## **Retail Food Establishment Inspection Report**

First aid kit
Allergy policy
Vomit clean up
Employee health

Date: 10/30/2025 5:30			5:30	Time out: <b>6:00</b>	F	S-8				_	_	_	Est. Type	Risk Category	Page 1	of <u>2</u>		
Purpose of Inspection: 1-Routine 2-Follow Up 3-Compla Establishment Name: Contact/Owner I							4-]	Inve	stiga	ation	1	5-CO/Construction  * Number of Repeat Violations	6-Other	TOTAL/S	CORE			
Baskin Robbins #345793								vaine.						✓ Number of Violations COS:		8/92	2/Δ	
	Physical Address: Pest control: 2961 Ridge Rd Rockwall, TX Ecolab/10-14-202							5	Hood Grease n/a LES/5			Gı LE	rease S/5	trap : Follow-up: Yes 200gal/10-17-2025 No 2		OIOZII		
M					Status: Out = not in co	ompliance IN = in	compliance	N(	$\mathbf{y} = \text{not}$						plicable COS = corrected on site ox for IN, NO, NA, COS Mark an	R = repeat viol	lation W-V	Watch
IVI	ark u	ис ар	ргор	riate	•					re Im	ımed	liate	Cor	recti	ive Action not to exceed 3 days	п арргоргас	2 00X 101 K	
О	ompliance Status							R	О	Compliance Status O I N N C U N O A O		С	Employee Heelth			R		
U T	N O A O Time and Temperature for Food Safety						U T	N	N O A O Employee Health  12. Management, food employees and conditional e				employees:					
	~				1. Froper cooming time	and temperature					~				knowledge, responsibilities, and re		employees,	
	~	2. Proper Cold Holding temperature(41°F/45°F)							~				13. Proper use of restriction and exeyes, nose, and mouth	xclusion; No disc	charge from			
	3. Proper Hot Holding temperature(135°F)										Preventing Contam	nination by Hand	ds					
	4. Proper cooking time and temperature						~				14. Hands cleaned and properly w	vashed/ Gloves us	sed properly					
	5. Proper reheating procedure for hot holding (165°F in 2					°F in 2			7				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N			,		
	Hours)  6 Time as a Public Health Control: procedures & records																	
			~		6. Time as a Public Health Control; procedures & records								1		Highly Susceptible Populations			
					Ap	proved Source					16. Pasteurized foods used; prohibited food not of Pasteurized eggs used when required						ered	
					7. Food and ice obtaine			ood in										
	good condition, safe, and unadulterated; parasite destruction										Chemicals							
	~				8. Food Received at pro		2								17. Food additives; approved and J & Vegetables	properly stored;	Washing Fru	its
					check at rece	eipt					~					ntified stored and	duead	
	1 1					n from Contami		had			~				18. Toxic substances properly ider	ntiffed, stored and	u useu	
	~			9. Food Separated & protected, prevented during food preparation, storage, display, and tasting  10. Food contact surfaces and Returnables; Cleaned and											Water/ Pl			
	~				Sanitized at <u>200</u>	ppm/temperatur	re				~				19. Water from approved source; I backflow device	_		
	~				11. Proper disposition reconditioned <b>disc</b>	of returned, previ	iously serve	ed or			~				20. Approved Sewage/Wastewater disposal	r Disposal Systen	n, proper	
	T .	N	N	C				ns (2 Po							rective Action within 10 days			D
O U T	I N	N O	N A	C O S	Pri		ation Iten		ints) v	iolati O U T		Req N O	nuire N A	Cor C O S	rective Action within 10 days  Food Temperature Co	ontrol/ Identifica	ation	R
				О	Demonstration 21. Person in charge pi and perform duties/ Ce	n of Knowledge/resent, demonstra	Ation Item / Personnel	l owledge,		O U	I	N	N	C 0				R
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## **Retail Food Establishment Inspection Report**

Received by: (signature) Tessica Willis	Print: Jessica Willis	Title: Person In Charge/ Owner Employee
Inspected by: Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name:	Physical A		City/State:	Т.	License/Permit #	Page <u>2</u> of <u>2</u>				
Baski	n Robbins #345793	2961	Ridge Rd		vall, TX	FS-8720					
Item/Loc	ation	Temp F	Item/Location	OBSERVATIONS Temp	F Item/Loca	tion	Temp F				
under counter cooler		36		•							
3 door cooler		37									
3 do	or cake freezer	-12									
ice	cream freezer	13									
ice	cream freezer	7									
ice c	ream flash freezer	5									
W	IF ambient	-9									
_	I	OB	SERVATIONS AND	CORRECTIVE ACTI	IONS						
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AN NOTED BELOW:										
	Line hand sink 108	F equip	ped								
	3 comp sink 114	- 1- 1-1									
	Sani sink setup to 2	200ppm	quats								
29	Test strips expired/		•								
42	To clean inside 3 de			 S							
32	To clean cutting board where discolored/ scored										
	Running dipper we										
	Blenders WRS after every use										
	Allergen disclaimer on cake freezes										
	Cakes and pints labeled for individual sale										
45	•	Is behind 3 comp sink									
37	Some condensation in ice cream freezers/time to defrost										
	New manager to clean ice cream freezers weekly instead of bi-weekly										
45	To clean floors, under equipment										
	All employees to have food handlers within 30 days of hire										
45 To clean floors in back/some black grease											
45	To clean floor drains										
	Ice cream cones handled with paper wrappers										
	Discussed hair restraints. Employee with hair restrained at inspection										
40	Avoid use of single	oid use of single use cups as scoops/instead use a cleanable handled scoop									
? Labels for cakes made on site?/packaged on site											
Received (signature)	-		Jes	ssica Wi	llis	Employe					
Inspected (signature)		tez, 1	RS Chr	sty Cortez	z, RS	Samples: Y N	# collected				