## **Retail Food Establishment Inspection Report**

First aid kit
Allergy policy
Vomit clean up
Employee health

	ite: /10	3/2	202	22	Time in: 12:05	Time out: <b>1:30</b>	FS-9							Est. Type Risk Category Page 1 of	2		
					tion: 1-Routine	2-Follow Up				Inve	stiga	ation	ı	5-CO/Construction 6-Other TOTAL/SCO	ORE		
		ishm pis		Nam	e:		Contact/Owner	Name:						* Number of Repeat Violations: ✓ Number of Violations COS:			
Ph	ysic	al A	ddre		ee Dr Rockwall, T		control : s Burger/mor	nthly	Ho 5m			G	reas	e trap : Follow-up: Yes 75gal/3mo Follow-up: Yes 75gal/3mo	/B		
		Com	ıpliaı	nce S	tatus: Out = not in cor	npliance IN = in co	ompliance	NO = not	٠		N/	-		oplicable COS = corrected on site R = repeat violation W-Wa	tch		
Ma	ark t	he ap	oprop	riate	points in the OUT box for	each numbered iten	n Mark							ox for IN, NO, NA, COS Mark an in appropriate box for R tive Action not to exceed 3 days			
Co	mpli I	iance N	e Sta	tus C	Time and Tem	perature for Foo	d Safaty	R	C	ompl	iance N		tus C		R		
U T	N	0	A	o s	(F = de)	grees Fahrenheit)			T		0	A	o s	Employee Health			
	~				1. Proper cooling time a	nd temperature				~				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting			
2					2. Proper Cold Holding	temperature(41°F/	7/45°F)			.,				Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	-		
3					3. Proper Hot Holding to	omnerature(135°F	7)			_				eyes, nose, and moun			
	~				4. Proper cooking time a		,			1				Preventing Contamination by Hands  14. Hands cleaned and properly washed/ Gloves used properly			
		~			5. Proper reheating proc		ling (165°F in 2	4		~				gloves used 15. No bare hand contact with ready to eat foods or approved			
		~			Hours)	edure for not note	mig (103 1 m 2			~				alternate method properly followed (APPROVED Y N.)			
	~				6. Time as a Public Heal	lth Control; proceed	dures & records							Highly Susceptible Populations			
					Apr	proved Source				~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required			
					7. Food and ice obtained from approved source; Food in									no eggs			
	~				good condition, safe, and destruction Fresh I	-	parasite							Chemicals			
					8. Food Received at pro					Ι				17. Food additives; approved and properly stored; Washing Fruits			
	~				check at recei	ipt				~				& Vegetables <b>water</b>			
						from Contamina			3					18. Toxic substances properly identified, stored and used			
	~				9. Food Separated & propreparation, storage, dis		during food							Water/ Plumbing			
W					10. Food contact surface Sanitized at _200_ p		s; Cleaned and			~				19. Water from approved source; Plumbing installed; proper backflow device			
H					11. Proper disposition of		usly served or							20. Approved Sewage/Wastewater Disposal System, proper	_		
	<b>'</b>				reconditioned disca	arded				~				disposal			
					Prio	ority Foundati	ion Items (2 P	ointe)	viola	tions	Req	uire	Cor	rrective Action within 10 days			
0	I	N	N	C			`	R	0	I	N	N	С		R		
O U T	I N	N O	N A	C O S		of Knowledge/ P	ersonnel	R		I N	_			Food Temperature Control/ Identification	R		
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## **Retail Food Establishment Inspection Report**

1st followup is free. Any additional followups will result in a \$50 fee.

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

Form EH-06 (Revised 09-2015)

-											
I -	ment Name:   <b>pisi's</b>	Physical A		City/State: Rockwa	II TY	License/Permit # FS-9141	Page <u>2</u> of <u>2</u>				
Carri	pisis	2113	TEMPERATURE OBSERVAT		III, 17	110-31-1					
Item/Loc	cation	Temp F	Item/Location	Temp F	Item/Loca	tion	Temp I				
3 doo	r reach in cooler		cream sauce	168							
р	asta/pasta	39/ 36	Pizza cold top/tomatoes	44							
	meatballs	42	sausage	45							
reac	ch in cooler/ham	36	ham	44							
coc	oked chicken	35	under/cooked chicken	61							
large	white freezer ambient	-5	cooked chicken	52							
small	white freezer ambient	-1	small cold top/cooked chicken	40							
hot	wells/meat sauce	168	pasta	41							
		OB	SERVATIONS AND CORRECTIV	E ACTION	NS						
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:										
	Back hand sink 100	)+F. Po	st employee health post	er at en	nployee	hand sink					
	3 comp sink 110+F										
33	Dishwasher not sanitizir	ng. Will h	ave to use 3 comp sink. CO	S when ch	nanged S	anitizer source/bu	cket				
	Sani from 3 comp sink 200 ppm quats										
W	Chemical storage over clean side of 3 comp sink. Avoid storage over, move so can't contaminate under										
45	Replace caulking behind 3 comp sink/moldy										
37	Best to store mops	hanging	to dry								
45											
	Back area more organized and clean										
39	-										
2	Pizza cold top not cold holding. Discarded TCS foods from overnight. Some food loaded an hour ago to be used within 4 hours/small amounts.										
	Large pizza cold top has had multiple issues with not cold holding. MUST fix permanently or replace										
32	Rusty shelves wher	e clean	dishes are stored								
32	Address pizza cutti	ng boar	d/scored and discolored								
45	Gasket on pizza cold top broken										
			store, frozen and recieve	d frozei	า. Tha	wed when nee	ded.				
45	Repair gap in wall r	near pizz	za oven.								
45 Repair baseboards/gaps/ missing grout/food debris											
42			quipment/in, around, on		ent and	d coolers					
	Sani bucket 200 ppm quats										
	Soda/tea nozzles WRS daily										
46	-										
	Pizza hand sink 100+F										
Received (signature)	\ •		Print:			Title: Person In Charge					
Inchests	Skyler I rott		Skyler 7	ıoll		Manage					
(signature)	Skyler Trott  d by:  Chvisty Cov	tez, 1	Christy Co	ortez,	RS	Samples: V M	# collected				
	6 (Revised 09-2015)					Samples: Y N	# COHECIEU				