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

	ate:			Time in:	Time out:	License/Po							Est. Type	Risk Category	_ 1	2
				9:55	10:53	FS 9							FF	Low	Page <u>1</u> of _	
		se of I		ction: 1-Routine	2-Follow Up	3-Complaintact/Owner N		4-	Inve	stiga	tion		5-CO/Construction * Number of Repeat Vio	6-Other	TOTAL/SCO	RE
		Que		ne.	Gla		vame:						✓ Number of Violations	cos:	10/00	/ ۸
	hysic oliad	al Add	ress:		Pest con Pestek 0			Ho-				ease	trap :	Follow-up: Yes No Pics	10/90/	/ A
		Compl		Status: Out = not in c	compliance IN = in compl	liance NO	O = not	obser	ved		= nc	t app	olicable COS = corrected or	n site \mathbf{R} = repeat vio	olation W- Wate	ch
M	Iark t	he appr	opriat	e points in the OUT box fo	or each numbered item	Mark •							NA, COS M we Action not to exceed 3 d	ark an $\sqrt{\text{in appropris}}$	ate box for R	
	_	iance S			•			_	ompli	ance	Stat	us	ve riction not to exceed 3 a	uys		I
U T	N	N N			mperature for Food Sa degrees Fahrenheit)	afety	R	U	N	N O		C O S	Em	ployee Health		R
		./	Ĩ	1. Proper cooling time	and temperature							~	12. Management, food empl knowledge, responsibilities,		employees;	
				2 Promon Cold Holdin	2 tomas a sotumo (419E/ 45	(017)									ala anno a Consum	_
	1			See	g temperature(41°F/ 45°	r)			~				13. Proper use of restriction eyes, nose, and mouth		charge from	
	1		+	3. Proper Hot Holding See	temperature(135°F)		H						Preventing Co	ontamination by Han	nds	
			-	4. Proper cooking time				١٨					14. Hands cleaned and prop	erly washed/ Gloves u	ised properly	
				5. Proper reheating pro	ocedure for hot holding	(165°F in 2		۷۷					Remind all employees to 15. No bare hand contact wi			3
		'		Hours)		`			~				alternate method properly for Gloves	llowed (APPROVED	Y N)	
	1			6. Time as a Public He Prep service	ealth Control; procedure	es & records							Highly Sus	ceptible Populations		
			_		16								16. Pasteurized foods used;		fered	
	1				pproved Source								No eggs used when No eggs used	required		
	~				ed from approved source and unadulterated; paras									Chemicals		
				8. Food Received at pr	roper temperature						T		17. Food additives; approved	d and properly stored;	Washing Fruits	
	/			To always che	∍ck				~				& Vegetables Water			
				Protectio	on from Contamination	n			/				18. Toxic substances proper Water	ly identified, stored an	d used	
	/			9. Food Separated & p preparation, storage, d	protected, prevented dur lisplay, and tasting	ing food								ter/ Plumbing		
	~			10. Food contact surface Sanitized at 200	ces and Returnables; C ppm/temperature	leaned and		3				-	19. Water from approved so backflow device See attached	urce; Plumbing install	ed; proper	
		~		11. Proper disposition reconditioned Disc	of returned, previously	served or			1				20. Approved Sewage/Waste disposal	ewater Disposal System	m, proper	
	<u> </u>	<u> </u>		<u></u>		Items (2 Po	ints) v			Req	uire	Corr	rective Action within 10 da	ys		
O U T		N N		Demonstratio	on of Knowledge/ Perso	onnel	R	U T	N	N O	N A	C O S	Food Temperate	ıre Control/ Identific	eation	R
1	/		8	and perform duties/ Ce	oresent, demonstration or ertified Food Manager (1	1			3	27. Proper cooling method u Maintain Product Temperatu		quate to	
	/		+	22. Food Handler/ no u	unauthorized persons/ p	ersonnel			•			+	28. Proper Date Marking and	d disposition		+
				Employees before 6	ordkeeping and Food	Packaga						+	Good 29. Thermometers provided,	accurate, and calibrat	ed; Chemical/	+
				Sale Water, Reco	Labeling	i ackage			~				Thermal test strips Atkins			
	/			23. Hot and Cold Water												
				121	er available; adequate p	ressure, safe								nt, Prerequisite for O	peration	
	~			24. Required records a destruction); Packaged	available (shellstock tag				·					<u>*</u>	•	
	/			24. Required records a destruction); Packaged Commercial Conformance	available (shellstock tag d Food labeled	s; parasite			·				Permit Requirement 30. Food Establishment Per Posted Utensils, Eq	rmit (Current/ insp s	ign posted)	
				24. Required records a destruction); Packaged Commercial Conformance 25. Compliance with VHACCP plan; Variance	available (shellstock tag d Food labeled	edures rocess, and			·				Permit Requirement 30. Food Establishment Per Posted	rmit (Current/ insp s	ign posted)	
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Lonnie Burgess	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: Queen	Physical A Goliac		City/State: Rockwal		ge <u>2</u> of <u>2</u>			
,			TEMPERATURE OBSERVAT	TIONS					
Item/Loc		Temp F	<u>Item/Location</u>	Temp F	Item/Location	Temp 1			
Ice cream case in dining room 3			Make table 2	40	Not using grillDrawer				
Reach in not used 38/			Salsa	40	Upright freezer	-2-6			
Sof	ft service unit	35	Steam table		Ice cream freeze	r -20			
Co	ne soft serve	39	Taco meat /chili	148/ 143	Wic	39			
Small	Cold top cake ambient	37	Make table 1		Cheese	40			
	Cake	39	Tomatoes / diced	40/39	Tomatoes	41			
Top	opings cooler	27 f	Burritos	40	Wif	-6			
			Ambient warmer drawers	194					
		OB	SERVATIONS AND CORRECTI		NS				
Item Number					CTED TO THE CONDITIONS OBSERVED	AND			
	NOTED BELOW:								
44	To make repairs to dur	_	oors						
44	Keep spent grease co								
34	Make repairs to weath								
	•		n dining room is being disca	irded as i	it melted 34 F				
	Hot water in restroom								
19			ree comp sink drain pipe						
40 /07	Sink sanitizer - 300 ppm - okay per label								
42 /37									
37	Cooking area: Condensation in coolers to address - various locations								
37									
45	Discussed cooling left								
40	Grout issues various lo		eld - bulb removed that was	unaayar	ad as burned out in fractor				
	Back room:	and Sine	eia - buib removea mai was	uncoven	ed as burned out in freezer				
	Sink sanitizer 200 ppm	1							
Hot water 121 F									
39 47	Invert ice buckets Store mop heads to al	low to da	ı						
4/	•		/ using ice from machine up f	ront in so	da statio Δrea				
37	Small amount of cond		<u> </u>	10111 111 30	aa siaiio. Alba				
45			address in flooring - in dry	storace a	and with it as				
37	•		<u> </u>		uiu wiiii ii as				
37	Watch small amount of condensation. Rain drop from ceiling in wif								
	Watch condition of food containers and utensils and shelving and replace when needed								
Covid Dining room still closed - employees wearing masks / gloves / no one allowed inside /									
COVIG	2.1.119 100111 01111 010361	a ompic	1,000 Wouling masks 7 glov	33 / 110 0	no anomou moido /				
Received	by:		Print:		Title: Person In Charge/ Own	ier			
(signature)		'e							
Inspected	l by:		Print:						
(signature)	Kellv Kirkha	ıtrick	\mathcal{RS}						
Form FH-06	- 7.0				Samples: Y N # colle	ected			