Retail Food Establishment Inspection Report  First aid kit  Allergy policy  Vomit clean up Employee healt											policy ean up										
	Date:         Time in:         Time out:         License/P           10/13/2020         1:34         2:53         FS9 <sup>2</sup>										Es	st. Type	$\begin{array}{c} \text{Risk Category} \\ \text{Page } \underline{1}  \text{of } \underline{2} \end{array}$								
Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain					int	4-	Inve	stiga	atio	n	5-CO/Construc		6-Other	TOTAL/SCO	ORE						
Establishment Name: Contact/Owner N Firehouse Subs Ken Lee						Name:							<ul> <li>★ Number of Repeat Violations:</li> <li>✓ Number of Violations COS:</li> </ul>								
Physical Address: Pest control : I-30 Rockwall, TX to provide									Hood Grease trap : Follow-up: Yes						20/80	/B					
<b>Compliance Status:</b> Out = not in compliance $IN = in$ compliance NO = n															pplicable COS = co tox for IN, NO, NA, CO	orrected on sit	te $\mathbf{R}$ = repeat via an $\mathbf{X}$ in appropriate	plation W- Wat	tch		
	Priority Items (3 Points) violations Red										ımed	liate	Cor	rrect			• • • •	te 00x 101 K	-		
Compliance Status       O     I     N     N     C       U     N     O     A     O   Time and Temperature for Food Safety							R			iance N O	e Sta N A	tus C O			R						
Т	U     N     O     A     O       T     N     O     A     O       S     (F = degrees Fahrenheit)       I     Proper cooling time and temperature							Т				s	12. Management, fo	ood employe		employees;					
										~	knowledge, responsibilities, and report						-				
3	2. Proper Cold Holding temperature(41°F/45°F) WIC										~				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth						
	3. Proper Hot Holding temperature(135°F)														Preve	Preventing Contamination by Hands					
	~				4. Proper cooking tir	me and temperature					~				14. Hands cleaned and properly washed/ Gloves used properly Gloves USed						
	5. Proper reheating procedure for hot holding (165°F in 2 Hours)							55°F in 2			~				15. No bare hand co alternate method pro						
-	6. Time as a Public Health Control; procedures & records							& records							Hig	ghly Suscen	tible Populations				
_	•					4 10									16. Pasteurized food	Highly Susceptible Populations foods used; prohibited food not offered waved when required					
	Approved Source 7. Food and ice obtained from approved source; Food in									~				NO EGGS	steurized eggs used when required <b>D eggs</b>						
	~				good condition, safe destruction								Chemicals								
	~	8. Food Received at proper temperature									~				<ul><li>17. Food additives;</li><li>&amp; Vegetables</li></ul>	approved ar	nd properly stored;	Washing Fruits			
	Check at receipt Protection from Contamination								W	W 18. Toxic substances properly identified, stored and					nd used						
	~				9. Food Separated & preparation, storage,			<u> </u> ]					Water/ Plumbing								
w					10. Food contact sur Sanitized at 200			ned and		3					<ol> <li>Water from approved source; Plumbing installed; proper backflow device</li> </ol>						
	~				11. Proper disposition reconditioned dis		usly ser	rved or		-	~				20. Approved Sewage/Wastewater Disposal System, proper disposal						
	T	N	N	C			ion Ite	ems (2 Poi	ints) vi	iolat 0	_	Req N	uire N	e Cor C	rrective Action withi	in 10 days			R		
U T	N	0	N A	C O S		tion of Knowledge/			ĸ	U T	N	0	A	o s	Food Te	Food Temperature Control/ Identification					
2					21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager/ Posted 27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature							equate to									
-	~	22. Food Handler/ no unauthorized persons/ personnel						onnel			~				28. Proper Date Ma	rking and di	sposition				
Safe Water, Recordkeeping and Food Package Labeling								2					29. Thermometers p Thermal test strips	rs provided, accurate, and calibrated; Chemical/ ps							
	23. Hot and Cold Water available; adequate pressure, safe												Permit Requirement, Prerequisite for Operation								
	~		24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled								~				30. Food Establishment Permit (Current/insp report sign post 12/31/2020						
	Conformance with Approved Procedures														Uten	nsils, Equip	ment, and Vendir				
	~				25. Compliance with HACCP plan; Varian processing methods;	nce obtained for spec	alized	ess, and			~				31. Adequate handw supplied, used	<ol> <li>Adequate handwashing facilities: Accessible and properly applied, used</li> </ol>					
	Consumer Advisory						2					designed, constructe									
	~				26. Posting of Consu foods (Disclosure/Re	umer Advisories; raw eminder/Buffet Plate				2			_		33. Warewashing Fa Service sink or curb			, used/			
					Core Items (1 P	oint) Violations R	equire	Corrective	Action						ays or Next Inspectio	on , Whiche	ever Comes First				
O U T	I N	N O	N A	C O S	Preventio	on of Food Contami	nation		R	O U T	I N	N O	N A	C O S		Food Id	entification		R		
	~				34. No Evidence of l animals						~				41.Original containe	er labeling (	Bulk Food)				
1					35. Personal Cleanlin			cco use			· · · · · · · · · · · · · · · · · · ·			l Facilities							
1					36. Wiping Cloths; p		red			1 42. Non-Food Contact surfac											
	~				37. Environmental contamination						~				_	<ul><li>43. Adequate ventilation and lighting; designated areas used</li><li>44. Garbage and Refuse properly disposed; facilities maintained</li></ul>					
38. Approved thawing method								~				Ũ									
Proper Use of Utensils						1					45. Physical facilitie				_						
1	39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used							~				46. Toilet Facilities	, properly co	mstructed, supplie	u, and clean						
1					40. Single-service & and used	z single-use articles; j	properly	stored			~		47. Other Violations								

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)

Establishmer Fireho	nt Name: JUSE Subs	Physical A	City/State: Rockwall, TX			License/Permit # Page 2 FS9166		<u>2</u> of <u>2</u>			
			TEMPERATURE OBSERVA	TIONS	-			•			
Item/Locati	ion	Temp F	Item/Location	Temp		tem/Locati	on		Temp F		
hot hold	/meatballs	176	turkey/roast bee	f 44/4	3						
	chili	178									
co	ld top/ham	41									
chic	cken/turkey	41/41									
unc	der/cheese	41									
glass f	ront cooler/sauce	41									
2 door	freezer ambient	-6.5									
V	VIC/ham	43/45									
Items	OBSERVATIONS AND CORRECTIVE ACTIONS										
	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:										
	Hand sink 100										
	Avoid use of to go cups as scoops in seasonings. use a handled scoop instead										
	Store spray bottles (cleaners) low and separate, not adjacent to steamers (not in use today)										
	Clean knife magnets Store wiping cloths in sani buckets										
	Store wiping cloths in sani buckets Clean shelves where cups are stored										
	Clean shelves where cups are stored										
	Avoid storing utensils for meatballs, etc in. standing water. Instead WRS every 4 hours.										
	Sani bucket 200 ppm quats Store employee drinks, etc low and separate										
	Clean fans throughout front and back										
	Certified Food Manager to be on duty at all during prep and service										
			s for hot foods if kept over					to 41			
	• ·		Will check at end of inspec	•							
29 N	leed working meta	l stem tl	nermo								
2 V	VIC borderline tem	ps. Ne	eds to cold hold at 41	or belov	V						
19 N	leed air gap under	ice mad	hine in back. Drain pi	pe can'	t be	sitting	on drain				
19 N	leed back siphona	ge devid	ce on back mop sink								
45 C	Clean wall behind p	rep tabl	e, behind 3 comp sink								
32 E	Exposed wood in fre	ont cabi	nets, shelves, rusty sh	elves i	n ba	ick sto	rage				
Received by (signature)				Silv	'er		Title: Person In Charge				
Inspected by (signature)	Jessica Silvers <sup>y:</sup> Chrísty C	orte	Christy	_		7					
Form EH-06 (F	Revised 09-2015)						Samples: Y N	# collecte	a		