

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

|                            |                         |                           |   |                            |                             |                           |
|----------------------------|-------------------------|---------------------------|---|----------------------------|-----------------------------|---------------------------|
| Date:<br><b>07/14/2021</b> | Time in:<br><b>8:51</b> | Time out:<br><b>10:01</b> | License/Permit #<br><b>FS 7438 ( to post 2021 )</b> | Est. Type<br><b>Buffet</b> | Risk Category<br><b>Med</b> | Page <u>1</u> of <u>2</u> |
|----------------------------|-------------------------|---------------------------|---|----------------------------|-----------------------------|---------------------------|

|  |                                      |                                      |  |  |                                  |                    |
|--|--------------------------------------|--------------------------------------|--|--|----------------------------------|--------------------|
| Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine | <input type="checkbox"/> 2-Follow Up | <input type="checkbox"/> 3-Complaint | <input type="checkbox"/> 4-Investigation | <input type="checkbox"/> 5-CO/Construction | <input type="checkbox"/> 6-Other | <b>TOTAL/SCORE</b> |
|--|--------------------------------------|--------------------------------------|--|--|----------------------------------|--------------------|

|  |                                       |                                      |                |
|--|---------------------------------------|--------------------------------------|----------------|
| Establishment Name:<br><b>Cici's pizza</b> | Contact/Owner Name:<br><b>Rodgers</b> | * Number of Repeat Violations: _____ | <b>14/86/B</b> |
| Physical Address:<br><b>479 I-30</b>       |                                       | ✓ Number of Violations COS: _____    |                |

|  |                        |   |   |
|--|------------------------|---|---|
| Pest control :<br><b>Massey 07/08/21</b> | Hood<br><b>June 21</b> | Grease trap :<br><b>07/06/21- stericycle 1000</b> | Follow-up: Yes <input checked="" type="checkbox"/><br>No <input type="checkbox"/> |
|--|------------------------|---|---|

**Compliance Status:** Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- Watch  
Mark the appropriate points in the OUT box for each numbered item Mark ✓ in appropriate box for IN, NO, NA, COS Mark an ✓ in appropriate box for R

**Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days**

| Compliance Status   |    |    |    |     |   | Compliance Status                        |    |    |    |     |   |
|---|----|----|----|-----|---|--|----|----|----|-----|---|
| OUT   | IN | NO | NA | COS | R | OUT                                      | IN | NO | NA | COS | R |
| <b>Time and Temperature for Food Safety</b><br>(F = degrees Fahrenheit) |    |    |    |     |   | <b>Employee Health</b>                   |    |    |    |     |   |
|   |    | ✓  |    |     |   | ✓  |    |    |    |     |   |
| 3   |    |    |    |     |   | ✓  |    |    |    |     |   |
|   |    | ✓  |    |     |   | <b>Preventing Contamination by Hands</b> |    |    |    |     |   |
|   |    | ✓  |    |     |   | ✓  |    |    |    |     |   |
|   |    | ✓  |    |     |   | ✓  |    |    |    |     |   |
|   |    | ✓  |    |     |   | <b>Highly Susceptible Populations</b>    |    |    |    |     |   |
|   |    | ✓  |    |     |   |  |    | ✓  |    |     |   |
|   | ✓  |    |    |     |   | <b>Chemicals</b>                         |    |    |    |     |   |
|   | ✓  |    |    |     |   | ✓  |    |    |    |     |   |
| <b>Protection from Contamination</b>                                    |    |    |    |     |   | ✓  |    |    |    |     |   |
| W   |    |    |    |     |   | <b>Water/ Plumbing</b>                   |    |    |    |     |   |
| 3   |    |    |    |     |   | ✓  |    |    |    |     |   |
|   |    | ✓  |    |     |   | ✓  |    |    |    |     |   |

**Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days**

| Compliance Status  |    |    |    |     |   | Compliance Status                                     |    |    |    |     |   |
|--|----|----|----|-----|---|---|----|----|----|-----|---|
| OUT  | IN | NO | NA | COS | R | OUT   | IN | NO | NA | COS | R |
| <b>Demonstration of Knowledge/ Personnel</b>               |    |    |    |     |   | <b>Food Temperature Control/ Identification</b>       |    |    |    |     |   |
|  | ✓  |    |    |     |   | W   |    |    |    |     |   |
|  |    |    |    |     |   | ✓   |    |    |    |     |   |
| <b>Safe Water, Recordkeeping and Food Package Labeling</b> |    |    |    |     |   | <b>Permit Requirement, Prerequisite for Operation</b> |    |    |    |     |   |
|  | ✓  |    |    |     |   | W   | ✓  |    |    |     |   |
|  |    |    | ✓  |     |   | <b>Utensils, Equipment, and Vending</b>               |    |    |    |     |   |
|  |    |    | ✓  |     |   | ✓   |    |    |    |     |   |
| <b>Consumer Advisory</b>                                   |    |    |    |     |   | 2   |    |    |    |     |   |
|  | ✓  |    |    |     |   | ✓   |    |    |    |     |   |

**Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First**

| Compliance Status                       |    |    |    |     |   | Compliance Status          |    |    |    |     |   |
|---|----|----|----|-----|---|----------------------------|----|----|----|-----|---|
| OUT                                     | IN | NO | NA | COS | R | OUT                        | IN | NO | NA | COS | R |
| <b>Prevention of Food Contamination</b> |    |    |    |     |   | <b>Food Identification</b> |    |    |    |     |   |
| 1                                       |    |    |    |     |   |                            | ✓  |    |    |     |   |
| 1                                       |    |    |    |     |   | <b>Physical Facilities</b> |    |    |    |     |   |
|   | ✓  |    |    |     |   | 1                          |    |    |    |     |   |
| 1                                       |    |    |    |     |   | W                          |    |    |    |     |   |
|   |    | ✓  |    |     |   | W                          |    |    |    |     |   |
| <b>Proper Use of Utensils</b>           |    |    |    |     |   | 1                          |    |    |    |     |   |
| 1                                       |    |    |    |     |   | ✓                          |    |    |    |     |   |
| W                                       |    |    |    |     |   |                            | ✓  |    |    |     |   |

## Retail Food Establishment Inspection Report

City of Rockwall

|  |        |   |
|--|--------|---|
| Received by:<br>(signature) <b>Micheal Lane</b>          | Print: | Title: Person In Charge/ Owner<br><b>GM</b> |
| Inspected by:<br>(signature) <i>Kelly Kirkpatrick RS</i> | Print: | Business Email:                             |

Form EH-06 (Revised 09-2015)

|  |                                       |                                |                                    |             |
|--|---------------------------------------|--------------------------------|------------------------------------|-------------|
| Establishment Name:<br><b>Cici's pizza</b> | Physical Address:<br><b>479 I -30</b> | City/State:<br><b>Rockwall</b> | License/Permit #<br><b>FS 7438</b> | Page 2 of 2 |
|--|---------------------------------------|--------------------------------|------------------------------------|-------------|

### TEMPERATURE OBSERVATIONS

| Item/Location             | Temp F       | Item/Location       | Temp F    | Item/Location                  | Temp F    |
|---------------------------|--------------|---------------------|-----------|--------------------------------|-----------|
| Salad bar below pasta     | <b>38</b>    | <b>Below</b>        |           | <b>Wic</b>                     | <b>36</b> |
| <b>Cut lettuce</b>        | <b>39</b>    | Unit frozen on left |           | <b>Spinach / Alfredo</b>       | <b>38</b> |
| <b>Pasta</b>              | <b>39</b>    | Wings on far right  | <b>48</b> | <b>Tomatoes</b>                | <b>38</b> |
| <b>Hot wells</b>          | <b>156</b>   | <b>Discarded</b>    |           | Large container of pasta salad | 40/41     |
| <b>Pizza table</b>        |              | <b>Pasta</b>        | <b>41</b> |                                |           |
| <b>Ham / pepp</b>         | <b>38/39</b> | <b>Beef</b>         | <b>41</b> | Warmer not on at insp          |           |
| <b>Beef</b>               | <b>38</b>    | <b>Chicken</b>      | <b>41</b> |                                |           |
| <b>Spinach and cheese</b> | <b>38</b>    |                     |           |                                |           |

### OBSERVATIONS AND CORRECTIVE ACTIONS

| Item Number | Description  |
|-------------|--|
|             | AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:                |
|             | Buffet reopened - utensils are replaced every 30 mins / new plate signage / plates inverted  |
|             | Both restrooms equipped - hot water 102-108  |
|             | Hot water at hand sink 101 F   |
| 42/45       | General cleaning of shelving under counter   |
| 42          | Detailed cleaning inside salad bar needed - also address standing water in unit - using dri dek to keep food containers out of it - good |
| 42/45       | Detailed cleaning under around and behind equipment and inside too!!!  |
| 42          | Clean shelving under dri dek material where needed and dri dek too   |
| 42          | Clean green metal shelving -   |
| 03          | Pizza table is frozen up and over stocked holding borderline and high temps on rt side - discarded wings at 48                           |
| 42          | Clean inside unit / and will monitor temps   |
| 45          | Scrub walls behind prep table and table itself - clean outside of flour container and spills   |
| 45          | Walls to be scrubbed   |
| 32/10       | Need to replace / clean / address painted metal panels in hood over pizza oven /   |
| <b>!!</b>   | A portion of these panels are over the conveyor portion where pizzas are going into and out of the unit                                  |
| 42/10       | Clean pizza oven too   |
| 34          | Fruit flies observed in kitchen  |
| 45          | Need to seal cove base where food is accumulated to prevent in future  |
| 45          | Clean floors, walls, ceilings where needed!  |
| 10          | Store can opener clean / store mixer clean /   |
| 42/45/32    | Wic - clean shelving , floorings walls etc / food containers / spills / address rusty shelving   |
| W           | Reminder to date mark pasta salad  |
| 32/39       | Address rusty shelving under clean dishes  |
| 39/47       | Organize shelving in middle of kitchen!  |
| 10          | Clean inside ice machine - minimal deflector panel - can't see ceiling inside as too full  |
| 32          | Replace badly coated pans were needed  |
| 32/45       | Flooring chipped and cracked various to address / smallHoles in walls various to address   |
| 42/45       | Clean behind three comp sink / clean drains / protect them too/ also clean on top of dishmachine as around mop sink                      |
| 45          | Remove tape from air vents in pizza prep area  |

|  |        |                                |
|--|--------|--------------------------------|
| Received by:<br>(signature) <b>See above</b>             | Print: | Title: Person In Charge/ Owner |
| Inspected by:<br>(signature) <i>Kelly Kirkpatrick RS</i> | Print: | Samples: Y N # collected       |

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