\$50.00 reinspection fee required after 1st Followup

Retail Food Establishment Inspection Report City of Rockwall

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

_													<u>Employee nealth</u>	
	ite:	710		~ 4	Time in: Time out		ense/Permi						Est. Type Risk Category Mon's Page 1	of 2
					8:42 9:42		S 885	<u>U</u>					Conv Men's Page Conv C	
					tion: 1-Routine 2-Follo		omplaint		4-In	vesti	gatio	n	5-CO/Construction 6-Other TOTAL/SO	CORE
		shmei			ne: north	Contact/O	wner Name	e:					* Number of Repeat Violations: ✓ Number of Violations COS:	
		al Ado			Horar	Pest control :		E	lood	l	G	reas	se trap : Follow-up: Yes 6/94	/A
		oliad				Rentokil 04/08/2	2021	Na			3/2	23/21	11 les 1000 № Pics	
					Status: Out = not in compliance IN	V = in compliance	NO = n						pplicable $COS = corrected on site$ $R = repeat violation$ $W-W$	/atch
Ma	urk th	ne appi	ropi	riate	points in the OUT box for each number								O, NA, COS Mark an in appropriate box for R tive Action not to exceed 3 days	
Co	mpli	ance S	Stat	us	Thornty Item	is (3 I omts) vio	unons Keg			nplian			uve Action not to exceed 5 days	
O U	I N		N A	C	Time and Temperature f	•	R		0	I N N O	N	C	Employee Health	R
T	- '			Š	(F = degrees Fahr				T		ļ	S	F - V	
		/			1. Proper cooling time and tempera	ature							12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
		_			2. Proper Cold Holding temperatur	ro(41°E/ 45°E)		-					13. Proper use of restriction and exclusion; No discharge from	
	/				See	16(41 17 43 17)				/			eyes, nose, and mouth	
			_		3. Proper Hot Holding temperature	6(135°F)							Policy	
	~				See								Preventing Contamination by Hands	
		/			4. Proper cooking time and temper	rature			ı	/			14. Hands cleaned and properly washed/ Gloves used properly	
					5. Proper reheating procedure for h	not holding (165°F	in 2						15. No bare hand contact with ready to eat foods or approved	
	•				Hours)				•				alternate method properly followed (APPROVED Y N) Gloves blue baggies	
		/			6. Time as a Public Health Control Prep only	; procedures & red	cords			_			Highly Susceptible Populations	
		<u> </u>			1 TOP OTHY				П		I	1	16. Pasteurized foods used; prohibited food not offered	
					Approved Sou	urce					~		Pasteurized eggs used when required All precooked	
					7. Food and ice obtained from appr	roved source; Food	l in						All precooked	
	/				good condition, safe, and unadulter	rated; parasite							Chemicals	
					destruction Commercial									
	_				8. Food Received at proper temper	rature					/		17. Food additives; approved and properly stored; Washing Fruit & Vegetables	S
					To check			_					Nowashing	
					Protection from Con	tamination			·	/			18. Toxic substances properly identified, stored and used	
					9. Food Separated & protected, pre- preparation, storage, display, and to		d						Water/ Plumbing	
	/				10. Food contact surfaces and Retu Sanitized at <u>200</u> ppm/tempe		and	١,	W				19. Water from approved source; Plumbing installed; proper backflow device	
	•								٧,			ļ.,	See attached / one small leaky faucet owner is repairi	ng
					11. Proper disposition of returned, reconditioned	previously served	or			/			20. Approved Sewage/Wastewater Disposal System, proper disposal	
							(2 Dainte		7 4	D	<u> </u>	<u> </u>	. A .: '11' 10 I	
0	I	N I	N	C		ındation Items	(2 Points	_		ons Re	_	Cor	rrective Action within 10 days	R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Arvindkumar Patel	Print:	Title: Person In Charge/ Owner OWNEr
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: ven 34011	Physical A		City/State: Rockwa		License/Permit # FS 8850	Page	<u>2</u> of <u>2</u>			
7 0.0	VO. 10 10 11	1401411	TEMPERATURE OBSERVAT								
Item/Loc	cation	Temp F	<u>Item/Location</u>	Temp F	Item/Loca			Temp 1			
Wic		23/32	Pizza unit	40	Sandwich warme		ner				
	Milk area	40/41	Rollers		Kolad	hes / sandw	sandwich				
	Freezer	-16	154/156/145/135	5	Wing unit						
San	dwich wall unit	32/34	Taquitos		136/148						
Ice cr	ream deep freezer	-23	145/45/154/156		Upright freezer			-4			
	Chili	142 Back up coole									
Cold top unit		34	Kolaches unit	39							
	Pico	•									
	1 100		SERVATIONS AND CORRECTIV	-2 VE ACTION	NS						
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND										
	NOTED BELOW: all temps F Keep an eye on dumpster										
			en - watch and address								
45/42		<u>'</u>	eded in wic and itself shelv	ing too							
45	Clean floor in wic and										
	Ice bag unit - clean an	d addres	s broken bags etc / also cle	an inside	ice crea	ım freezer					
40	Protect coffee filters										
45	Fill small holes in wall	in restro	om where needed also var	ious plac	es in FR	Р					
	Pizza unit is frozen up - temp is rising / defrosted										
	Hot water 120										
W	Small leak at faucet in front area										
	Reminder to date mark when opening hot dogs if not using bag within 24 hrs										
	Sink sanitizer 200 ppm										
47 Watch clutter in back room											
W	Watch floor storage in back room that might not allow for cleaning										
42/45	Tongs for self service are replaced every 4 hrs or less										
42/43											
45	Allergy posting on pastry unit Clean air vents where needed										
	·										
	Using peroxide for customer area and quats for food contact										
Received by: Print: Title: Person In											
(signature)		e				Title: Person In Charge/	owner				
Inspected (signature)		ملاء خوا	Print:								
	6 (Revised 09-2015)	uruk	/ N.S			Samples: Y N #	collecte	ed			