\$50.00 reinspection fee required after 1st Followup

Retail Food Establishment Inspection Report City of Rockwall

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

				License/Pe	Permit # 9440					Food handler	Page <u>1</u> of <u>2</u>				
	Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain		_		Investi	gati	on	5-CO/Construction	25 6-Other	TOTAL/SCORE					
Est	ablis	hment	Nan	ne:	Co	ontact/Owner N				8	011	* Number of Repeat Violat ✓ Number of Violations CO	tions:	101112,00012	
				illinary arts - crave		ody Hayes ontrol:		Нос	od		Grea		Follow-up: Yes	9/91/A	
	n kin	g blvd						Due			School		No 🗌		
Ma				Status: Out = not in c points in the OUT box for	ompliance in compore each numbered item	Mark	O = not ol I in app					oplicable COS = corrected on s O, NA, COS Mark	ite \mathbf{R} = repeat vio \mathbf{x} an \mathbf{v} in appropria	lation W-Watch ate box for R	
Cou	mnlia	nce St	atus	Prie	ority Items (3 Poin	nts) violations	Require	_	<i>media</i> omplia			ive Action not to exceed 3 day	s		
O U	U N O A O S Time and Temperature for Food Safety (F = degrees Fahrenheit)						R	O U	O I N N C U N O A O			Employee Health			
Т			S	Proper cooling time	,			Т			S	12. Management, food employ		employees;	
	•			•					\			knowledge, responsibilities, an	d reporting		
	/	2. Proper Cold Holding temperature(41°F/ 45°F) 3. Proper Hot Holding temperature(135°F)							/			13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth Posted at hand sinks			
												Preventing Contamination by Hands			
	3. Proper Hot Holding temperature(135°F) 4. Proper cooking time and temperature										14. Hands cleaned and properly washed/ Gloves used properly				
	5. Proper reheating procedure for hot holding (165°F in 2										Gloves 15. No bare hand contact with ready to eat foods or approved				
	Hours) 6 Time as a Public Health Control: procedures & records										alternate method properly followed (APPROVED Y. N.) Gloves				
	•			6. Time as a Public He Teaching this practice	ealth Control; procedur	res & records						0	ptible Populations		
				Aı	pproved Source				/			 Pasteurized foods used; pro Pasteurized eggs used when re 	quired		
I	T			7. Food and ice obtain	ed from approved sour	rce; Food in						Using regular eggs c	ooked thorou	ghly	
	/											Chemicals			
				1.	roper temperature						Τ	17. Food additives; approved a & Vegetables	nd properly stored;	Washing Fruits	
				Log								Water	identified stored on	ducad	
ı									/			Toxic substances properly identified, stored and used Stored in shelving unit			
	/			preparation, storage, d Good	lisplay, and tasting	C						Water	/ Plumbing		
3				10. Food contact surfa Sanitized at <u>Cos</u>	ces and Returnables ; 0 ppm/temperature	Cleaned and testing right every Time			~			19. Water from approved source backflow device	ce; Plumbing install	ed; proper	
	•	/		100 10		y served or			/			20. Approved Sewage/Wastew disposal	ater Disposal System	m, proper	
<u> </u>	_					1 Items (2 Poi	ints) vie	olati	ions R	equi	re Coi	rrective Action within 10 days			
О	T	N N	C				R	O U	I I	N N		Food Tomponatum		R	
U		O A	0	Demonstratio	on of Knowledge/ Pers	sonnel				, ,		roou remperature	Control/ Identific	ation	
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Cody Hayes	Print:	Title: Person In Charge/ Owner Chef
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: on CCA culinary arts	Physical A John I			ity/State: Rockwal	I	License/Permit # 9440	Page	2 of 2	
T. 67			TEMPERATURE OBSER	VATI		I				
Item/Loc	line 2 one drawer unit	Temp F	Item/Location		Temp F	Item/Locat		£., 4	<u>Temp</u>	
		37	Drink RIC 1 non 7	CS		Two door upright glass fron				
Crave line ColdTop unit		39	RIC 2		41	5	Salsa / dip		35/36	
Ur	nder counter	38	Wic			Line 2				
	Drawer unit	39.9	39.9 Tomatoes / but		36/38	B Drawer units				
Ur	nder counter	37	Bacon / sausa	ge	36/36		36/36/39			
Crav	e refrigeration		Chicken / cor		30/36	Cor	Competition wic			
	Unit 1/2	37/38	Wif		-16		tter / tomat		38/41	
	Unit 3/4	39/36					Wif		-2.8	
	Offic 5/4		SFRVATIONS AND CORREC	TIV	F ACTION	J S	V V 11		2.0	
Item	OBSERVATIONS AND CORRECTIVE ACTIONS AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND									
Number	NOTED BELOW: all temps F									
	Hot water 121 f plus									
10	Watch ice machine int							15	0 l-b-	
10	Checking sanitizer at three comp sink - not registering after 10 seconds but several minutes later showing on strip - replaced container / tested to be 150 per label									
	Restrooms equipped		,							
	Crave area : hot water 110 plus When using this area setting up Sani buckets for area									
42	 		white containers exterio	r						
- '-										
	Best practice to hang mops to allow to air dry Wif / wic good organization									
32/cos			hat is badly scored - co							
W	Toss wire basket where		•							
W	Keep an eye on the sr	nall plast	ic portioning containers							
45	General detailed clear	ning und	er equipment etc							
42/45										
	Competition upright cooler 35 grapes / butter 41									
W	Discussed quats binding soaking wiping cloth in solution first before placing into bucket									
10 /cos	Tested sink again to be under required as well as Sani bucket used - will hand mix for now									
	Cos to 200 ppm									
Received (signature)	by:		Print:				Title: Person In Charge/	Owner		
(signature)	See abov Kelly kirkpa	e/e								
Inspected (signature)	l by:		Print:							
(orginature)	Kelly kirkpa	ıtrick	/RS				Samples: Y N #	t collect	ed	
	5 (Revised 09-2015)		ı							