Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

Date: 7/20/2023			02	23											Est. Type Risk Category Page 1 of	<u>2</u>		
Establishment Name: Contact/					Complai Owner N		4-	Inve	stiga	ation		5-CO/Construction 6-Other TOTAL/SCO * Number of Repeat Violations:	ORE					
Firehouse Subs Physical Address: Pest control:													✓ Number of Violations COS: 10/90)/A				
10	1981C 67	ai Ac I-30	Ro	ss: ock	wall, TX	Fo	rterra/6-2		3	n/a			Sa	ndtı	se trap : Follow-up: Yes I U/ 90 No			
Ma					tatus: Out = not in co points in the OUT box for Prio	each numbered it		Mark 'v		eckm	ark in	appı	opria	te bo	pplicable COS = corrected on site R = repeat violation W-Wa ox for IN, NO, NA, COS Mark an in appropriate box for R tive Action not to exceed 3 days	itch		
O U	Compliance Status D I N N C Time and Temperature for Food Safety Time and Temperature for Food Safety					R		O I N U N O		Status N C A O		Employee Health						
T	14		A	s	(F = do	egrees Fahrenhe and temperature				T			A	s	12. Management, food employees and conditional employees;			
	~				, 0						~				knowledge, responsibilities, and reporting			
	~				2. Proper Cold Holding	temperature(41°	°F/ 45°F)				~				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth			
3	3. Proper Hot Holding temperature(135°F)					5°F)								Preventing Contamination by Hands				
		~			4. Proper cooking time	and temperature	e				~				14. Hands cleaned and properly washed/ Gloves used properly Gloves used			
		~			5. Proper reheating prod Hours)	cedure for hot ho	olding (165°	F in 2			~				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)			
	6. Time as a Public Health Control		alth Control; pro	l; procedures & records								Highly Susceptible Populations						
					Approved Source						~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required NO EGGS			
	\ <u>\</u>				7. Food and ice obtaine good condition, safe, ar destruction		od in							Chemicals				
	~	H			8. Food Received at proper temperature						~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables			
					check at rece	IPI I from Contami	ination				~				18. Toxic substances properly identified, stored and used			
	~				9. Food Separated & pr preparation, storage, dis			ood							Water/ Plumbing			
	~				10. Food contact surfac Sanitized at <u>200</u>	es and Returnab ppm/temperatur	oles ; Cleaner re	d and		3				-	19. Water from approved source; Plumbing installed; proper backflow device			
	~				11. Proper disposition of reconditioned disc		viously serve	d or			~				20. Approved Sewage/Wastewater Disposal System, proper disposal			
			_		D!						-							
		27	N. 1	-	Pri	ority Founda	ation Item	s (2 Poi		_	_	_		_	rrective Action within 10 days	-		
O U T	I N	N O	N A	C O S	Demonstration	of Knowledge/	/ Personnel		nts) 1	violat O U T	I N	Req N O	N A	Cor C O S	Food Temperature Control/ Identification	R		
		N O		О	Demonstration 21. Person in charge pr and perform duties/ Cer 2	esent, demonstrartified Food Mar	ration of kno	wledge,		O U	I N	N	N	C 0	·	R		
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Retail Food Establishment Inspection Report

Received by: (signature) Kenia Garcia	Print: Kenia Garcia	Title: Person In Charge/ Owner Manager
Inspected by: Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name:	Physical A	ddress:	City/State:		License/Permit #	Page	<u>2</u> of <u>2</u>				
Fireh	nouse Subs	1067	I-30	Rockwa	ıll, TX	FS-9166						
Item/Loc	cation	Temp F	TEMPERATURE OBSERVA	Temp F	Item/Loca	ntion		Temp F				
cold top/turkey		41	steam wells/meatballs	177		chicken		37				
	roast beef	41	marinara	178		ham		36				
	ham chicken cheese cut tomatoes under/turkey		water for utensils	156		ham		36				
			chile	153								
			potato soul	117								
CL			glass front cooler/ham	41								
u			2 door freezer ambient	7								
	chicken	41	WIC/turkey	36								
Item	AN INSPECTION OF VOLDES		SERVATIONS AND CORRECTIONS AND CORRECTIONS AND CORRECTIONS AND COLUMN ATTENT		.~	HE CONDITIONS OBSER	VED AN	ND				
Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:											
	Front hand sink equipped. 100+F.											
19	Front hand sink leaking under/plumbing											
	3 comp sink 120 F											
	Sani sink setup to 200 ppm quats											
32	Need to replace knife magnet above 3 comp sink/rusty and not cleanable											
	New cold top and cutting board. Good											
3	Potato soup in steam well not hot holding at 135+F											
	Discarded soup as had been more than 4 hours/avoid double panning											
24	Wrapped cookies for individual sale at front register need labels with ingredients											
	Back hand sink 100+F equipped											
W	Some food debris on floor in back/to clean/after lunch rush/sweeping at inspection											
	Sani buckets 200 ppm quats											
	Knife magnets under counter clean											
	Ice machine nozzle											
32			oinets under register									
02	Come expected wee	o iii oai	oniote ander regioter									
D'	l hou		Dudant.			Tido, Dame Y C	/ O					
Received (signature)	Kenia Garcia		Kenia C	arci	a	Title: Person In Charge/Manager						
Inspected (signature)	Kenia Garcia d by: Christy Cor	tez, 1	RS Christy Co	ortez,	RS		# collecte	-d				
	6 (Revised 09-2015)		1			Sumples, 1 19 7	. concett					