## **Retail Food Establishment Inspection Report**

First aid kit
Allergy policy
Vomit clean up
Employee health

Date: 4/6/2021		1	Time in:		License/Permit # FS-9166							Est. Type Risk Category Page 1 of 2	<u>.                                    </u>				
	4/6/2021 2:15 3:12 FS-9  Purpose of Inspection: 1-Routine 2-Follow Up 3-Comple										5-CO/Construction 6-Other TOTAL/SCOR	E					
Establishment Name:  Firehouse Subs  Contact/Owner N Ken Lee							* Number of					* Number of Repeat Violations: ✓ Number of Violations COS:					
Physical Address: I-30 Rockwall, TX Pest control: to provide							Hood Grease trap: Follow-up: Yes / In/a to provide No						20/80/B				
M					Status: Out = not in co	omphance	in compliance		= not						oplicable COS = corrected on site R = repeat violation W-Watch ox for IN, NO, NA, COS Mark an in appropriate box for R	1	
										re In	nmed	liate	Cor	recti	ive Action not to exceed 3 days		
O U	$ \begin{array}{c c c c c c c c c c c c c c c c c c c $				R	O U			C	Employee Health							
Т	~			S	Proper cooling time		-			Т	~			S	12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting		
					2. Proper Cold Holding	g temperature(4	1°F/ 45°F)								13. Proper use of restriction and exclusion; No discharge from		
3					2 D W. W. III		-50E				~				eyes, nose, and mouth		
	3. Proper Hot Holding temperature(135°F)  4. Proper cooking time and temperature													Preventing Contamination by Hands  14. Hands cleaned and properly washed/ Gloves used properly			
		~			Proper cooking time     Proper reheating pro	*		F in 2			~				gloves used 15. No bare hand contact with ready to eat foods or approved		
		~			Hours)						~				alternate method properly followed (APPROVED $\dot{Y}_{.}$ $\dot{N}_{.}$ .)		
	~				6. Time as a Public He	ealth Control; pr	ocedures & r	records							Highly Susceptible Populations		
					Aj	pproved Source	e				~				Pasteurized foods used; prohibited food not offered     Pasteurized eggs used when required		
					7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite				П				ı		Charried		
	~		destruction BeneKeith											Chemicals			
	~	8. Food Received at proper tempera				ature				~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables Water only			
	Protection from Conta					nination	ination							18. Toxic substances properly identified, stored and used			
	~				9. Food Separated & p preparation, storage, d			od							Water/ Plumbing		
3					10. Food contact surfact Sanitized at 200	ces and Returna ppm/temperatu	bles ; Cleaned are	d and		3				-	19. Water from approved source; Plumbing installed; proper backflow device		
	~				11. Proper disposition reconditioned	of returned, pre-	viously served	d or			~				20. Approved Sewage/Wastewater Disposal System, proper disposal		
							lation Item	ıs (2 Poi	nts) v	riolat	_	Req	uire	Cor	rrective Action within 10 days		
															receive filework with the target		
O U T	I N	N O	N A	C O S	Demonstratio	on of Knowledge	e/ Personnel		R	O U T	N	N O	N A	C O S	Food Temperature Control/ Identification	R	
		N O		О	Demonstratio  21. Person in charge p and perform duties/ Co	resent, demonst	tration of know	wledge,		$\mathbf{U}$	N	N O		О		R	
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## **Retail Food Establishment Inspection Report**

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

Form EH-06 (Revised 09-2015)

First followup is free. Additional followups will result in a \$50 fee.

	ment Name: Nouse Subs	Physical A	ddress:	City/State: Rockwa	all, TX	License/Permit # FS-9166	Page <u>2</u> of <u>2</u>					
T. (T		- T	TEMPERATURE OBSERVA		T. /T							
Item/Loc		Temp F	Item/Location	Temp F	Item/Locat	non	Temp 1					
WIC/h	nam	44	cut tomatoes	43								
turk	key/roast beef	44/44	under/tuna	44								
2 do	or freezer ambient	13	diced chicken	44								
left h	not well/meatballs	135	glass front meat cooler/har	n 36								
p	otato soup	144										
right	hot well/meatballs	158										
C	old top/ham	44										
	turkey	44										
	ton ito y		SERVATIONS AND CORRECT	TIVE ACTION	NS							
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW:	TABLISHME	NT HAS BEEN MADE. YOUR ATTE	NTION IS DIRE	CTED TO TH	IE CONDITIONS OBSEI	RVED AND					
19	Hand sink in back le	eaking h	eavily under sink									
W			ds to be usable and ha	ave soap	avaliabl	е						
	Hand sink front 100	F		_								
	3 comp sink 110 F											
	Sani sink setup 200 ppm quats											
2	İ		VIC. Must cold hold at 4	11 or belo	w. Repa	air within 24 hou	urs.					
35			and separate in WIC									
19 Need air gap under ice machine												
10	Clean ice deflector	panei										
34 45	Fruit flies  Maintenance to bas	soboard	s soal gaps									
32	Seal exposed wood											
10	Need sani bucket s											
42	Clean under cold to	•	ing convice									
2		•	derline. Must cold hold	at 41 or b	elow. F	Repair within 24	hours.					
36	Store wiping cloths					•						
40	Avoid storing spice	s in sing	le use container. Use	a NSF c	ontaine	rinstead						
W	When cooling, MUST aggressively cool hot items by stirring, shallow metal pans, not covered, take temps often											
	Must reach 70 within 2 hours then 4 hours to 41											
18	Label all spray bottles											
0.4	Soda/tea nozzles WRS daily											
34	Gap at front door											
Received (signature)			Dylan C	avine	ess	Title: Person In Charge Managei						
Inspecte			Print:		-							
(signature)	Christy Cov	tez, 1	RS Christy C	ortez,	RS	Samples: Y N	# collected					