
	Quats sanitizer tested to be 200 ppm test strips on site in date
W	Watch tape on ice machine
	Chemical bulk are stored on floor. Reminder to move to clean that area
	Two lids on dumpster dumpster area looks good
	Keep an eye on floor storage in back
	Floor in back kitchen starting to peel where it meets floor tile
	Allergy chart posted at the front counter and at register

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

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