

Additional followups
\$50.00 fee

Retail Food Establishment Inspection Report
City of Rockwall

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

Date: 02/24/2023	Time in: 9:11	Time out: 10:46	License/Permit # FS 9225	Food handlers 1 on site	Food managers 1 on site	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							TOTAL/SCORE
Establishment Name: 7 Eleven 35996 sh276			Contact/Owner Name: Dejene Siyum		* Number of Repeat Violations: _____		16/84/B
Physical Address: 1701 hwy 276			Pest control : Corp rentokil 12/30/22		Grease trap/ waste oil Les 10/10/22 500 gals		
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 <input checked="" type="checkbox"/> in appropriate box for IN, NO, NA, COS Mark an <input checked="" type="checkbox"/> 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	Time and Temperature for Food Safety (F = degrees Fahrenheit)	R	OUT	IN	NO	NA	COS	Employee Health	R
		<input checked="" type="checkbox"/>			1. Proper cooling time and temperature		<input checked="" type="checkbox"/>					12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
3					2. Proper Cold Holding temperature(41°F/ 45°F) See milk		W	<input checked="" type="checkbox"/>				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth Need at hand sink	
		<input checked="" type="checkbox"/>			3. Proper Hot Holding temperature(135°F) Confirmed							Preventing Contamination by Hands	
		<input checked="" type="checkbox"/>			4. Proper cooking time and temperature 178			<input checked="" type="checkbox"/>				14. Hands cleaned and properly washed/ Gloves used properly	
				<input checked="" type="checkbox"/>	5. Proper reheating procedure for hot holding (165°F in 2 Hours)			<input checked="" type="checkbox"/>				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)	
		<input checked="" type="checkbox"/>			6. Time as a Public Health Control; procedures & records 7 eleven times							Highly Susceptible Populations	
					Approved Source						<input checked="" type="checkbox"/>	16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
3				<input checked="" type="checkbox"/>	7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction See attached / pulled							Chemicals	
		<input checked="" type="checkbox"/>			8. Food Received at proper temperature To check						<input checked="" type="checkbox"/>	17. Food additives; approved and properly stored; Washing Fruits & Vegetables	
					Protection from Contamination			W				18. Toxic substances properly identified, stored and used See above	
		<input checked="" type="checkbox"/>			9. Food Separated & protected, prevented during food preparation, storage, display, and tasting							Water/ Plumbing	
		<input checked="" type="checkbox"/>			10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature			<input checked="" type="checkbox"/>				19. Water from approved source; Plumbing installed; proper backflow device	
				<input checked="" type="checkbox"/>	11. Proper disposition of returned, previously served or reconditioned			<input checked="" type="checkbox"/>				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	Demonstration of Knowledge/ Personnel	R	OUT	IN	NO	NA	COS	Food Temperature Control/ Identification	R
		<input checked="" type="checkbox"/>			21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) See			<input checked="" type="checkbox"/>				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
		<input checked="" type="checkbox"/>			22. Food Handler/ no unauthorized persons/ personnel See			<input checked="" type="checkbox"/>				28. Proper Date Marking and disposition	
					Safe Water, Recordkeeping and Food Package Labeling						2	29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Test strips out of date / yellow digital thermo	
		<input checked="" type="checkbox"/>			23. Hot and Cold Water available; adequate pressure, safe See attached							Permit Requirement, Prerequisite for Operation	
		<input checked="" type="checkbox"/>			24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled			<input checked="" type="checkbox"/>				30. Food Establishment Permit (Current/ insp sign posted) Posted	
					Conformance with Approved Procedures							Utensils, Equipment, and Vending	
W	<input checked="" type="checkbox"/>				25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions log not filled out			<input checked="" type="checkbox"/>				31. Adequate handwashing facilities: Accessible and properly supplied, used Need soap in dispenser	
					Consumer Advisory						<input checked="" type="checkbox"/>	32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used	
		<input checked="" type="checkbox"/>			26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label			2				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided See attached	

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	Prevention of Food Contamination	R	OUT	IN	NO	NA	COS	Food Identification	R
W					34. No Evidence of Insect contamination, rodent/other animals Watch doors				<input checked="" type="checkbox"/>			41. Original container labeling (Bulk Food)	
		<input checked="" type="checkbox"/>			35. Personal Cleanliness/eating, drinking or tobacco use Watch storage							Physical Facilities	
		<input checked="" type="checkbox"/>			36. Wiping Cloths; properly used and stored		1					42. Non-Food Contact surfaces clean	
1					37. Environmental contamination Defrost freezer			<input checked="" type="checkbox"/>				43. Adequate ventilation and lighting; designated areas used	
		<input checked="" type="checkbox"/>			38. Approved thawing method						1	44. Garbage and Refuse properly disposed; facilities maintained Dumpster area --- not your debris however	
					Proper Use of Utensils						1	45. Physical facilities installed, maintained, and clean Clean under and around	
1					39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used Store utensils up out of spray zone						1	46. Toilet Facilities; properly constructed, supplied, and clean Need paper towels and to clean	
		<input checked="" type="checkbox"/>			40. Single-service & single-use articles; properly stored and used				<input checked="" type="checkbox"/>			47. Other Violations	

Retail Food Establishment Inspection Report

City of Rockwall

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

Form EH-06 (Revised 09-2015)

Establishment Name: 7 eleven 35996	Physical Address: Hwy 276	City/State: Rockwall	License/Permit # Fs 9225	Page 2 of 2
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TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
Wall unit	30's	Rollers		ColdTop unit Pico	39
Ice coffee unit	41	Hot dogs	149-16	Below	36/37
Ice cream unit HTT	1-7	Taquitos	168-174	Pizza unit	32
Mini melts	-23	Wing unit		Freezer	4
Milk unit	41	125-166 tphc 2 hrs		Under counter cooler hot dogs	41
Freezer section	-2-1	Sandwich	156	Cooked temp	187
Wic 44-35 F		Fried wings (2hr)	126	Upright freezer 1	4
Milk	43	Chili / cheese	137/136	Upright freezer 2	8.5

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: ALL TEMPS TAKEN in F
44	To address items around dumpster area that can attract vermin - need to identify the small bucket with lid (Items such as mattress and box springs and bottles and trash etc) Allergy statement on case to pastries and also ingredients by request Tissues to access customer self service
7	Observed eggs sourcream and naked juice , cheese slices , and rotini and soups , out of date various dates - watch for dates / milk without label
42	Minor detailed cleaning in wall case
42	To clean under sink in customer area and inside drawers and cabinets
42/45	Need to clean drains and area under beverage station
42	Clean spills in coffee area general
37	Ice in pipe over ice bags
02	Milk in wic dated 2/19 without label ... temp is 44 F to move all Tcs foods back into unit where temp is 35 F Hot water 134 F / need to add soap into dispenser Gloves used to touch rte foods Tongs are w r s every 4 hrs
42	General cleaning inside coolers and address gaskets where needed
46	Clean drains where needed
W	No home pesticides to be used Reminder that damages should be stored where proper
33	Need plugs to sinks to allow to w r s
39	To move clean dishes away from spray bottles on wall
29	Test strips out of date
39	Address low hanging utensils in spray zone at three comp sink
33	Organize three comp sink area!!!
42/45	General detailed cleaning in back room!!! Organize and clean spills
46	Hot water at 100 in restrooms - need paper towels

Received by: See above <small>(signature)</small>	Print:	Title: Person In Charge/ Owner
Inspected by: <i>Kelly Kirkpatrick RS</i> <small>(signature)</small>	Print:	Samples: Y N # collected

Form EH-06 (Revised 09-2015)