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
Employee health

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	ate: <b>2</b> /0	ሰሩ	2/2	1		Time out: 10:33	FS 92						Est. Type Risk Category Page 1 of 2	2_
					tion: 1-Routine	2-Follow Up			14.1	r	4.		CON LOW	
	<b>irpo</b> tabli						3-Complaintact/Owner N		4-1	Invest	igatio	on	* Number of Repeat Violations:	Œ
					npany IIc	Nat							V Number of Violations COS:	R
	ysic Ru		Addre	ess:		Pest cont To provide	9		Hoo Na	od		Greas o prov	se trup .	ט
					Status: Out = not in com	pliance IN = in compli	ance NO	O = not c					pplicable $COS = corrected on site$ $R = repeat violation$ W-Watcl	h
Ma	ark tl	he ap	pprop	oriate	points in the OUT box for ea	ach numbered item	Mark •						D, NA, COS Mark an √in appropriate box for R  tive Action not to exceed 3 days	
Co	mpli				111011	tty Items (5 I om	s) riounons		Co	omplia	nce St	atus	ure rection not to execut 5 days	
U	N N	N O		CO		erature for Food Sa grees Fahrenheit)	fety	R	U		N N O A	0	Employee Health	R
Т		_		S	1. Proper cooling time and	<u> </u>			Т			S	12. Management, food employees and conditional employees;	
										<b>/</b>			knowledge, responsibilities, and reporting	
3					2. Proper Cold Holding to Egg unit / wic (	emperature(41°F/ 45°	F)						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
٥					,	•	1000)						eyes, nose, and moun	
		<b>/</b>			3. Proper Hot Holding ter								Preventing Contamination by Hands	
		/			4. Proper cooking time an	nd temperature			w	<b>✓</b>			14. Hands cleaned and properly washed/ Gloves used properly See 23 / no prep at this time	
					5. Proper reheating proced Hours)	dure for hot holding (	(165°F in 2			/			15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N )	
					,		0 1						Gloves	
		<b>✓</b>			6. Time as a Public Health	n Control; procedures	s & records						Highly Susceptible Populations	
					Appr	roved Source							16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
					7. Food and ice obtained	from approved source	e: Food in				Ľ			
w	/				good condition, safe, and	unadulterated; parasi							Chemicals	
					destruction Providing									
	~				8. Food Received at proportion Check	er temperature					-		17. Food additives; approved and properly stored; Washing Fruits & Vegetables	
						rom Contamination				<b>/</b>			18. Toxic substances properly identified, stored and used Low	
	/				<ol><li>Food Separated &amp; protein preparation, storage, disp.</li></ol>		ng food						Water/ Plumbing	
					Moved eggs to bottom  10. Food contact surfaces	and Returnables : Cl	eaned and						19. Water from approved source; Plumbing installed; proper	
	/				Sanitized at Na pp	pm/temperature			w				backflow device Need hot water see below / address drain to ice	
					11. Proper disposition of reconditioned	returned, previously s	served or						20. Approved Sewage/Wastewater Disposal System, proper	
		V			reconditioned					~			disposal	
								$oldsymbol{\sqcup}$	$ldsymbol{\sqcup}$	_				
0	I	N	N	С	Prior	rity Foundation l	Items (2 Po		_			_	rrective Action within 10 days	R
O U T	I N	N O	N A	C O S		rity Foundation l	•	ints) v	iolati O U T		equir N N O A	C	·	R
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## **Retail Food Establishment Inspection Report**

## City of Rockwall

Received by: Chad Lehew	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: ert ice company	Physical A		City/State: Rockwa	 .ll	License/Permit # 9291	Page 2 of 2				
COIDC	or 100 company	713 7	TEMPERATURE OBSERVA		.11	0201					
Item/Loc	ation	Temp F	Item/Location	Temp F	Item/Loca	tion	Temp				
Uprigh	nt cooler glass front	45/46	Upright bottle coole	r 33							
Whole	eProduce and eggs		Wic								
Мо	ved hot dogs		45/46/47								
	Coke unit	40									
Sand	wich cooler barely	41	Blue bell unit	-27							
	Freezer 1	-28									
	Freezer 2	-22									
Item			SERVATIONS AND CORRECTI								
Number	AN INSPECTION OF YOUR ES	TABLISHME	NT HAS BEEN MADE. YOUR ATTEN	TION IS DIRE	ЕСТЕР ТО Т	HE CONDITIONS OBSI	ERVED AND				
	Working on labeling fo	r America	an egg - Nate will send her	permittir	ng info						
	Working on labeling for American egg - Nate will send her permitting info Will store eggs on bottom- COS										
02	Cooler is borderline 45/46 which is okay for eggs and wholeFruit but moved hot dogs and sausage to colder uni										
	Not serving hot dogs										
29	Provide thermo for sandwich unit										
	Not selling hot sandwi										
Cos	Will need to clean out trash inside cabinet where old trash can once was										
	Hot water at front counter hand sinks is not working so are not selling hot dogs for now										
32	Watch rusty bottom in										
23	No hot water in restro	om									
39	Best to move equipme	ent not be	eing used in back room								
!!	Avoid blocking back d	oor									
23	No hot water in store a	at this tim	e therefore only package	ed items	allowed	to be sold					
39	Back room to eliminat	e clutter	etc								
45	Wic - Eliminate floor s	storage w	here needed to clean floor								
	One fan not turning in far fan box unit										
	Temp in wic is 45/46/47										
42/	Clean shelving and fans and etc										
23	Will need hot water to prepare foods and wash utensils etc beverage nozzles too										
19	Need to address drain to ice bin at soda station										
	Provided food thermo										
Received (signature)		/e	Print:			Title: Person In Char	ge/ Owner				
Inspected	l by:	_	Print:								
(signature)	Kelly kírkpo	itríck	$\sqrt{RS}$			Samples: Y N	# collected				