

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: 03/16/2023	Time in: 9:58	Time out: 3:28	License/Permit # FS 8937	Food handlers 278	Food managers 9	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	TOTAL/SCORE
--	--------------------------------------	--------------------------------------	--	--	----------------------------------	-------------

Establishment Name: Costco 1049 grocery	Contact/Owner Name: Costco	* Number of Repeat Violations: _____	4/96/A
		✓ Number of Violations COS: _____	

Physical Address: 1125 SH 276	Pest control : Ecolab 3/16/2023	Hood Na	Grease trap//waste oil Les 100/1250 - 11/29/2023	Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Pics
---	---	-------------------	--	---

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 X in appropriate box for IN, NO, NA, COS Mark an X 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					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
3				<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				Preventing Contamination by Hands					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				Highly Susceptible Populations					
		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>			
	<input checked="" type="checkbox"/>					Chemicals					
	<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>			
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					Water/ Plumbing					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					

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
Demonstration of Knowledge/ Personnel						Food Temperature Control/ Identification					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>			
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
Safe Water, Recordkeeping and Food Package Labeling						Permit Requirement, Prerequisite for Operation					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				Utensils, Equipment, and Vending					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>			

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
Prevention of Food Contamination						Food Identification					
W						<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				Physical Facilities					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				1					

