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

	ate:				Time in: Time out:	License/Perr						Est. Type Risk Category	. 1 . 2
					10:58 11:56	FS 82		_				LITITICA LOVV	Page 1 of 2
		se of			tion: 1-Routine 2-Follow Up Co	3-Complaint ontact/Owner Nat		4-In	vestig	ation	n L	5-CO/Construction 6-Other TO	COTAL/SCORE
Ed	dible	e arr	an	ge	ments Tal	kory cullins						✓ Number of Violations COS:	8/92/ A
Pł 1-2		al Ad	dre	ss:		ech mintjly		Hood Ia	[e trap : Follow-up: Yes V	0/32/7
M					Status: Out = not in compliance IN = in compliance	liance NO =	not ob					plicable COS = corrected on site R = repeat violation NA, COS Mark an In appropriate by	
IVI	ark u	не арр	тор	riate	points in the OUT box for each numbered item Priority Items (3 Point							o, NA, COS Mark an In appropriate beginning to exceed 3 days	DOX TOT K
О	Î		N	C	Time and Temperature for Food S.	afety	R	0	npliano I N	N	C		R
U T		О	A	o S	(F = degrees Fahrenheit)	arcty		U T	N O	A	O S	Employee Health	
		~			Proper cooling time and temperature			·				12. Management, food employees and conditional empknowledge, responsibilities, and reporting	iployees;
					2. Proper Cold Holding temperature(41°F/ 45	5°F)						13. Proper use of restriction and exclusion; No dischar	rge from
	•				See attached			·				eyes, nose, and mouth Policy	
		•	/		3. Proper Hot Holding temperature(135°F)							Preventing Contamination by Hands	
		•	/		4. Proper cooking time and temperature Heating choco only			ı				14. Hands cleaned and properly washed/ Gloves used	l properly
			/		5. Proper reheating procedure for hot holding Hours)	(165°F in 2						15. No bare hand contact with ready to eat foods or ap alternate method properly followed (APPROVED Y	
		_			6. Time as a Public Health Control; procedure	es & records	-					Gloves	
					Prep only		-					Highly Susceptible Populations 16. Pasteurized foods used; prohibited food not offered	rd.
					Approved Source					~		Pasteurized eggs used when required	od .
					7. Food and ice obtained from approved source good condition, safe, and unadulterated; paras								
	~				destruction	site						Chemicals	
					8. Food Received at proper temperature		1	T				17. Food additives; approved and properly stored; Was	ashing Fruits
					Whole produce and frozen			·	1			& Vegetables Washing with water only	
					Protection from Contamination			·				 Toxic substances properly identified, stored and us Low 	sed
w					Food Separated & protected, prevented dur preparation, storage, display, and tasting	ring food						Water/ Plumbing	
					Watch ice bin 10. Food contact surfaces and Returnables; C	Cleaned and	-					19. Water from approved source; Plumbing installed; p	proper
					Sanitized at <u>200</u> ppm/temperature			W				backflow device New three comp sink to be insta	alled
		/			11. Proper disposition of returned, previously reconditioned Discarded	served or						20. Approved Sewage/Wastewater Disposal System, p disposal	proper
		•			Discarded							Watch drains	
		-			Priority Foundation	Itams (2 Poin	te) via	latio	ne Pa	mira	Cor	ractive Action within 10 days	•
O U	I N	N O	N A	C			ts) vio	0	I N	N	C	rective Action within 10 days Food Temperature Control/ Identification	on R
O U T	N	N O	N A	C O S	Priority Foundation Demonstration of Knowledge/ Person 21. Person in charge present, demonstration of	onnel		0		N		Food Temperature Control/ Identification	on
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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)

Establishment Name: Edible arrangements		Physical Address:			//State: ockwal	I	License/Permit # FS 8288	Page <u>2</u> of <u>2</u>			
	<u> </u>	1 00	TEMPERATURE OBSERVA			•					
Item/Loc	ation	Temp F	Item/Location		Temp F	Item/Loca	<u>tion</u>		Temp		
NonTcs in display			New upright blast freez	zer	-12						
Upright glass front		38									
С	old top unit										
Cut melons		39	Wic		39						
Cut Melons		39	Mango		39						
Below not using			Watch lighting								
İ											
		Ol	BSERVATIONS AND CORRECT	ΓIVE	ACTION	NS .					
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:										
	Allergens posting on front counter / display										
	Drainable ice bin -not used										
	Hot water 128 F										
	Hand sink equipped										
	Restroom equipped / need to fix toilet tank lid and weather in faucet										
34	Fruit flies in kitchen										
42/45		nd aroun	d equipment and tables								
32	Time to replace cutting		· ·								
42	Clean under bar nettin		•								
37			nachine - not using ice righ	nt no	w						
W	Discard ice in ice mac										
W	Watch items around hand sink in splash zone										
	Quats sanitizer only sink 200 ppm										
32	Replace old food containers where needed / badly stained /manager is working on it										
!!	•										
	New three comp sink being installed - will get plumbing permit Great new freezer!										
42	Clean drains where needed										
	Washing produce with water only										
	To scrub sinks after use										
42/45											
	to hang brooms and mops rack										
39/	Organize back room and closet - remove no essentials										
Covid	d Only one customer in store / all masks / sanitizing common area / drivers in mask and gloves sanitizing vehic										
Received (signature)	See abov	⁄e	Print:				Title: Person In Char	ge/ Owner			
Inspected (signature)	Kelly Kírkpa	ıtrick	Print:				Samples: Y N	# collected	i		