| | Followup fee of | | | | | | | | | | | | | | | | | | | |
|---|---|-----------------|--|---|---|--|---------------|-----------|--------------------|-----------------|--|---|--|------------------|--|-----------------------------------|--|--|--|--|
| S50.00 after initial Retail Food Establishment Inspection Report | | | | | | | | | | | Allergy policy/trainin | ng | | | | | | | | |
| Followup City of | | | | | | | | y of l | Rockwall | | | | | | | Vomit clean up Employee health | | | | |
| Date: Time in: Time out: License/P | | | | | | | | | ermit # | | | | | | Food handlers Food managers | 2 | | | | |
| 10/10/2023 3:12 3:43 Fs 91 | | | | | | | | | | | _ | 2 2 Page <u>1</u> of <u>2</u> | | | | | | | | |
| Purpose of Inspection: I-Routine 2-Follow Up 3-Complation Establishment Name: Contact/Owner N | | | | | | | Vame | | -Inv | estig | atio | n | 5-CO/Construction 6-Other TOTAL/SCOF * Number of Repeat Violations: | ₹E | | | | | | |
| Carmonas Tacos Robert Carmo Physical Address: Pest control : | | | | | | | ona | Но | ood | | G | reas | ✓ Number of Violations COS: | 4 | | | | | | |
| 411 | 411 Chris Texas extreme 08/17/20 Compliance Status: Out = not in compliance IN = in compliance NO | | | | | | | | | Sel | | N | 4 | | 0 10:05/2023 40 gals No 🗹 COS | 1. | | | | |
| Compliance Status:Out = not in complianceNO = not observedNA = not applicableCOS = corrected on siteR = repeat violationNOMark the appropriate points in the OUT box for each numbered itemMark $$ in appropriate box for IN, NO, NA, COSMark an $$ in appropriate box forPriority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days | | | | | | | | | | | O , NA, COS Mark an v in appropriate box for R | n | | | | | | | | |
| | Compliance Status | | | | | | | R | _ | Comp | olianco N | | | | R | | | | | |
| U T | N | 0 | A | O S | (F = degrees Fahrenheit) | | | | | | J N | | A | O S | Employee Health | <u> </u> | | | | |
| | | ~ | | | 1. Proper cooling time and temperature No left overs | | | | | | ~ | | | | 12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting | ĺ | | | | |
| | ~ | | | | 2. Proper Cold Holding temperature(41°F/45°F) Confirmed | | | | | | ~ | • | | | 13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth | | | | | |
| | | < | | | 3. Proper Hot Holding temperature(135°F) To send pics | | | | | | <u> </u> | | | | Posted at hand sinks Preventing Contamination by Hands | - | | | | |
| | | \ | | | 4. Proper cooking time and temperature | | | | | | V | • | | | 14. Hands cleaned and properly washed/ Gloves used properly | | | | | |
| | | ~ | | | 5. Proper reheating procedure for hot holding (165°F in 2 Hours) | | | | | | | ~ | | | 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_N_) | | | | | |
| | | ~ | 6. Time as a Public Health Control; procedures & records | | | | | | _ | | 1 | 1 | | 1 | Highly Susceptible Populations | - | | | | |
| | | Approved Source | | | | | | | | | | | ~ | | 16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required None used | | | | | |
| | ~ | | | | 7. Food and ice obtained good condition, safe, a destruction Comme | | | | | | | Chemicals | | | | | | | | |
| | ~ | | | | 8. Food Received at pr To transport sa | | e | | | | ~ | • | | | 17. Food additives; approved and properly stored; Washing Fruits & Vegetables | | | | | |
| | | | | | Protection | | | | ~ | • | | | Water only 18. Toxic substances properly identified, stored and used Low | | | | | | | |
| | ~ | | | | 9. Food Separated & pr preparation, storage, di | bod | Π | | | Water/ Plumbing | | | | | | | | | | |
| | ~ | | | 10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>100</u> ppm/temperature | | | | | | | ~ | • | | | 19. Water from approved source; Plumbing installed; proper backflow device Inspected by city | | | | | |
| | 11. Proper disposition of returned, previously served or reconditioned Discarded | | | | | | ~ | • | | | 20. Approved Sewage/Wastewater Disposal System, proper disposal | | | | | | | | | |
| Priority Foundation Items (2 Poi | | | | | ints) | viola | tion | s Req | uire | e Cor | Approved by city rrective Action within 10 days | <u> </u> | | | | | | | | |
| O U T | I N | N O | N A | C O S | Demonstration | n of Knowledge | / Personne | l | R | | N | N O | N A | C O S | | R | | | | |
| | ~ | | | | 21. Person in charge pr and perform duties/ Ce 1 | | | | | | ~ | • | | | 27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature | | | | | |
| | 22. Food Handler/ no unauthorized persons/ personnel | | | | nnel | | | V | 1 | | | 28. Proper Date Marking and disposition Good | | | | | | | | |
| | | | | | Safe Water, Reco | Safe Water, Recordkeeping and Food Package Labeling | | | | | | • | | | 29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips | | | | | |
| | | | | | 23. Hot and Cold Wate | 0 | quate pressu | re, safe | | | 1 | | | | Confirmed Permit Requirement, Prerequisite for Operation | - | | | | |
| | | | ~ | | 24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled | | | | | | | • | | | 30. Food Establishment Permit (Current/ insp sign posted) | | | | | |
| _ | | | | | Conformance | with Approved | Procedure | s | | | <u> </u> | | | | Posted down stairs Utensils, Equipment, and Vending | - | | | | |
| | | | ~ | | 25. Compliance with V HACCP plan; Variance | e obtained for sp | ecialized | s, and | | | ~ | | | | 31. Adequate handwashing facilities: Accessible and properly supplied, used | | | | | |
| | | | Ĺ | | processing methods; m | nsumer Advisor | | | | | - | | | | Equipped both 32. Food and Non-food Contact surfaces cleanable, properly | | | | | |
| | | | | | 26. Posting of Consum | er Advisories: ra | aw or under | cooked | | 2 | | | | ~ | designed, constructed, and used Plates discarded 33. Warewashing Facilities; installed, maintained, used/ | | | | | |
| | ~ | | | | foods (Disclosure/Rem Ingredients by requ | ninder/Buffet Pla | ite)/ Allerge | n Label | | | | ~ | | | Service sink or curb cleaning facility provided | | | | | |
| 0 | I | N | N | С | Core Items (1 Point | nt) Violations | Require C | orrective | Actio | on No | | Exce N | ed 9 N | 0 Da C | ays or Next Inspection , Whichever Comes First | R | | | | |
| U T | N | 0 | A | O S | Prevention 34. No Evidence of Ins | of Food Contar | | thor | | U T | | 0 | A | O S | | | | | | |
| 1 | | | | | animals 35. Personal Cleanline: | | | | \square | | | ~ | | | 41.Original container labeling (Bulk Food) | | | | | |
| | / | | | | 36. Wiping Cloths; pro | 0. | 0 | | $\left - \right $ | | . / | • | | | Physical Facilities 42. Non-Food Contact surfaces clean | F | | | | |
| - | • | ~ | | | 37. Environmental con | | | | $\left \right $ | | v | , | | | Watch 43. Adequate ventilation and lighting; designated areas used | <u> </u> | | | | |
| - | | ~ | | | 38. Approved thawing Pull thaw in coo | method | | | $\left - \right $ | ┢ | • | • | _ | $\left \right $ | 44. Garbage and Refuse properly disposed; facilities maintained | ├ | | | | |
| | | * | | | | DIEF Der Use of Utens | ils | | | ┢ | V | • | | $\left \right $ | Watch 45. Physical facilities installed, maintained, and clean Watch | | | | | |
| | | | | | 39. Utensils, equipmen dried, & handled/ In u | nt, & linens; prop | berly used, s | tored, | | | ~ | | | | Watch 46. Toilet Facilities; properly constructed, supplied, and clean | | | | | |
| - | • | | | | 40. Single-service & si | | | tored | $\left \right $ | | | - | | | 47. Other Violations | \vdash | | | | |
| | ~ | | | | and used | | _ • | | | | | ~ | | | | | | | | |

Retail Food Establishment Inspection Report

City of Rockwall

| Robert Carmona | Print: | Title: Person In Charge/ Owner Owner |
|---|--------|---|
| Inspected by: (signature) Kelly kirkpatrick RS | Print: | Business Email: |

Form EH-06 (Revised 09-2015)

-

| | nent Name: Onas Tacos | Physical A 411 C | | City/State: Rockv | vall | | License/Permit # Fs 9173 | Page | 2 of 2 | | |
|-------------------------------------|---|---------------------|------------------------------|----------------------|------------------------|-------------|-----------------------------|------------|---------------|--|--|
| Cann | | 111.0 | TEMPERATURE OBSERVA | | | | 100110 | | | | |
| Item/Loc | ation | <u>Temp F</u> | Item/Location | Temp | <u>F</u> I | [tem/Locati | on | | <u>Temp F</u> | | |
| Deep | reezer | Na | Glass front coole | r 38 | 3 | | | | | | |
| Т | wo door ss | 38 | Tomatoes just placed into ur | it 42 | 2 | | | | | | |
| Two | door glass front | 27 | Sauce | 39 |) | | | | | | |
| Fre | ezer upstairs | 18 | | | | | | | | | |
| A | ll meat HTT | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| OBSERVATIONS AND CORRECTIVE ACTIONS | | | | | | | | | | | |
| Item Number | Item 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 at handsink 114 - new hand sink - no pull out faucet anymore | | | | | | | | | | |
| | Thermo located in warmest location in coolers | | | | | | | | | | |
| | Sanitizer bucket 100 ppm - test strips to test | | | | | | | | | | |
| | Gloves on site | | | | | | | | | | |
| | No food prep at insp | | | | | | | | | | |
| | Hood is cleaned by owner Vomit clean up posted for dining room | | | | | | | | | | |
| | Employee health poster posted at hand sinks | | | | | | | | | | |
| | Upstairs: area clean | | | | | | | | | | |
| | Hot water at hand sink / three comp 114/117 | | | | | | | | | | |
| | Plumbing approved by building insp | | | | | | | | | | |
| 34 | Fly observed upstairs | | | | | | | | | | |
| | Meat stored fly walk swim | | | | | | | | | | |
| | Digital thermo and test strips upstairs and downstairs | | | | | | | | | | |
| | Ice machine empty currently used on weekends | | | | | | | | | | |
| | Thawing raw meat in cooler | | | | | | | | | | |
| | Cooking meats to 200 F discussed cooking to 165 | | | | | | | | | | |
| | No left overs served | | | | | | | | | | |
| | Not serving beans or rice / tacos only | | | | | | | | | | |
| | Good date marking | | | | | | | | | | |
| 32/005 | Only working Friday and Saturday Keep and eye on your plates must buy NSF approved as they will with stand use! To discard those | | | | | | | | | | |
| 32/cos | | | | | | | | | | | |
| 02,000 | Reminder all equipment to be NSF approved / including tables / cutting on ss | | | | | | | | | | |
| | Dry storage looks a good | | | | | | | | | | |
| | Restroom - using bath tub as mop sink | | | | | | | | | | |
| | Hot water at hand sink 106 F / equipped | | | | | | | | | | |
| | Owner to send pics of | cooking | and hot holding again | | | | | | | | |
| Received (signature) | See abov | /e | Print: | | Title: Person In Charg | | | Owner | | | |
| Inspected (signature) | | ıtríck | \sqrt{RS} Print: | | | | Somelos V N | 4 oc11 · | .4 | | |
| | - • | | | | | | Samples: Y N # | # collecte | zu – | | |