

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: 08/10/2021	Time in: 2:52	Time out: 4:08	License/Permit # Food 7778	Est. Type Conv	Risk Category Low	Page <u>1</u> of <u>2</u>
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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	TOTAL/SCORE
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Establishment Name: Cinemark 14 Rockwall movies	Contact/Owner Name: Cinemark	* Number of Repeat Violations: _____	5/95/A
		✓ Number of Violations COS: _____	

Physical Address: Summer	Pest control : Terminix monthly	Hood	Grease trap : Les 08/05/2021 1000	Follow-up: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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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
Time and Temperature for Food Safety (F = degrees Fahrenheit)						Employee Health					
		✓				✓					
	✓					✓					
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Pam Jackson	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) <i>Kelly Kirkpatrick RS</i>	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: Cinemark 14 Rockwall movies	Physical Address: Summer lee	City/State: Rockwall	License/Permit # FS 7778	Page 2 of 2
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TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
Hot dogs in slides (using 4 hrs from cooking)	161/170	Hot dog rollers		Upright freezer in back	-11
Internal	135	179- 181		Upright cooler in back	34/36
Bar cooler	34	Ice cream freezer	-2		
Pizza Hut make	36	Upright Pizza Hut	32		
No Tcs foods		Upright 2	33		
Upright cooler	33	Wic	28/34		
Cheese	40	Hot dogs	41		
Freezer	-9	Wif	-17		

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Observation/Action
	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
	Hot water at hand sink 134 in bar
	Three comp- 200 ppm
	Sanitizer bucket 200 pom
42	Minor cleaning inside cabinets etc
	Keg spouts are plugged at night
	Frozen Drink unit -cleaning drains and dispenser daily
42	Clean inside upright cooler
	Atkins thermocouple
42	Minor cleaning of spills in coolers and etc.
37	Time to defrost small Ice cream freezer
42	Clean inside cabinets where needed various
	Sink sanitizer 200 ppm
	Hot water 130
	Not using Dishmachine - using three comp
W	Watch mop storage - hang to dry
	Store wiping cloths in solution. - Ex red one on chemical rack
	Opened bags of chicken best to tie up - precooked
	Date marking 6 out
	Keg wic 32
47	One fan not turning in wif and ice on back of unit -
	Gloves and tongs and scoops
	Candy room - looks good
45	Clean floor under Ice machine
	Hot water in restrooms 101-105
	No pizzas except designated days
40	Store boats for hot dogs in back storage room inverted

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

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