## **Retail Food Establishment Inspection Report**

First aid kit

Allergy policy

Vomit clean up

Employee health

12					1:40	)	Time out: 2:49		FS-9	262	2_					Est. Type	Risk Category	Page 1	
		<b>se of</b> ishm			tion: 🗸 1 ne:	-Routine	2-Follow U		3-Compla ct/Owner I		4-	Inve	stiga	ation		5-CO/Construction  * Number of Repeat Viola	6-Other tions:	TOTAL/SO	CORE
De	enr	าy's	s #	88						vario.						✓ Number of Violations Co	OS:	15/85	5/R
Ph 67	ysic 0 I	al A 30 I	ddre Ro	ess: ckw	all, TX		Ec	est control colab/mo	onthly		Hoo Vent \	od Vorks	/3mo	Gr city	ease y ha		Follow-up: Yes ✓ No □	13/00	ט וכ
Ma					Status: C	Out = not in co	ompliance IN = in	n complianc	ce No	<b>O</b> = not '✓' a ch						plicable COS = corrected on s	site <b>R</b> = repeat vio	lation W-W	Vatch
					r						re In	ımed	liate	Corr	recti	ve Action not to exceed 3 day			
O U	mpli I N	iance N O	Sta N A	tus C O	T	ime and Ten	nperature for F	ood Safet	y	R	O	ompli I N	iance N O	Stat N A	C O	E	orros Mosléh		R
T	14	U	A	S	1 Proper	,	egrees Fahrenhe and temperature				T	IN	0	A	s	12. Management, food employ	oyee Health	employees:	
	~				1. 1 Toper	cooming time i	and temperature	,				~				knowledge, responsibilities, an		employees,	
2					2. Proper	Cold Holding	temperature(41	°F/ 45°F)				_				13. Proper use of restriction an eyes, nose, and mouth	nd exclusion; No disc	charge from	
3					3 Proper	Hot Holding t	temperature(135	coe)								cycs, nose, and moun			
	~				,		and temperature									Preventing Con  14. Hands cleaned and proper	tamination by Han		
		~			•		cedure for hot ho		50E in 2			~				gloves used 15. No bare hand contact with			
		~			Hours)	reneating pro	cedure for not no	olding (16.	5 F III 2			~				alternate method properly follo	owed (APPROVED	Y <sub>.</sub> N <sub>.</sub>	
	~				6. Time as	s a Public Hea	alth Control; pro	ocedures &	k records							Highly Susce	eptible Populations		
																16. Pasteurized foods used; pro	ohibited food not off	fered	
							proved Source					•				Pasteurized eggs used when re eggs cooked	quired		
	/				good cond	dition, safe, ar	ed from approved and unadulterated		Food in							Ch	nemicals		
					destructio														
	~					•	oper temperature	e				~				17. Food additives; approved a & Vegetables	and properly stored;	Washing Fruit	.s
					CHECK	at rece	ipt i from Contami	ination				~				18. Toxic substances properly	identified, stored an	d used	_
					9. Food S		otected, prevent		food										
	>				•		splay, and tasting									Water	r/ Plumbing		
	<				10. Food of Sanitized	contact surfac at <u>200</u>	es and Returnab ppm/temperatur	oles ; Clear re	ned and			~				19. Water from approved source backflow device	ce; Plumbing installe	ed; proper	
	/				11. Proper		of returned, previ	iously ser	ved or			7				20. Approved Sewage/Wastew disposal	vater Disposal Syster	m, proper	
									<b>(2.7</b>			ions	Pag	$\perp$	~				
						Pri		ation Ita	me (2 Po	inte) ,	iolat				( 'or	ractiva Action within 10 days			
O U	I N	N O	N A	C	D					ints) v	iolat O U	I	N	N A	Cor.	rective Action within 10 days  Food Temperature		ation	R
O U T	N	N O	N A	C O S	21. Person	emonstration	n of Knowledge/ resent, demonstra	e/ Personneration of kr	el nowledge,		О	I N		N	C	Food Temperature	e Control/ Identific		R
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## **Retail Food Establishment Inspection Report**

Received by: (signature) see below	see below	Title: Person In Charge/ Owner
Inspected by: see below	Print: see below	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: 1y's #8871	Physical A 670 I-		City/State: Rockw	all, TX	License/Permit # FS-9262	Page	e <u>2</u> of <u>2</u>		
	•		TEMPERATURE OBSERVA	TIONS	·					
Item/Loc		Temp F	Item/Location	Temp F	Item/Loca			Temp F		
cold to	op front line/cheese	41	under/shredded chees	<b>∍ 41</b>	freeze	er drawers/amb	ient	25.5		
u	ınder/salad	41	egg cold top/egg	g 40	under	counter freezer ambient		15.9		
glass	s front cooler/milk	40	under/shredded chees	41	W	IC/sausage	<u>e</u>	40		
desser	rt cooler/whipped topping	49	grill drawers/liquid eg	40		ham		40		
und	er/sour cream	41	chorizo/ham	37/36	6	WIF		2.4		
hot we	ells/gravy/cheese sauce	135/138	cut tomatoes	38						
line	cold top/cut tom	36	pancake cooler/mi	× 41						
drawe	ers/stuffing/meatballs	40/37	under/mix	38						
	-		SERVATIONS AND CORRECT		NS					
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW:	TABLISHME	NT HAS BEEN MADE. YOUR ATTEN	TION IS DIR	ECTED TO T	HE CONDITIONS OBSER	VED A	ND		
	Hand sink 100+									
31	Need soap and pap	er towe	ls at hand sinks							
32										
2	Sand/bleach cutting boards  Whipped topping moved to under counter cooler. Advised to store there. Must cold hold at 41 or below. Out for less than 4 hours.									
				· cola fiola a		Out for 1000 than 1 flo				
	Sani bucket 200 ppm quats									
	Soda and tea nozzles WRS every shift									
	Line hand sink 113									
39	Discard chipped pla									
31		availab	le, not blocked by tras	n can						
39	line hand sink 104									
<u> </u>	Store knives clean									
	Missing grout/food debris /clean floors									
42	Clean in/around/on equipment, sides of equipment, coolers									
	3 comp sink									
40	dishwasher 100 ppm bleach									
40 34										
 W										
	Must have certified food manager on duty at all times									
35	Store employee drinks low and separate									
29	Need metal stem thermo									
	RR sinks 100+									
Received	by:		Print:			Title: Person In Charge	/ Owner	r		
				Den	ton	Manager				
Inspected	d by:		Print:							
(signature)	Christy C	orte		Cor	tez	Samples: Y N	# collect	ted		