Retail Food Establishment Inspection Report  First aid kit  Allergy policy  Vomit clean up Employee health																	
Date: Time in: Time out: License/Perm 9/14/2020 2:00 3:51 FOOD													Est. Type	Risk Category	Page <u>1</u> of	f 2	
						3:51 2-Follow Up	FOO 3-Complai		_	5U Inve	stig	atio	n	5-CO/Construction	6-Other	TOTAL/SC	
Es	Establishment Name: Contact/Owner N									mve	545	au0.		S-CO/Constituction     * Number of Repeat Vio     ✓ Number of Violations	lations:	TOTHE	UKL
El Chico Physical Address: Pest control :								Ho			G	reas	e trap :	Follow-up: Yes 🗸	15/85	5/B	
503 I-30 Rockwall, TX         Ecolab/monthly           Compliance Status:         Out = not in compliance         IN = in compliance										litec/:		-		1000gal/3mo	No $\square$	lation W-W/2	tah
Ma	Mark the appropriate points in the OUT box for each numbered item Mark **' a checkmark in appropriate box for IN, NO, NA, COS Mark an X in appropriate box for R												ucn				
Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days         Compliance Status       Compliance Status       Compliance Status         0       I       N       N       C																	
O U T	I N	N O	N A	C O S						O         I         N         N         C           U         N         O         A         O         Employee Health           T         -         -         S         -         -						R	
w					1. Proper cooling time and temperature					~				12. Management, food emple knowledge, responsibilities,		employees;	
•					2. Proper Cold Holding ten	mperature(41°F/ 4	5°F)							13. Proper use of restriction	and exclusion; No dis	charge from	
3										~				eyes, nose, and mouth			
	~				3. Proper Hot Holding temperature(135°F)									Preventing Contamination by Hands			
		4. Proper cooking time and temperature							~				14. Hands cleaned and prop gloves used				
	~				5. Proper reheating proceed Hours)	lure for hot holding	g (165°F in 2			~				T5. No bare hand contact wit alternate method properly for			
		~			6. Time as a Public Health			<u> </u>				Highly Sus	ceptible Populations				
		•												16. Pasteurized foods used; p	prohibited food not of		
					Approved Source					~				Pasteurized eggs used when required EGGS COOKED			
	~				7. Food and ice obtained fr good condition, safe, and u									Chemicals			
	destruction Sygma						1						XX7 1 1 12 14				
	~	8. Food Received at proper temperature							~				17. Food additives; approved & Vegetables	and properly stored;	Washing Fruits		
					•	rom Contaminatio	on			V				18. Toxic substances properl	y identified, stored ar	nd used	
					9. Food Separated & protect preparation, storage, displa		uring food		Water/ Plumbing				or/ Plumbing				
	V						Closened and					19. Water from approved source; Plumbing installed; proper					
	~				10. Food contact surfaces and Returnables ; Cleaned and Sanitized at 200 ppm/temperature				3 backflow device			ince, Fluinbing instan	eu, proper				
	~				11. Proper disposition of reconditioned <b>discar</b>			~				20. Approved Sewage/Waste disposal	ewater Disposal Syste	m, proper			
0	Ι	N	N	С	Priori	ity Foundation	n Items (2 Po	ints)	violat 0		Req N	uire N	Cor	rrective Action within 10 day	VS		R
Ŭ T	N	0	A	Ö S	Demonstration of				Ŭ T		0	A	Ö S	Food Temperatu	re Control/ Identific	cation	
	~				21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager/ Posted					~				27. Proper cooling method u Maintain Product Temperatu		quate to	
	~	22. Food Handler/ no unauthorized persons/ personnel			personnel			~				28. Proper Date Marking and	1 disposition				
					Safe Water, Recordk			~				29. Thermometers provided, Thermal test strips	accurate, and calibrat	ted; Chemical/			
					La			•				digital					
	~										-	Requirement, Prerequisite for Operation blishment Permit (Current/insp report sign posted					
	~				24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled					~				12/31/2020	rmit (Current/inspire	eport sign posted	u)
					Conformance with					I				Utensils, Equ	ipment, and Vendin		
	~				25. Compliance with Varia HACCP plan; Variance ob processing methods; manu	btained for speciali	ized			~				31. Adequate handwashing f supplied, used	acilities: Accessible a	nd properly	
					Consun	mer Advisory			2					32. Food and Non-food Cont designed, constructed, and us		e, properly	
	~				26. Posting of Consumer A foods (Disclosure/Reminder in menu				2					33. Warewashing Facilities; Service sink or curb cleaning		used/	
0									tion Not to Exceed 90 Days or Next Inspection , Whichever Comes First					R			
U T	N	0	A	O S		Food Contaminat			U T		0	Α	O S		Identification		
1					34. No Evidence of Insect animals					~				41.Original container labelin	g (Bulk Food)		
	~				35. Personal Cleanliness/ea	0. 0				1					sical Facilities		
	~				36. Wiping Cloths; properl				1					42. Non-Food Contact surfac			
	~				37. Environmental contam					~				43. Adequate ventilation and			
	•				38. Approved thawing met	thod		Ц		~				44. Garbage and Refuse prop			
					1	Use of Utensils	-		1					45. Physical facilities installe	, ,		
1					39. Utensils, equipment, & dried, & handled/ In use u					~				46. Toilet Facilities; properly	y constructed, supplied	d, and clean	
1					40. Single-service & single and used	e-use articles; proj	perly stored		┢	~				47. Other Violations			
			-					1	1	1	1						1

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

Form EH-06 (Revised 09-2015)

Establish	nent Name:	Physical A <b>503</b> I-	30	City/State: Rockwa	III, TX	License/Permit # Page FOOD5030	<u>2</u> of <u>2</u>				
Item/Loc	ation	Tomp F	TEMPERATURE OBSERVA Item/Location	TIONS Temp F	Item/Locati	ion.	Tomp F				
		Temp F					Temp F				
salsa			cold wells/cheese			nchiladas	144				
cold	top/sour cream	41	drawers/raw bee	f 41	ground beef		148				
	cheese	46	raw chicken	41	cold wells/shredded cheese		41				
whi	oped topping	61	grill drawers/pork	44	WIC/chicken/black beans		37/38				
ur	nder/shrimp	35	cheese	44	C	ut lettuce/	37				
	corn dog	41	hot wells/beef/chicker	151/14i		beans	108				
hc	ot wells/beef	154	beans/rice	143/158							
	chicken	166	reach in warmer/tamales	143							
	OBSERVATIONS AND CORRECTIVE ACTIONS										
Item Number	AN INSTECTION OF TOOR ESTABLISHMENT HAS BEEN MADE. TOOR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND										
	Bar Hand sink 100+										
33	Dishwasher not sanitizing. Will use kitchen dishwasher										
	Sani bucket 200 ppm quats										
40	Avoid use of foil on drink dispenser and saran on plumbing										
	Beer taps are cleaned/maintained by supploer										
0.4	Kitchen hand sink 100										
34	Dead roach										
19	Standing water under ice machine. Drain not draining but there is an established air gap										
	Dishwasher 100 ppm bleach										
	Dishwasher hand sink 100+										
2	3 comp sink 110+ Whinped topping out for 2 hours Will place under counter cooler in ice to cool to 41										
37	Whipped topping out for 2 hours. Will place under counter cooler in ice to cool to 41 Left cold top with condensation. Protect foods under.										
2	Left cold top with condensation. Protect foods under. Cheese in cold wells, out for 2 hours. Discussed having only amounts out for 4 hours of service then discard										
	All TCS foods in all drawers, cold tops to be held at 41 or below										
39	Store slicer clean										
27	Beans at 108, made an hour previous. Use shallow.metal pans to cool 2 hours to 70 then 4 hours to 41										
45	Missing grout, food debris, standing water										
42	Maintenance to walls, baseboards										
32	Rusty shelves throughout										
	Covid-19 Response										
	Masks and gloves worn by all employees										
	Seating at 50% and socially distanced										
	Tables sanitized after every customer. Contact surfaces sanitized every 30 minutes										
	Condiments upon request, sanitized after every use Testing required if ill or exposed. Monitoring employee health, temps taken daily										
Received by:     Print:     Title: Person In Charge/ Owner											
(signature)	Sergio Santos		Sergio	Sant	OS	Manager					
Inspected (signature)	Sergio Santos <sup>Iby:</sup> Chrísty C	nto	Christy			<u> </u>					
	Cru Usly C	orte	$\gamma = 0 \dots \delta U$		54	Samples: Y N # collect	ed				