

Retail Food Establishment Inspection Report

- First aid kit
- Allergy policy
- Vomit clean up
- Employee health

| | | | | | | |
|---------------------------|-------------------------|--------------------------|------------------------------------|-----------|---------------|---------------------------|
| Date: 9/23/2022 | Time in: 2:48 | Time out: 4:10 | License/Permit # FS-8861 | Est. Type | Risk Category | Page <u>1</u> of <u>2</u> |
|---------------------------|-------------------------|--------------------------|------------------------------------|-----------|---------------|---------------------------|

| | | | | | | |
|----------------------------------------------------------------------|--------------------------------------|--------------------------------------|------------------------------------------|--------------------------------------------|----------------------------------|-------------|
| Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine | <input type="checkbox"/> 2-Follow Up | <input type="checkbox"/> 3-Complaint | <input type="checkbox"/> 4-Investigation | <input type="checkbox"/> 5-CO/Construction | <input type="checkbox"/> 6-Other | TOTAL/SCORE |
|----------------------------------------------------------------------|--------------------------------------|--------------------------------------|------------------------------------------|--------------------------------------------|----------------------------------|-------------|

| | | | |
|--------------------------------------------------|---------------------|--------------------------------------|----------------|
| Establishment Name: Genghis Grill | Contact/Owner Name: | * Number of Repeat Violations: _____ | 12/88/B |
| Physical Address: 1699 Laguna Dr Rockwall, TX | | ✓ Number of Violations COS: _____ | |

| | | | |
|----------------------------------|------------------|--------------------------------------|-----------------------------------------------------------------------------------|
| Pest control : Ecolab/monthly | Hood VIRO/3mo | Grease trap : Southwaste/1000gal/ | Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
|----------------------------------|------------------|--------------------------------------|-----------------------------------------------------------------------------------|

Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- Watch
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

Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days

| O | U | T | I | N | O | N | A | C | O | S | R | Compliance Status | R |
|---|---|---|---|---|---|---|---|---|---|---|---|-----------------------------------------------------------------------------------------------------------------------|---|
| | | | | | | | | | | | | Time and Temperature for Food Safety (F = degrees Fahrenheit) | |
| | | | ✓ | | | | | | | | | 1. Proper cooling time and temperature | |
| | | | | | | | | | | | | 2. Proper Cold Holding temperature(41°F/ 45°F) | |
| | | | ✓ | | | | | | | | | 3. Proper Hot Holding temperature(135°F) | |
| | | | | | | | | | | | | 4. Proper cooking time and temperature | |
| | | | | | | | | | | | | 5. Proper reheating procedure for hot holding (165°F in 2 Hours) | |
| | | | ✓ | | | | | | | | | 6. Time as a Public Health Control; procedures & records | |
| | | | | | | | | | | | | Approved Source | |
| | | | ✓ | | | | | | | | | 7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction | |
| | | | ✓ | | | | | | | | | 8. Food Received at proper temperature check at receipt | |
| | | | | | | | | | | | | Protection from Contamination | |
| | | | ✓ | | | | | | | | | 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting | |
| | | | ✓ | | | | | | | | | 10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature | |
| | | | ✓ | | | | | | | | | 11. Proper disposition of returned, previously served or reconditioned discarded | |
| | | | | | | | | | | | | Employee Health | |
| | | | ✓ | | | | | | | | | 12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting | |
| | | | ✓ | | | | | | | | | 13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth | |
| | | | | | | | | | | | | Preventing Contamination by Hands | |
| | | | ✓ | | | | | | | | | 14. Hands cleaned and properly washed/ Gloves used properly | |
| | | | ✓ | | | | | | | | | 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N) | |
| | | | | | | | | | | | | Highly Susceptible Populations | |
| | | | ✓ | | | | | | | | | 16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required eggs cooked | |
| | | | | | | | | | | | | Chemicals | |
| | | | ✓ | | | | | | | | | 17. Food additives; approved and properly stored; Washing Fruits & Vegetables water only | |
| | | | | | | | | | | | | 18. Toxic substances properly identified, stored and used | |
| | | | | | | | | | | | | Water/ Plumbing | |
| | | | ✓ | | | | | | | | | 19. Water from approved source; Plumbing installed; proper backflow device | |
| | | | ✓ | | | | | | | | | 20. Approved Sewage/Wastewater Disposal System, proper disposal | |

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days

| O | U | T | I | N | O | N | A | C | O | S | R | Compliance Status | R |
|---|---|---|---|---|---|---|---|---|---|---|---|----------------------------------------------------------------------------------------------------------------------------------------------------|---|
| | | | | | | | | | | | | Demonstration of Knowledge/ Personnel | |
| | | | ✓ | | | | | | | | | 21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager/ Posted 2 | |
| | | | ✓ | | | | | | | | | 22. Food Handler/ no unauthorized persons/ personnel | |
| | | | | | | | | | | | | Safe Water, Recordkeeping and Food Package Labeling | |
| | | | ✓ | | | | | | | | | 23. Hot and Cold Water available; adequate pressure, safe | |
| | | | ✓ | | | | | | | | | 24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled | |
| | | | | | | | | | | | | Conformance with Approved Procedures | |
| | | | ✓ | | | | | | | | | 25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions | |
| | | | | | | | | | | | | Consumer Advisory | |
| | | | ✓ | | | | | | | | | 26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label meats to required temps | |
| | | | | | | | | | | | | Food Temperature Control/ Identification | |
| | | | ✓ | | | | | | | | | 27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature | |
| | | | ✓ | | | | | | | | | 28. Proper Date Marking and disposition | |
| | | | ✓ | | | | | | | | | 29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips digital | |
| | | | | | | | | | | | | Permit Requirement, Prerequisite for Operation | |
| | | | ✓ | | | | | | | | | 30. Food Establishment Permit (Current/insp report sign posted) 12/31/2022 | |
| | | | | | | | | | | | | Utensils, Equipment, and Vending | |
| | | | ✓ | | | | | | | | | 31. Adequate handwashing facilities: Accessible and properly supplied, used | |
| | | | | | | | | | | | | 32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used | |
| | | | ✓ | | | | | | | | | 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided | |

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First

| O | U | T | I | N | O | N | A | C | O | S | R | Compliance Status | R |
|---|---|---|---|---|---|---|---|---|---|---|---|------------------------------------------------------------------------------------------------------------|---|
| | | | | | | | | | | | | Prevention of Food Contamination | |
| | | | ✓ | | | | | | | | | 34. No Evidence of Insect contamination, rodent/other animals | |
| | | | | | | | | | | | | 35. Personal Cleanliness/eating, drinking or tobacco use | |
| | | | ✓ | | | | | | | | | 36. Wiping Cloths; properly used and stored | |
| | | | ✓ | | | | | | | | | 37. Environmental contamination | |
| | | | ✓ | | | | | | | | | 38. Approved thawing method | |
| | | | | | | | | | | | | Proper Use of Utensils | |
| | | | ✓ | | | | | | | | | 39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used | |
| | | | ✓ | | | | | | | | | 40. Single-service & single-use articles; properly stored and used | |
| | | | | | | | | | | | | Food Identification | |
| | | | ✓ | | | | | | | | | 41. Original container labeling (Bulk Food) | |
| | | | | | | | | | | | | Physical Facilities | |
| | | | ✓ | | | | | | | | | 42. Non-Food Contact surfaces clean | |
| | | | ✓ | | | | | | | | | 43. Adequate ventilation and lighting; designated areas used | |
| | | | ✓ | | | | | | | | | 44. Garbage and Refuse properly disposed; facilities maintained | |
| | | | ✓ | | | | | | | | | 45. Physical facilities installed, maintained, and clean | |
| | | | ✓ | | | | | | | | | 46. Toilet Facilities; properly constructed, supplied, and clean | |
| | | | ✓ | | | | | | | | | 47. Other Violations | |

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

Retail Food Establishment Inspection Report

| | | |
|--------------------------------------------------------|----------------------------------|--------------------------------------------------|
| Received by: (signature) <i>Dan DeLatte</i> | Print: Dan DeLatte | Title: Person In Charge/ Owner Manager |
| Inspected by: (signature) <i>Christy Cortez, RS</i> | Print: Christy Cortez, RS | Business Email: |

Form EH-06 (Revised 09-2015)

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|---------------------------------------------|--------------------------------------------|------------------------------------|------------------------------------|---------------------------|
| Establishment Name: Genghis Grill | Physical Address: 1699 Laguna Dr | City/State: Rockwall, TX | License/Permit # FS-8861 | Page <u>2</u> of <u>2</u> |
|---------------------------------------------|--------------------------------------------|------------------------------------|------------------------------------|---------------------------|

TEMPERATURE OBSERVATIONS

| Item/Location | Temp F | Item/Location | Temp F | Item/Location | Temp F |
|------------------------------|--------|-----------------------------------|--------|---------------|--------|
| beer cooler | 33/39 | cooked broccoli | 41 | WIC/chicken | 42 |
| white freezer ambient | -5 | cooked potatoes | 41 | beef | 42 |
| under counter cooler freezer | -2 | left side cold well/cooked onions | 52 | pork | 42 |
| cold wells/chicken | 41 | cooked chiles | 54 | tofu | 41 |
| beef | 41 | sprouts | 54 | shrimp | 41 |
| pork | 41 | grill cold top/all TCS | 50-72 | noodles | 41 |
| shrimp | 41 | rice pot | 168 | | |
| left cold well/tofu | 45 | rice pot | 151 | | |

OBSERVATIONS AND CORRECTIVE ACTIONS

| Item Number | AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Bar hand sink with soap and paper towels at 105 F |
| | Bar 3 comp sink 110 F |
| | Alcohol bottles covered nightly/ and when not in use |
| | Sani buckets at 200 ppm quats |
| 18 | Store chemical sprays and cleaning supplies low and separate, not on drink counters |
| 42 | Clean inside coolers, freezers in bar/dirty and food debris |
| | Soda/tea nozzles WRS daily |
| 39 | Avoid leaving scoops in standing water. Store dry instead and WRS at least every 4 hours |
| 18 | Red bucket on floor containing chlorine sanitizer for drains. Need to have a separate container, not to be used for quats sani as well. Label drain cleaner bucket as such. |
| | Cannot use same bucket for chlorine sanitizer and quats sanitizer |
| 2 | Added ice to tofu as was in cold well for one hour |
| | Left side cold well not cold holding at 41 or below. not freezing/no ice on sides of unit |
| 2 | TCS food items in unit for 2 hours. Added an ice slurry bath under/small amounts to be used first. To be repaired. |
| | Wood cooking sticks used once then WRS |
| | Cooking griddle 399 F ambient |
| 2 | Grill cold top not working. All TCS foods discarded. This unit needs to be replaced as it has consistently not been capable of cold holding at 41 F or below. |
| | Back hand sink 100+F |
| | 3 comp sink 115 F |
| 35 | Store employee drinks low and separate/not over prep areas |
| | Dishwasher sanitizing at 100 ppm chlorine sanitizer |
| 42 | Clean shelves in WIC/food debris |
| 42 | Clean vent over rice cookers in back/hanging oil |
| 32 | Rusty shelves where dirty dishes are stored as well as clean dish rack |
| 45 | Missing grout, broken baseboards, gaps in walls |
| 32 | Exposed wood on food service bar and at expo cabinet |
| | |
| | |
| | |

| | | |
|--------------------------------------------------------|----------------------------------|--------------------------------------------------|
| Received by: (signature) <i>Dan DeLatte</i> | Print: Dan DeLatte | Title: Person In Charge/ Owner Manager |
| Inspected by: (signature) <i>Christy Cortez, RS</i> | Print: Christy Cortez, RS | Samples: Y N # collected |

Form EH-06 (Revised 09-2015)