Followup Fee of																		
\$50.00 after Retail Food Establishment Inspection Report Image: First aid kit First Followup Image: Allergy policy Vomit clean up																		
·									ity of Rockwall					vall Vomit clean up Employee health				
Date: Time in: Time out: License/Pe							ermit	#					CPFM Food handlers D 1 c 2					
	7/10/24 12:20 1:17 FS-88 Purpose of Inspection: 1:Routine 2-Follow Up 3-Complai							ITur	atia	ation								
Establishment Name: Contact/Owner Na						10	ne: XNumber of Repeat Violatio					5-CO/Construction 6-Other TOTAL/SCOR Number of Repeat Violations: Number of Violations COS:	E.					
7 - Eleven North #34011 Arvind Patel Physical Address: Pest control: Physical Address: Pest control: Physical Address: Pest control: Pest control: Physical Address: Physical Ad								Hood Grease trap :/ waste oil					se trap :/ waste oil Follow-up: Yes 4/96/A	•				
N = in compliance													1					
Mark the appropriate points in the OUT box for each numbered item Mark '√' a checkmark in appropriate box for IN, NO, NA, COS Mark an × in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																		
Compliance Status						R		Comp O I	Ν	Ν	С		R					
U T	N	0	A	s	(F = degrees Fahrenheit) 1. Proper cooling time and temperature					U N T	0	A	O S	Employee Health 12. Management, food employees and conditional employees;				
			~		No leftovers					~	,			knowledge, responsibilities, and reporting				
	~				2. Proper Cold Holding See							13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth						
	~				3. Proper Hot Holding t See	★		<u> </u>				Preventing Contamination by Hands						
		~			4. Proper cooking time	*				~	'			14. Hands cleaned and properly washed/ Gloves used properly				
		~			5. Proper reheating proc Hours)	cedure for hot holding (165°F in 2			~	,			15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_N_) Gloves				
	~				6. Time as a Public Hea	alth Control; procedures	& records							Highly Susceptible Populations				
					Approved Source					~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	_			
	~	7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction7-Eleven Dist.										,	Chemicals					
	~				8. Food Received at proper temperature Checking				T	~	,			17. Food additives; approved and properly stored; Washing Fruits & Vegetables				
	I _ I		Protection from Contamination							~	'			18. Toxic substances properly identified, stored and used				
	~				9. Food Separated & pr preparation, storage, dis							Water/ Plumbing						
3				~	10. Food contact surfac Sanitized at 200		Γ	~	,			19. Water from approved source; Plumbing installed; proper backflow device City approved						
	~				11. Proper disposition of returned, previously served or reconditioned Discard					~	,			20. Approved Sewage/Wastewater Disposal System, proper disposal				
	Priority Foundation Items (2 Poi					_	_	_	_	_		•						
O U T	I N	I N N A O N O A O S Demonstration of Knowledge/ Personnel					R	1	O I U N T	N O	N A	C O S	Food Temperature Control/ Identification	R				
	~				21. Person in charge pro and perform duties/ Cer 1					~	,			27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature No leftovers				
	~	22. Food Handler/ no unauthorized persons/ personnel						~	'			28. Proper Date Marking and disposition Good date labels						
					Safe Water, Reco			~				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Digital thermo, strips current						
					23. Hot and Cold Water available; adequate pressure, safe 112 , good pressure									Permit Requirement, Prerequisite for Operation				
	~		24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled Commercial							~				30. Food Establishment Permit/Inspection Current/ insp posted Posted and current				
			 			with Approved Proced		Ħ	þ			ı	ـــــــــــــــــــــــــــــــــــــ	Utensils, Equipment, and Vending 31. Adequate handwashing facilities: Accessible and properly				
	~				HACCP plan; Variance processing methods; ma	obtained for specialize anufacturer instructions	d			~	,			supplied, used Equipped				
					Temps taken Cons	<u>3X QAIIY</u> sumer Advisory		$\left \right $	┢	~	,			32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used				
foods (Disclo						sumer Advisories; raw or under cooked Reminder/Buffet Plate)/ Allergen Label n pastry door				~	,			33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided Equipped				
0	Ι	N	N	С				Actio	(0 I	Ν	Ν	С		R			
U T	N	0	A	0 S	Prevention 34. No Evidence of Inse	of Food Contamination				U N T	0	A	O S	Food Identification 41.Original container labeling (Bulk Food)				
┝	~ ~				animals 35. Personal Cleanlines			+		~				Physical Facilities				
╞─	~			36. Wiping Cloths; properly used and stored Using spray bottle				+	$\left \right $	~	·			42. Non-Food Contact surfaces clean				
╞	- -				37. Environmental cont			+	┢	~	'			43. Adequate ventilation and lighting; designated areas used				
F	~				38. Approved thawing a Refrigerator	method		\square	F	~	·			44. Garbage and Refuse properly disposed; facilities maintained				
					Ргоре	er Use of Utensils				~	'			45. Physical facilities installed, maintained, and clean				
1					39. Utensils, equipment dried, & handled/ In us					~	'			46. Toilet Facilities; properly constructed, supplied, and clean Stocked	_			
	~				40. Single-service & sin and used	ngle-use articles; proper	ticles; properly stored					~		47. Other Violations N/a				
L								⊥⊥⊥			1	1	1					

Retail Food Establishment Inspection Report

City of Rockwall

Received by:	Print:	Title: Person In Charge/ Owner
(signature) Arvind Patel	Arvind Patel	Owner
Inspected by: (signature) Richard Hill	Print:Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: ven North	Physical A 3250	North Goliad	^{City/State:}	, Tx	License/Permit # FS-8850	Page	<u>2</u> of <u>2</u>				
Item/Loc	ation	Тетр	TEMPERATURE OBSERVA'	1	Itom/Looot	m/L continu		Temp				
	4,27,28,31	Temp		Temp	Item/Location			-				
WIO , C	7,27,20,01		Cold brew	40	Tacoa	co&chz/steak&chz		155/162				
N	lilk/coffee station	40	Pico	40	Hot holding							
Glas	s Ice merchandiser	26	Amb underneath pico	38	Breaded/buffalo wings		ngs	155/151				
	Glass Freezer	22	Chili/nacho cheese	141/14				146/139				
	Cold wall	38-40	UC cooler amb	40	Pizza UC fridge		е	37				
	Mini melts	-2.1	Reach in freezer htt	10	Back freezer			14				
l	cecream freezer	16	Roller grills 138-158									
Мс	cha/french vanilla	39	Hot dog/buffalo chicke									
Item			SERVATIONS AND CORRECTI									
Number	AN INSPECTION OF YOUR ES NOTED BELOW: all temperature		ENT HAS BEEN MADE. YOUR ATTEN' F	TION IS DIRE	CTED TO TH	E CONDITIONS OBSERV	ED AN	1D				
	Restrooms equipped, temp greater than 101 in each room											
		•	out store, temp greater the	an 103								
	3 comp sink not set up, 112, quat sani 200ppm											
	Soda nozzles are clea		, ,									
	Allergen label on don	<u> </u>	•									
10cos			sages and chicken broth c	ans on s	helf, disc	arded during ins	pect	ion				
	Strips current, gloves		touch Rte toods									
	Using digital thermo of		alaanad aftar ayamu yaa									
	Pizza slicer, spatula and tongs cleaned after every use											
	Roller grill tongs cleaned every 4 hours or as needed											
	Hot food held for 2 hours at max then decarded											
	Roller grill items held no more than 4 hours then discarded No leftovers, all food discarded same day											
				site to des	sire temp	according to man	f dire	ections				
All food arrives frozen and fully cooked, rethermalized onsite to desire temp according to manf di and hold held at 135 or higher												
39 Best practice to hang mop head over mop sink vs storing in bucket when not in use												
		•	or in kitchen, water turned									
Received	by:		Print:			Title: Person In Charge/	Owner					
(signature)	<u>See abov</u>	'e	See ab	ove								
Inspected (signature)		ST	(Richard	Hill		Samples: Y N #	collecte	ed				
Form EH-06	5 (Revised 09-2015)											