Retail Food Establishment Inspection Report First aid kit Allergy policy/training Vomit clean up Employee health 																	
Date: Time in: Time out: License/Per													Est. Type Risk Category	2			
12/03/2020 12:54 1:55 FS 78 Purpose of Inspection: ✓ 1-Routine 2-Follow Up 3-Complain									L-Inx	zostia	atio	n (PP LOW Page - of -				
Es	Establishment Name: Contact/Owner N								me: * N				× Number of Repeat Violations: ✓ Number of Violations COS:	NL			
Dollar Tree #02861 Dollar Tree Physical Address: Pest control :							Hood Grease trap :			G	irease						
I-30 Rentokil quarterly								Na			Na	1					
								ot obse appro					pplicable $COS = corrected on site R = repeat violation W- Wate O, NA, COS Mark an in appropriate box for R$	h			
C	mpli	ance	Stat	tus	Priority Items (3 Po	ints) violations	Requ			<i>ediate</i> plianc			tive Action not to exceed 3 days	T			
O U T	I N	N O	N A	C O S	(F = degrees Fahrenheit)				O I U N T	N	Employee Health	R					
		~			1. Proper cooling time and temperature			V				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
	~		2. Proper Cold Holding temperature(41°F/45°F) See attached						V				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth Home Screening / prior to arrival				
			~		3. Proper Hot Holding temperature(135°F)								Preventing Contamination by Hands				
		4. Proper cooking time and temperature							V			14. Hands cleaned and properly washed/ Gloves used properly Prepackaged only					
			~		5. Proper reheating procedure for hot holdin Hours)	ng (165°F in 2					~		15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_N_)				
			·		6. Time as a Public Health Control; procedu	ires & records						Highly Susceptible Populations					
			•					$\left \right $					16. Pasteurized foods used; prohibited food not offered				
					Approved Source				Pasteuri				Pasteurized eggs used when required				
з		7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Canned items										Chemicals					
					8. Food Received at proper temperature			Г			~		17. Food additives; approved and properly stored; Washing Fruits & Vegetables				
					Thermo to check temp			_		/	•		18. Toxic substances properly identified, stored and used				
_	Protection from Contamination 9. Food Separated & protected, prevented during food							V									
					preparation, storage, display, and tasting See egg comment - best to have bacon next to and lunch meat away								Water/ Plumbing				
	~	10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>Na</u> ppm/temperature						V	•			19. Water from approved source; Plumbing installed; proper backflow device City approved					
	11. Proper disposition of returned, previously served or reconditioned Discard / no returns								20. Approved Sewage/Wastewater Disposal System, prop disposal								
Priority Foundation Items (2 Points)														<u> </u>			
O U T	I N	N O	N A	C O S	Demonstration of Knowledge/ Per	rsonnel	R	1	O I U N T	N O	N A	C O S		R			
	~			5	21. Person in charge present, demonstration and perform duties/ Certified Food Manage Prepacked				V	/		5	27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature				
	22. Food Handler/ no unauthorized persons/ personnel							~			28. Proper Date Marking and disposition						
Safe Water, Recordkeeping and Food Package Labeling					2	2				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips New thermo on order / to send pic							
	23. Hot and Cold Water available; adequate pressure, safe							i	Permit Requirement, Prerequisite for Operation	•							
		24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled							30. Food Establishment Permit (Current/ insp sign pos 2020								
	Conformance with Approved Procedures											Utensils, Equipment, and Vending					
		25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions							V		31. Adequate handwashing facilities: Accessible and properly supplied, used						
	Consumer Advisory					F	V	-			32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used	1					
	~				26. Posting of Consumer Advisories; raw or foods (Disclosure/Reminder/Buffet Plate)/ Commercial product / prepackaged			F	+		~		33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided	t			
					, , , ,	uire Corrective							ays or Next Inspection , Whichever Comes First	1			
O U T	I N	N O	N A	C O S	Prevention of Food Contamina	tion	R	1	O I U N T		N A	C O S		R			
w				-0	34. No Evidence of Insect contamination, re animals See attached	odent/other			-		~		41.Original container labeling (Bulk Food)				
	~				35. Personal Cleanliness/eating, drinking or	tobacco use	\Box						Physical Facilities				
	~				36. Wiping Cloths; properly used and stored	1		1					42. Non-Food Contact surfaces clean See				
1					37. Environmental contamination See attached				V			\square	43. Adequate ventilation and lighting; designated areas used Watch				
	38. Approved thawing method					V			\square	44. Garbage and Refuse properly disposed; facilities maintained							
					Proper Use of Utensils			1		_			45. Physical facilities installed, maintained, and clean See				
	~				39. Utensils, equipment, & linens; properly dried, & handled/ In use utensils; properly Watch	used			V				46. Toilet Facilities; properly constructed, supplied, and clean Watch paper towels				
	~				40. Single-service & single-use articles; pro and used	perly stored				~			47. Other Violations				
		-					1 1		1	1			1	1			

Retail Food Establishment Inspection Report

City of Rockwall

(signature) April Shuffield	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

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	nent Name: Tree #02861	Physical A	ddress:	City/State: Rockv	vall	License/Permit # Page 2 of 2 7883		<u>2</u> of <u>2</u>			
Dona		1.00	TEMPERATURE OBSERVA								
Item/Loca		<u>Temp F</u>	Item/Location	<u>Temp</u>	<u>F</u> <u>Item/Loca</u>	Item/Location		Temp F			
Wic an	nbient	32/33	Beverage cases on floo	or							
	Wif	-14	20-35 F great								
Flo	oor freezers		Ice cream freeze	r -1()						
-1	7/-12/-11/09										
Floor	Tcs food cooler										
	34/36/40										
OBSERVATIONS AND CORRECTIVE ACTIONS											
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:										
	To clean around mop sink										
	Mop hooks needed to allow mops to dry										
	Watch for gaps at back door										
45	Back door to be self closing										
	Clean floor inside wic										
45/37	Wif - continuing to have an ice issue - to address as it may damage boxes / currently only plastic wrapped boxes in area										
45	Repair entry ramp - lifting up and debris is getting underneath										
45	Clean floor etc where needed in wic/ wif										
W	As always watch egg storage next to rte foods in case										
42	Minor cleaning needed in upright coolers/ freezers on floor										
07			mer, handover black bean		off pork n	beans ,					
	Dented: refried beans	, hints pa	asta sauce ,hunts tomatoe	S							
42/45	Clean air vents and ce	iling whe	re needed and floor too et	0							
	Restrooms equipped /	hot wate	er at 111 F								
COS	Placed paper towels u	nit disper	nser during insp in employ	ee restr	oom						
42	Minor cleaning needed in reach in coolers										
	Best to have raw bacon next to raw eggs										
	Using. Quats product for disinfection. Per company										
W	I Time to defrost ice cream freezer										
Covid	id Stickers on floor / masks / shields at POS / sanitizing										
D • •						mu n - ~-	16				
Received (signature)	See abov	/e	Print:			Title: Person In Charg	e/ Owner				
Inspected	by:	-	Print:								
(signature)	See abov by: Kelly Kírkpo	ıtríck	\mathcal{RS}			Samples: V N	# collect	ad a			
	(Device d 00 2015)					Samples: Y N	# collecte	л			