Retail Food Esta									ent	In	spe	ecti	Allergy policy Vomit clean up Employee health	 ✓ Allergy policy ✓ Vomit clean up ✓ Employee health 				
Date: Time in: Time out: License/P 1/18/2022 10:10 11:22 FS-9													Est. Type Risk Category Page <u>1</u> of <u>2</u>	_				
Purpose of Inspection: 1. Routine 2-Follow Up 3-Compla							at 4-Investigation 5-CO/Cons					1	5-CO/Construction 6-Other TOTAL/SCOR	E				
Establishment Name: Contact/Owner M Firehouse Subs Ken Lee						Name	Name: *					★ Number of Repeat Violations: ✓ Number of Violations COS:						
Physical Address: Pest control :					onthly	Hood Greas			G	reas	Ise trap : Follow-up: Yes I 15/85/E	3						
I-30 Rockwall, TX owner to send/mor Compliance Status: Out = not in compliance IN = in compliance																		
Mark the appropriate points in the OUT box for each numbered item Mark '										applicable $COS = corrected on site R = repeat violation W-Watchbox for IN, NO, NA, COS Mark an in appropriate box for Rctive Action not to exceed 3 days$								
Co	Compliance Status					R	-		ompli		R							
U T	N	0	A	C O S	Time and Temperature for Food Safety (F = degrees Fahrenheit)			U T	N	N	A	O S	Employee Health					
	~				1. Proper cooling time and temperature				~				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
3					2. Proper Cold Holding temperature($41^{\circ}F/45^{\circ}F$)		-		~				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth					
3					3. Proper Hot Holding temperature(135°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 Hours)				~			~	15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED YN)					
	~	 ✔ 6. Time as a Public Health Control; procedures & records 											Highly Susceptible Populations					
			Approved Source						~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required NO EQGS					
	~				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction BeneKeith								Chemicals					
	~				8. Food Received at proper temperature				~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables					
_	Ľ				check at receipt		-		-				water only 18. Toxic substances properly identified, stored and used					
_			<u> </u>		Protection from Contamination 9. Food Separated & protected, prevented during food			3					· · · · · · · · · · · · · · · · · · ·					
	~				preparation, storage, display, and tasting 10. Food contact surfaces and Returnables ; Cleaned and		_	Water/ Plumbing 19. Water from approved source; Plumbing install				Water/ Plumbing 19. Water from approved source: Plumbing installed: proper						
W		Sanitized at <u>200</u> ppm/temperature					-		~				backflow device 20. Approved Sewage/Wastewater Disposal System, proper					
	reconditioned discarded							~					disposal					
													orrective Action within 10 days					
0	I	N	N	C	Priority Foundation Items (2 P	oints)	vio	olati 0	ions . I	Req N	uire N	Cor		R				
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Retail Food Establishment Inspection Report

1st followup is free. Any additional followups will result in a \$50 fee.

Received by: (signature) Cathy Holcomb	^{Print:} Cathy Holcomb	Title: Person In Charge/ Owner Manager
Inspected by: Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: OUSE Subs	Physical A		City/State: License/Permit # FS-9166			Page <u>2</u> of <u>2</u>				
		100	TEMPERATURE OBSERVAT								
Item/Loc		Temp F	Item/Location			Location		np F			
cold top 41	/ everything TCS above		glass front/ham	41							
che	eese/cheese	51/40	2 door freezer ambient	10							
ŀ	am/turkey	48/49	WIC/ham	40							
Cl	ut tomatoes	58/54	turkey	41							
(cut lettuce	53	roast beef	39							
	tuna	54	marinara	26							
ho	t wells/soup	126									
	marinara	109									
Item	AN INCRECTION OF YOUR FO		SERVATIONS AND CORRECTIV			E CONDITIONS ODSE					
Number	NOTED BELOW:	IABLISHME	NT HAS BEEN MADE. YOUR ATTENT	ION IS DIRE	CIED IO IH	IE CONDITIONS OBSE	KVED AND				
	Hand sink 109 F										
2	Discarded everythir	ng TCS f	from last night in cold to	p as not	cold ho	olding at 41 or	below				
	Unit must be repaire	ed to co	ld hold at 41 or below								
	Temporarily will use	e ice bat	hs and small amounts f	or 4 hou	irs only	to discard					
	Commercially seale	d bags	opened this morning and	d placed	l in hot	wells					
3	Must heat to manufac	turer's in	structions first before placi	ng in hot	wells (to	o hot hold at 13	5+F)				
	Will heat to 145 F a	nd then	hot hold in hot holding	units							
	Sani bucket 200 pp	m quats									
31			for storage/ boxes of gl	oves in	sink						
	Back hand sink 108	F									
	3 comp sink 112 F										
	Sani sink setup to 2										
18		ay bottle	s low and separate on d	lry dish i	rack						
34	Fruit flies										
W	Watch air gap unde										
35	Store employee drir										
45			f being repaired. Teddy	with city	to be se	ent info/repair t	icket.				
45											
45											
	Soda/tea nozzles WRS daily, soda machine maintenanced by supplier (Coke) monthly RR sinks 100 F										
	All cookies, etc labeled correctly										
42											
W	Advised to keep ice deflector clean/sanitized to prevent slime										
Received (signature)	•		Print:			Title: Person In Charg					
	Cathy Holcomb		Cathy H	OICO	mb	Manage	r				
Inspected (signature)	Cathy Holcomb ^{Iby:} Chrísty Cor	tez, î	RS Christy Co	ortez.	RS	Complex V N	# 20111 1				
Form EH-06	5 (Revised 09-2015)	U	J			Samples: Y N	# collected				