## **Retail Food Establishment Inspection Report**

First aid kit

Allergy policy

Vomit clean up

Employee health

					Time in: 2:40		Time out: 4:04		FOO	D5	<u>01</u>					Est. Type Risk Cat		Page 1	
Esta	ablis	shm	ent i	Nan		outine _	2-Follow l		3-Compla ct/Owner N		4-I	nves	stiga	tion		<b>5-CO/Construction</b> 6-Ot * Number of Repeat Violations:		TOTAL/SO	CORE
Bra	aur	m's	s #	17						-	**					✓ Number of Violations COS:		4/96	:/Δ
182	sica 0 (	al Ad Gola	aid aid	Rc	ckwall, TX		Ed	est contro colab/m	onthly		Hoo Hydro-		/6mo	Va	ease lley	rtrap : Follow-up:	: Yes	7/50	'// \
Mar	<b>(</b> k th	C <b>om</b> j	plia:	nce S	Status: Out	= not in cor	mpliance IN = ir	n compliand	ce Mark '	0 = not  c						plicable $COS = corrected on site R = x for IN, NO, NA, COS$ Mark an in a	repeat viol	ation W-W	Vatch
					points in the O						re Im	med	iate	Corr	recti	ve Action not to exceed 3 days	ирргорими	00.101 1	
0	Î	nce N O	N	C O	Time	e and Tem	perature for F	Food Safet	ty	R	O U	mpli I N	N O	Stat N A	С	Elana Walt	41.		R
U T	N	U	A	s	1 Proper coo	,	egrees Fahrenho and temperature				T	N	-	A	O S	Employee Healt  12. Management, food employees and co		employees:	
	~				1. I Toper coc	ning time a	ma temperature	C				~				knowledge, responsibilities, and reporting		imployees,	
	/				2. Proper Col	d Holding	temperature(41	1°F/ 45°F)	1			.,				13. Proper use of restriction and exclusion eyes, nose, and mouth	on; No disc	harge from	
Ш					2 Droper He	t Holding t	emperature(135	5°E)								eyes, nose, and moun			
	/											-				Preventing Contamination			
	~						and temperatur		(50E: 0	-		~				14. Hands cleaned and properly washed/gloves used			
	~				Hours)	eating proc	cedure for hot h	iolding (16	55°F in 2			~				15. No bare hand contact with ready to ea alternate method properly followed (API	at 100ds or PROVED	Y <sub>.</sub> N <sub>.</sub> .)	,
H	/				6. Time as a	Public Hea	lth Control; pro	ocedures &	& records							Highly Susceptible Pop	pulations		
																16. Pasteurized foods used; prohibited foo		ered	
							proved Source									Pasteurized eggs used when required eggs cooked			
Ш.							d from approve d unadulterated									Chemicals			
						corpor										Chemicais			
						_	per temperatur	e								17. Food additives; approved and properl & Vegetables	ly stored; V	Washing Fruit	ts
					check a		from Contam	nination				~				water only 18. Toxic substances properly identified,	, stored and	l used	_
П		1					otected, preven		food										
	<b>/</b>				preparation,	storage, dis	play, and tastin	ng								Water/ Plumbin	ng		
,	/						es and Returnal ppm/temperatu		ned and			~			1	19. Water from approved source; Plumbi backflow device	ing installe	d; proper	
,	/				11. Proper di reconditioned	sposition o	of returned, prev	viously ser	rved or			~				20. Approved Sewage/Wastewater Dispodisposal	osal Systen	n, proper	
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						Pric	ority Found	ation Ite	ems (2 Po	ints) v	iolati	ons .	кеці	uire	Cor	rective Action within 10 days			
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## **Retail Food Establishment Inspection Report**

Received by: (signature) Kyle Rutledge	Kyle Rutledge	Title: Person In Charge/ Owner Manager
Inspected by: Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: M's #175	Physical A		City/State: Rockwa	ıll TX	License/Permit # Pag FOOD5018	ge <u>2</u> of <u>2</u>				
Diau	1110 11 11 0	1020	TEMPERATURE OBSERVAT		, 173	1 0 0 0 0 10					
Item/Loc		Temp F	Item/Location	Temp F	Item/Loca	tion	Temp F				
	n freezer by mbient	10	under counter cooler ambient	27	ice cream freezers		-2 to 6				
hamb	urger freezer ambient	-2	yogurt mix	41	nove	Ity wall ambient	-3				
hot ho	lding drawers/hamburger	162	cold wells/whipped topping	41/42	fruit a	and veggie wall	28				
chi	icken breast	141	front ice cream freezers	2-10	frozen meal bunk		er -2				
hot	pots/chili/gravy	163/171	under counter cooler ambient	38	fresh	32					
hot ho	olding wall unit/to go gravy	154	WIC/liquid egg	40	ice cream pie wall		-2				
•	Shake mix	35	freezer unit inside WIC ambient	-3							
back id	ce cream freezer/ambient	7	milk and egg								
		-	SERVATIONS AND CORRECTIVE	E ACTION	NS						
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND										
	Front hand sink with soap and paper towels. Post employee health poster at hand sink.										
	3 comp sink 119 F with sani sink setup to 100 ppm chlorine sanitizer										
	Sani buckets setup to 100 ppm chlorine sanitizer										
45	Replace caulking behind 3 comp sink where moldy										
39	Store spatulas clea	n by har	mburger station and WR	S at lea	st ever	y 4 hours					
	Condiment station/TCS foods discarded 4 hours. Documented times on white board to discard. TPHC										
	Shake machines ar	nd nozzl	es sanitized hourly. Wa	itch for l	ouildup						
39	Store shake machines clean										
	Ice cream cones handled with napkins when serving										
	Running dipper wells for ice cream scoops										
	Front hand sink 117 F										
34	Some flies										
	Sleeved straws										
42	Some minor cleaning ne	eded ins	ide /outside of ice cream free	zers wher	e there is	s some mold buildup					
45	5 to Clean under yogurt machine and under equipment										
45	to Clean floors throughout/ some food debris										
	Valley Proteins removes spent grease as well										
42	To clean in/around/on equipment especially around flat top										
	RR sinks 100F with soap and paper towels										
Received	l by:		Print:			Title: Person In Charge/ Own	er				
(cianatura)	· .			tled	ge	Manager					
Inspecte (signature)	Kyle Rutledge  d by:  Chvisty Cov	t-0-	Print:			<u>J</u> -					
Form EH-0	Cruisiy Cor	rez, 1	RS Christy Co	riez,	K5	Samples: Y N # colle	cted				