Follow-up fee of \$50.00 is 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

	ite: 3/29	9/2	n:	23	Time in: 12:03	Time out: 1:54	:	License/P							Food Manage	Food Handlers	Page 1 of	2
					tion: 1-Routine	2-Follo	w Up	3-Compla		_	Inve	stiga	tion	ı [5-CO/Construction	6-Other	TOTAL/SCO	ORE
Es	tablis	hmei	nt N	Vam	ne:		Conta	act/Owner l	Name:					_	★ Number of Repeat Violations C			
_	vsica				mer ridge		Pest contro	Wilkerso)[] 	Но	od		G	reas	e trap / waste oil :	Follow-up: Yes	14/86	/B
302	0 rid						Ecolab 06/1			3/20			L		earth 4/5/23 1500	No 🗌		
Ma					tatus: Out = not in con points in the OUT box for o	npliance "" each number	red item	Mark	$\mathbf{O} = \text{not } \mathbf{o}$ $\mathbf{I} \text{ in ap}$			NA ox fo	\ = n or IN	ot ap	plicable COS = corrected on Ma	site \mathbf{R} = repeat vio	olation W-Wa ate box for R	tch
C	12.	C	14-4	[Prior	rity Items	(3 Points)) violations	Requi	_	<i>ımed</i> ompli				ive Action not to exceed 3 da	tys		
O U		N I	N A	C O	Time and Tem			ety	R	O		N O	N A	C O	Emp	lovee Health		R
Т				S	(F = de	egrees Fahre and temperat				T				S	12. Management, food employ	·	employees;	
	~				Discussed	•					~				knowledge, responsibilities, a			
	_				2. Proper Cold Holding	temperature	(41°F/ 45°F))			/				13. Proper use of restriction a eyes, nose, and mouth	and exclusion; No disc	charge from	
			_		3. Proper Hot Holding to	emperature((135°F)		\square						Poster at all handsink			
	~		_		See 4. Proper cooking time a				Ш						Preventing Con 14. Hands cleaned and prope	ntamination by Han		
	•							650E: 0	Ш		′					•		\bot
		/			5. Proper reheating procedures)	edure for no	ot notding (16	65°F in 2				/			15. No bare hand contact with alternate method properly foll			
			/		6. Time as a Public Heal	lth Control;	procedures	& records	+						Gloves Highly Susc	eptible Populations		
					Not allowed hsp group										16. Pasteurized foods used; pr	• •		
					Арр	proved Sou	rce				•				Pasteurized eggs used when re Yes using	required		
					7. Food and ice obtained good condition, safe, and	d unadultera										g • 1		
					destruction Us foods	s									C	Chemicals		
	1				8. Food Received at prop		iture								17. Food additives; approved & Vegetables	and properly stored;	Washing Fruits	
					To check temps	S			Н		1				Using veggie was 18. Toxic substances properly	sh within range identified stored an	ge	_
					9. Food Separated & pro			a food			•				Watch storage	y identified, stored an	u useu	
	~				preparation, storage, dis			g 100 u							Wate	er/ Plumbing		
	/				10. Food contact surface Sanitized at 200 p	es and Retur	rnables ; Clea	aned and		W				+	19. Water from approved sour backflow device Plumbing approve	-		
					11. Proper disposition of	f returned, p			\dagger		. /			İ	20. Approved Sewage/Waster disposal	water Disposal Syster	m, proper	+
		/			reconditioned Disca	arded									Watch drains			
Ш				_			T .4 T.	(2.7)	<u> </u>			_						
0			N	C	Prio	ority Four			oints) v	О	I	N	N	C	rective Action within 10 days			R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Tiffy Wilkerson	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Brook	nent Name: Kdale summer ridge	Physical Address: Ridge road TEMPERATURE OBSER		City/State: Rockwa l	License/Permit # Fs 9123	Page <u>2</u> of					
	<u> </u>			TIONS							
Item/Loca		Temp F	Item/Location	Temp F	Item/Location	<u>Temp</u>					
Reside	ential cooler	33	Wic		Steamtable						
	Freezer	3	Chicken	37	Greens	179					
			Tomatoes	38	Beans	180					
	Wif	-10	Cooked pork	36	G beans	182					
Ground b	eef cooked for later on counter	138	Cooked turkey	38	Chicken	154-18					
(placed	back into steamer for dinner)		Mac n cheese	36	Veal	138					
Discusse	ed cooling quickly if needed		Hot dogs	37							
_		OF	SERVATIONS AND CORRECTIV	VE ACTION	NS						
Item Number	AN INSPECTION OF YOUR ES' NOTED BELOW: temps in F	TABLISHME	ENT HAS BEEN MADE. YOUR ATTENT	TION IS DIRE	CTED TO THE CONDITIONS OBSERV	VED AND					
31/cos	Front hand sink - need	soap - h	not water 120f/ sink is in poo	or condition	on						
45	Walls in this area to be	address	sed- chipped and cleaning								
	Fill holes in walls under soda station										
W	Milk to be date marked	d if not u	sed in 24 hrs								
	Hot water at hand sink	and thre	ee comp sink in kitchen 130								
42:32	Time to address wall b	ehind pr	erinse / clean and resilicone)							
32	Cart condition to addre	ess / wal	l behind cart too chipped								
W	Restroom - tlc - equipp	ed with	hot water soap and towels								
47	Shelving unit to be 6 inches from floor under chemicala near mop sink										
Quats is attached to hot water at three comp ? Poster indicates to test at -65f -75f											
47	Dry storage side close	t - addre	ss floor storage and also de	ented car	า						
32	Dry storage - popcorn	ceiling -	not washable								
10	To close up rice in dry	storage	- transfer to plastic with lid								
34	Watch bananas and d	iscard w	nen needed to prevent fruit	flies							
42/45	Minor cleaning in dry s	torage -	shelving and under / keep a	an eye on	wall						
37	Wif - frost and ice in re	ar to add	dress and clean								
W	Best to store raw froze	en chicke	en below whipped cream - ir	n case of	a thaw out						
39	Need to address ASAP THE LEAK UNDER THE STEAM TABLE										
	Using gloves and utensils										
42/45											
42	To clean outsides of w	hite dry (goods containers								
42	Need to clean rack und	der hood	in back								
W	Moved sausages just	prepped	to side shelf to vent them n	ot under	the condenser						
42/45											
29	Reminder to test Dishmachine before use- test strips out of date										
10/33	Dishmachine not dispen	sing sani	tizer - to address asap and us	e three co	mpartment sink for sanitizing	at 200 ppn					
32/45 Make the needed repairs to floors / walls ceilings where needed											
W	Avoid shared condime	nts on ta									
Received (signature)	See abov	e	Print:		Title: Person In Charge/	Owner					
Inspected (signature)	See abov Kelly kirkpa	tríck	Print:		Samples: Y N #						