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
Allergy policy/training Vomit clean up Employee health
Employee health

Date: 03/08/2022				Time out: 2:22		License/Per		posted			t		Food handlers Food managers Page 1 of _	2		
Purpose of Inspection: ✓ 1-Routine 2-Follow Up 3-Comp Establishment Name: Contact/Owne					3-Complain		4-Investigation					5-CO/Construction 6-Other TOTAL/SCO * Number of Repeat Violations:	RE			
Edible arrangements TK						COWINCE TWO	anne.						Number of Violations COS:	/Λ		
Phy I-30	Physical Address: Pest control:						Hoo Na	d				e trap : Follow-up: Yes I I U/9U/	_			
					tatus: Out = not in co	ппрпапсе	n compliance	NU	= not c						plicable $COS = corrected on site R = repeat violation W-Water$	ch
Mari	k th	ne app	ropi	riate	points in the OUT box for Prio										NA, COS Mark an √in appropriate box for R ve Action not to exceed 3 days	
	Compliance Status							R	Co	mplia I	nce N	Status			R	
U T	N O A O Time and Temperature for Food Safety					y		U N O			A O S		Employee Health			
	Proper cooling time and temperature						12. Management, food employees and conditional knowledge, responsibilities, and reporting					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 To post at hand sink	nth				
	3. Proper Hot Holding temperature(135°F) Chocolate only			5°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 in 2			5°F in 2							15. No bare hand contact with ready to eat foods or approved					
	Hours) 6. Time as a Public Health Control; procedures & records										alternate method properly followed (APPROVED Y N.) Gloves watch					
	_	/			Prep only	aith Control; pro	ocedures &	z records							Highly Susceptible Populations	
					Ap	proved Source	e						✓		16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
	_				7. Food and ice obtaine	ed from approve	ed source; F	Food in						+		
•	1				good condition, safe, ar destruction		•								Chemicals	
					8. Food Received at pro Frozen produc			20							17. Food additives; approved and properly stored; Washing Fruits & Vegetables	
					•	<i>,</i> e							Using fit 18. Toxic substances properly identified, stored and used	+		
	_				9. Food Separated & pr	rotected prevent		food			/				Stored on back shelving unit	
•	4				preparation, storage, dis			1004							Water/ Plumbing	
	10. Food contact surfaces and Returnables; Cleaned and						. /			+	19. Water from approved source; Plumbing installed; proper backflow device					
	Sanitized at 200 ppm/temperature						_			-	City approved	1				
	11. Proper disposition of returned, previously served or reconditioned Discarded							/				20. Approved Sewage/Wastewater Disposal System, proper disposal				
Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days											ons l	Corr	+			
				I N N C N O A O Demonstration of Knowledge/Personnel												
U				O	Demonstration	n of Knowledge	e/ Personne	el	R	O U	I N	N O	A (CO	Food Temperature Control/ Identification	R
					21. Person in charge pr	resent, demonstr	ration of kn	owledge,	R		I N	N O		o	27. Proper cooling method used; Equipment Adequate to	R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Roxanne Beeson	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: e Arrangements	Physical A	ddress:	City/State: Rockwall		License/Permit # Page 2 of 2						
		l m	TEMPERATURE OBSER									
Item/Loc		Temp F	Item/Location	Temp F	Item/Location	<u>on</u>	Temp 1					
Cold t	op unit		WIC									
(Cut melons	39/39	Melons	39								
Fror	nt case display	39.2	Kale	39								
Bacl	k up glass front	38.2										
В	Blast freezer	-14										
		OF	SERVATIONS AND CORRE	CTIVE ACTION	S							
Item Number	AN INSPECTION OF YOUR ES		NT HAS BEEN MADE. YOUR AT			CONDITIONS OBSE	ERVED AND					
Tumber	Hot water 118											
	Not using front soft se	rve innut										
	Reminder again when		keep ice unit drained									
	Need new toilet and s		•									
	Restroom could use ti	•										
	Clean outside and insi	side and inside freezer										
36	To store wiping cloths	in sanitiz	er when not in use									
32	Time to replace cutting boards where needed											
42/45	· · ·											
	Sanitizer in bucket 200 ppm											
	Using veggie wash - t	est strips	on site - tested at 4.0									
	Reminder to watch glo	oves and	touching no food contac	t surfaces								
	Drains looking better											
39	To remove extra items	not use	d in back area									
34	To address gap at bot											
	Bleach is used for cutting boards at end of day											
	Discussed not using two chemicals together											
	Additional lights plann		C									
42/45												
42	Watch and address shelving where needed clean											
	Ingredients by request											
40	Watch storage of personal items											
42	To clean outside of dry good containers											
39	To watch mop drying and avoid crowding mop sink area with mo bucket etc											
	When using juicer is w r s after use											
Received (signature)	See abov	/e	Print:		7	Title: Person In Charg	ge/ Owner					
Inspected (signature)		utríck	Print:									
					S	Samples: Y N	# collected					