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

Date: 09/20/2023				License/Permit # FS 8936							Food handlers 10 Page 1 of 2							
Purpose of Inspection: 1-Routine 2-Follow Up Establishment Name: Co					3-Complaint 4-Investigation Lact/Owner Name:				tigat	tion		5-CO/Construction 6-Other TOTAL/SCOI  * Number of Repeat Violations:	RE					
Costco 1049 bakery Costco							varne.						Number of Violations COS: 4/96/	Λ				
Physical Address: Pest control: 1225 SH 276 See grocery							Hood Grease July 2023 See groo					Tonou upi Tes	7/30//					
		Com	plia	nce S	Status: Out = not in co	Jiiipiiance	complian	141	$\mathbf{O} = \text{not o}$						plicable COS = corrected on site R = repeat violation W- Water	ch		
Ma	rk th	he ap	prop	riate	points in the OUT box for										NA, COS Mark an X in appropriate box for R  we Action not to exceed 3 days			
Cor	Compliance Status						R	Compliance Status O I N N C		S		R						
U T	U N O A O					ety		U T			o	Employee Health						
	Proper cooling time and temperature										12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting							
	2. Proper Cold Holding temperature(41°F/ 45°F)			)						-	13. Proper use of restriction and exclusion; No discharge from	-						
	See See			,							eyes, nose, and mouth Posted at hand sink							
	3. Proper Hot Holding temperature(135°F)										Preventing Contamination by Hands							
	4. Proper cooking time and temperature						/				14. Hands cleaned and properly washed/ Gloves used properly							
	5. Proper reheating procedure for hot holding (165°F			65°F in 2						,	15. No bare hand contact with ready to eat foods or approved	t						
	Hours)  6. Time as a Public Health Control; procedures & reco							$\perp$	•		alternate method properly followed (APPROVED Y N. ) Gloves							
	/				6. Time as a Public He Prep only	alth Control; pro	cedures	& records	Ш						Highly Susceptible Populations			
					Ap	proved Source					/				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required			
I					7. Food and ice obtained	ed from approved	l source;	Food in										
					good condition, safe, and unadulterated; parasite destruction Commercial										Chemicals			
					8. Food Received at pr		;							-	17. Food additives; approved and properly stored; Washing Fruits			
					At receiving						~				& Vegetables Seasonal using veggie wash			
					Protection	n from Contami	nation				~				18. Toxic substances properly identified, stored and used			
	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting				g food							Water/ Plumbing						
					10. Food contact surface	ces and Returnab	les ; Clea	aned and				T		+	19. Water from approved source; Plumbing installed; proper			
3				•	Sanitized at 200										backflow device City approved			
		/			11. Proper disposition reconditioned	of returned, previ	iously se	rved or			/				20. Approved Sewage/Wastewater Disposal System, proper disposal			
				ш								_		┙				
J	-				Pri	iority Founda	tion It	ems (2 Po	ints) vi	olati	ons I	Requ	iire (	Cor	rective Action within 10 days			
O U	I N	N O	N A	C O		iority Founda n of Knowledge/			R R	O U	I	N	N A	C O	rective Action within 10 days  Food Temperature Control/ Identification	R		
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## Retail Food Establishment Inspection Report

## City of Rockwall

Received by: (Printed / Covid Gavin Jones	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: co 1049 bakery	Physical A	ddress: SH 276		City/State: Rockwall	License/Permit # 8936	Page <u>2</u> of <u>2</u>				
	·		TEMPERATUR	E OBSERVAT	IONS						
Item/Loc	ation	Temp F	Item/Location		Temp F Item/I	<u>Location</u>	Temp I				
Cake	case	33-35									
	\\/!.	+									
	Wic	35/36									
Cr	eam cheese	41									
	Wif	10									
	VVII	10									
		OB	SERVATIONS AND	CORRECTIV	E ACTIONS						
Item Number	AN INSPECTION OF YOUR ESTABLE TEMPS		NT HAS BEEN MADE.	YOUR ATTENT	ON IS DIRECTED T	O THE CONDITIONS OBSE	ERVED AND				
1 (41110-01											
	Labels include allerge  Hot water at hand sink		1								
۱۸/	To fill holes in walls	KS 108-11	1								
W		with alath	towala ta place in	ata aanitizar	dr. tourde ben	sing on outside with ti	no into colution				
W	Discussed quats binding			110 Sanıtızer -	dry towers nang	ging on outside with ti	ps into solution				
10	Sanitizer tested to be below 100 ppm / COS										
14/	Watch flagring			l amagt							
W	Watch flooring - accur										
W	Address water dripping from pipe behind condenser in wif										
34	Flies in bakery										
	Three comp wash 126 F										
	Sanitizer in sink 200 ppm Sani bucket less than 100 ppm quats binding in towel - to address										
	Using lollipop thermos		quats biriding	j iii towei - t	o address						
W	Watch sprayer and lo		n utancile								
VV	Confirmed surface rea		-	lahols 160							
	Committed Surface rea	ading in D	isimacimic with	IADOIS 100							
Received	by:		Print:			Title: Person In Charg	ge/ Owner				
(signature)	See abov	/e									
Inspected	See abou		Print:								
(signature)	Kelly kírkpo	atríck	$ \mathcal{RS} $			Samples: Y N	# collected				
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