Followup Fee of \$50.00 after First Followup

Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

City of Rockwall

Date: 6/11/24				L	Time in: Time out: 12:05			License/Permit # FS-0002748							CPFM 1	Food handlers	Page <u>1</u> of <u>2</u>	2_
					tion: 1-Routine	2-Follow U		omplai			-Inv€		ation	n	5-CO/Construction	6-Other	TOTAL/SCOR	RE
	tabli				ne: of Rockwall		Contact/O								Number of Repeat Violat ✓ Number of Violations CO			
	ysic				or Hockwaii	Pes	st control:	JSIICCI		Но	od		G	rease		Follow-up: Yes	4/96/ <i>P</i>	1
225	EF						olab 5/15/24				cleaner		-			No 🔽		
Ma					Status: Out = not in co points in the OUT box for	impliance IN = in or each numbered ite	em			t obser heckm					plicable COS = corrected on so ox for IN , NO , NA , COS Mark	ite \mathbf{R} = repeat vio k an in appropriate	e box for R	h
Co	1:		Cto	4 110	Prio	rity Items (3	Points) vio	lations	Requ						ive Action not to exceed 3 days	S		
O U	mpli I N	N O	N A	C O		perature for Fo			R	O		N	N A	C O	Emple	oyee Health		R
T	11	U	А	S	(F = d 1. Proper cooling time a	egrees Fahrenhei	it)			T			A .	s	12. Management, food employe		employees:	
		/			1. Troper cooming time t	and temperature					/				knowledge, responsibilities, an		employees,	
					2. Proper Cold Holding	temperature(41°	°F/ 45°F)			F					13. Proper use of restriction an	d exclusion; No disc	charge from	
	•				See						•				eyes, nose, and mouth			
		/			3. Proper Hot Holding t	temperature(135°	°F)								9	tamination by Han		
	~				4. Proper cooking time See	and temperature					/				14. Hands cleaned and properl	ly washed/ Gloves u	ised properly	
		/			5. Proper reheating products)	cedure for hot ho	olding (165°F	in 2			/				15. No bare hand contact with alternate method properly follo			
	_	•			6. Time as a Public Hea	alth Control; proc	cedures & re	cords							Gloves used	(III D. 1.4)		
	•														16. Pasteurized foods used; pro	ptible Populations		
					Ap	proved Source					/				Pasteurized eggs used when red Eggs			
					7. Food and ice obtaine good condition, safe, ar			d in							<u> </u>			
	~				destruction US Foo	id unadunerated, ids	, parasite								Ch	iemicals		
					8. Food Received at pro	oper temperature					T,				17. Food additives; approved a	and properly stored;	Washing Fruits	
	•				Checking upor	n delivery			Ш		•				& Vegetables Water			
						from Contamir					/				18. Toxic substances properly	identified, stored an	id used	
	~				Food Separated & pr preparation, storage, dis	· A	_	d							Water	·/ Plumbing		
	_				10. Food contact surfact Sanitized at 200			and							19. Water from approved source backflow device	ce; Plumbing installe	ed; proper	
					11. Proper disposition of			or						1	City approved 20. Approved Sewage/Wastew	rater Disposal System	m proper	
	~				40.4	arded	ously served				/				disposal	ater Disposar Dyster	, proper	
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0	т 1	NT.	N	С	FII	ority Founda	tion Items	(2 Poi			_	_	_		rective Action within 10 days			n
O U T	I N	N O	N A	C O S		ority Founda of Knowledge/		(2 Poi	R	viola U T	I	Req N O	uire N A	C C O S	rective Action within 10 days Food Temperature		eation	R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Jay Longstreet	Print: Jay Longstreet	Title: Person In Charge/ Owner
Inspected by: Richard Hill (signature)	Print: Richard Hill SIT	Business Email:

Form EH-06 (Revised 09-2015)

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	ment Name: nial Oaks of Rockwal	Physical A	Idress: Ralph Hall Pkwy		tity/State:	ıll. Tx	License/Permit # FS-0002748	Page <u>2</u> of <u>2</u>			
00101	nar Garlo of Floorwar	L ZZO L	TEMPERATURE			, 17	1 0 00027 10				
Item/Loc		Temp	Item/Location		Temp	Item/Loc	ation	Temp			
2Door	freezer htt	12									
3 dc	or refrigerator	39									
Wh	ole tomatoes	39									
	Butter	39									
Che	eddar Cheese	39									
	Sausage	170									
	Beans	167									
Τ.	I		SERVATIONS AND C								
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: all temperatures are taken in F										
	Restrooms equipped and temp greater than 104										
	Hand sinks equipped,	•		ıt kitchen							
	3comp sink not setup,		• • • • • • • • • • • • • • • • • • • •								
	Dishwasher confirmed 100ppm										
	Steam table inoperative		d and set aside								
	Tea urn nozzles clean										
	Installed prep sink with soap / papertowels in place of server station										
42	Need to seal top of new sink to wall with silicone and 3 comp sink as well General detail cleaning behind equipment, ice maker ect. Floors look so much better										
45 42/45							ich better				
32cos	0 11										
02000	Using sleeved jumbo straws, outbreak of inflection will move to all disposable plateware, cutlery										
	Remember to change						· · · · · · · · · · · · · · · · · · ·	<u>, </u>			
	All red sani buckets fil										
Received (signature)	Soo abov	⁄e	Print: See	e abo	ove		Title: Person In Charge/	Owner			
Inspected (signature)		SI	Print: Ric	hard		SIT	Samples: V. N. "	anllants d			
Form EH-06	6 (Revised 09-2015)	سار دے	(Samples: Y N #	collected			