

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

Date: <b>10/23/2020</b>	Time in: <b>10:50</b>	Time out: <b>12:58</b>	License/Permit # <b>FS 9515</b>	Est. Type <b>Breakfast</b>	Risk Category <b>High</b>	Page <u>1</u> of <u>2</u>
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<b>Purpose of Inspection:</b> <input checked="" type="checkbox"/> 1-Routine <input type="checkbox"/> 2-Follow Up <input type="checkbox"/> 3-Complaint <input type="checkbox"/> 4-Investigation <input type="checkbox"/> 5-CO/Construction <input type="checkbox"/> 6-Other							<b>TOTAL/SCORE</b>
Establishment Name: <b>Eggsquisite Cafe</b>			Contact/Owner Name: <b>Brian</b>		* Number of Repeat Violations: ____ ✓ Number of Violations COS: ____		<b>10/90/A</b>
Physical Address: <b>Ridge road</b>			Pest control : <b>Romex monthly</b>	Hood <small>To be done in 3 months</small>	Grease trap : <small>10/22/20 by Sand trap / 10/15/20 wyble (wyble will continue)</small>	Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> <b>Pics</b>	

**Compliance Status:** Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- Watch  
 Mark the appropriate points in the OUT box for each numbered item Mark X in appropriate box for IN, NO, NA, COS Mark an X in appropriate box for R

**Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Time and Temperature for Food Safety</b> (F = degrees Fahrenheit)						<b>Employee Health</b>					
W						<input checked="" type="checkbox"/>					
1. Proper cooling time and temperature <b>Discussed cooling in freezer / sausage /</b>						12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
3						<input checked="" type="checkbox"/>					
2. Proper Cold Holding temperature(41°F/ 45°F) <b>Cold top unit</b>						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth <b>Policy / emailed poster and vomit clean up</b>					
	<input checked="" type="checkbox"/>					<b>Preventing Contamination by Hands</b>					
3. Proper Hot Holding temperature(135°F) <b>Good</b>						14. Hands cleaned and properly washed/ Gloves used properly					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
4. Proper cooking time and temperature						15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y. N. ) <b>Gloves</b>					
			<input checked="" type="checkbox"/>			<b>Highly Susceptible Populations</b>					
W	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
6. Time as a Public Health Control; procedures & records <b>Butter unofficially</b>						16. Pasteurized foods used; prohibited food not offered <b>Pasteurized eggs used when required</b> <b>Warning in menu</b>					
<b>Approved Source</b>						<b>Chemicals</b>					
	<input checked="" type="checkbox"/>					17. Food additives; approved and properly stored; Washing Fruits & Vegetables <b>Water only</b>					
7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction <b>Sysco</b>						<input checked="" type="checkbox"/>					
8. Food Received at proper temperature <b>To always check</b>						18. Toxic substances properly identified, stored and used <b>Discussed storage</b>					
	<input checked="" type="checkbox"/>					<b>Water/ Plumbing</b>					
<b>Protection from Contamination</b>						19. Water from approved source; Plumbing installed; proper backflow device <b>City approved</b>					
W	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting <b>Organize coolers</b>						20. Approved Sewage/Wastewater Disposal System, proper disposal <b>City approved</b>					
	<input checked="" type="checkbox"/>					<b>Water/ Plumbing</b>					
10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature						<input checked="" type="checkbox"/>					
			<input checked="" type="checkbox"/>			19. Water from approved source; Plumbing installed; proper backflow device <b>City approved</b>					
11. Proper disposition of returned, previously served or reconditioned <b>No returns all discarded</b>						<input checked="" type="checkbox"/>					

**Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Demonstration of Knowledge/ Personnel</b>						<b>Food Temperature Control/ Identification</b>					
	<input checked="" type="checkbox"/>					W					
21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) <b>2</b>						27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
22. Food Handler/ no unauthorized persons/ personnel <b>Everyone within 60</b>						28. Proper Date Marking and disposition					
<b>Safe Water, Recordkeeping and Food Package Labeling</b>						<input checked="" type="checkbox"/>					
2				<input checked="" type="checkbox"/>		29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips <b>Dial</b>					
	<input checked="" type="checkbox"/>					<b>Permit Requirement, Prerequisite for Operation</b>					
23. Hot and Cold Water available; adequate pressure, safe <b>Reached 110 - reset hot water heater</b>						30. <b>Food Establishment Permit</b> (Current/ insp sign posted ) <b>Posted</b>					
	<input checked="" type="checkbox"/>					<b>Utensils, Equipment, and Vending</b>					
24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled						<input checked="" type="checkbox"/>					
<b>Conformance with Approved Procedures</b>						31. Adequate handwashing facilities: Accessible and properly supplied, used <b>Equipped</b>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions <b>Will discuss any future plans</b>						32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used					
<b>Consumer Advisory</b>						<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided					
26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/ Buffet Plate)/ Allergen Label Ingredients by request / CA in menu						<input checked="" type="checkbox"/>					

**Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Prevention of Food Contamination</b>						<b>Food Identification</b>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
34. No Evidence of Insect contamination, rodent/other animals <b>Keep an eye on back door</b>						41. Original container labeling (Bulk Food)					
	<input checked="" type="checkbox"/>					<b>Physical Facilities</b>					
35. Personal Cleanliness/eating, drinking or tobacco use						1					
	<input checked="" type="checkbox"/>					42. Non-Food Contact surfaces clean <b>See attached</b>					
36. Wiping Cloths; properly used and stored <b>In buckets / discussed using micro</b>						<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				43. Adequate ventilation and lighting; designated areas used					
37. Environmental contamination <b>Watch possibilities</b>						<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				44. Garbage and Refuse properly disposed; facilities maintained					
38. Approved thawing method						1					
<b>Proper Use of Utensils</b>						45. Physical facilities installed, maintained, and clean <b>See attached</b>					
1						<input checked="" type="checkbox"/>					
39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used <b>See attached</b>						46. Toilet Facilities; properly constructed, supplied, and clean <b>Equipped</b>					
1						1					
40. Single-service & single-use articles; properly stored and used <b>Wrapping utensils to protect mouth!</b>						47. Other Violations <b>See attached</b>					

# Retail Food Establishment Inspection Report

## City of Rockwall

Received by: (signature) <b>Brian Asani</b>	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) <i>Kelly Kirkpatrick RS</i>	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: <b>Eggsquisite cafe</b>	Physical Address: <b>Ridge road</b>	City/State: <b>Rockwall</b>	License/Permit # <b>FS 9515</b>	Page 2 of 2
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### TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
Pancake station cold top		Drawer unit		Cold top ambient	45
Cut melons	39/37	Ground beef	38	Tomatoes in liquid	41
Cut tomatoes	39	Lemon butter/ veggie burger	41/40	Keeping ice on eggs / wash	39
Chicken salad	41	Drawer unit 2		2 door upright 1 in back	
Pancake Mix	36	Corn beef	41	Butter / Ruben	40/41
Upright freezer	11	Ham /bacon	39/40	Glass front cooler milk	35
Fry station		Steam table gravy	157	2 door 2	35
Waffle mix/ chicken.	40/41	Hot sausage	154	Eggs / meat	38/39

### 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:
<b>!!</b>	Discussed juicing machine and use/ covering with lid / cleaning - 48 hrs max time from juicing to service/ nothing exposed to customer
	Using thin plastic gallon jugs for one time use only/ unpasteurized juice / may not be sold in gallon jugs without label
	Consumer advisory in menu - ingredients by request
	Using quats for sanitizing everything f
	No refrig on creamers label at tables
W	Butter with salt - used within 1 hr at room temp / once served never returned unopened / will monitor for POSs tphc
	Sanitizer bucket -in cloth towels 200 ppm - discussed using microfiber and soaking the cloth towel first
Cos	Reminder to label allSpray bottles
<b>!!</b>	Hot water is only reaching 97 F - must be 110 to wash dishes and 100 to wash hands / reset hot water heater and water temped at 110 and up
	Dishmachine. 100 ppm / quats sanitizer covid listing
45	Fill smallHoles in walls where needed and generalDetailed cleaning
	Great date marking - watch start dates
W	Watch over stocking freezer and IN ALL UNITS
42	Minor cleaning inside upright freezer
40	Watch reuse of plastic buckets for shipping
39	Will monitor plates storage in front of steam table - open to Solitions
	Back stock unit - chorizo 41 good / this unit is fairly empty and could be used for more
W	Cooked sausage placed into deep pan and then into cold top bottom of unit 124 F and all items temp is increasing
	Fish fated today 51/ cream cheese just made 55... other temps in over loaded unit from 43/44 - this unit is in heavy use/ turned down at insp)
	Eggs pooled for immediate use only / shelled eggs on ice 38f
	Cut lettuce stored above eggs- great - discussed egg storage throughout
W	Organize all coolers - placing raw chicken and eggs on bottoms always ( discussed fly walk swim - bottom to top)
	2 door veggie cooler -cut lettuce / melons 40/
47	Watch and avoid floor storage throughout - clean under shelving etc
	Clean and dirty dishes handled by separate staff / dishwasher is aware of separating quats from bleach etc
	Kitchen is lacking storage! / discussed just keeping sausage hot all day to avoid the cool down issue in freezer
Covid	Condiments on tables / masks / menu between customers and well as tables and handle to front door etc

Received by: (signature) <b>See above</b>	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) <i>Kelly Kirkpatrick RS</i>	Print:	Samples: Y N # collected

Form EH-06 (Revised 09-2015)