

Retail Food Establishment Inspection Report

City of Rockwall

| | | |
|---|---------------|---------------------------------------|
| Received by: (Printed) Krista Neff | Print: | Title: Person In Charge/ Owner |
| Inspected by: (signature) <i>Kelly kirkpatrick RS</i> | Print: | Business Email: |

Form EH-06 (Revised 09-2015)

| | | | | |
|-----------------------------------|---|--------------------------------|--------------------------------------|-----------------|
| Establishment Name: HCA | Physical Address: 1408 s Goliad | City/State: Rockwall | License/Permit # Food 7711 | Page ___ of ___ |
|-----------------------------------|---|--------------------------------|--------------------------------------|-----------------|

TEMPERATURE OBSERVATIONS

| Item/Location | Temp F | Item/Location | Temp F | Item/Location | Temp F |
|----------------------------------|--------|---------------|--------|---------------|--------|
| Individual pizzas in hot holding | 143.1 | | | | |
| Freezer | -4 | | | | |
| Milk cooler | 37 | | | | |
| Butter | 39 | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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: All temps F |
| | Lunches ordered from local restaurants |
| | Mon chic fil a warmers provided one delivery / nuggets and sandwiches |
| | Tues Jason's deli box lunch - one delivery for all lunches 3 hrs max |
| | Wed chic fila one time pick up / nuggets |
| | Thursday Joe willys 4 times picked up |
| | Friday - cici's pizza two deliveries individual pizzas |
| | |
| | Also using prepackaged foods |
| | Discussed wrapping apples for self service or using tongs for dispensing |
| | Hot water at 118! At three comp |
| | Hot water at 103 at hand sink |
| | New Maint man on site but |
| | Using tphc for meals after delivery using within 1 hr after delivery |
| | Form at city hall |
| | Extra meals are prepackaged non Tcs if needed |
| 45 | Time to paint shelving in dry storage |
| | Recording temps on lunch list |
| | Plans to address cabinets and inside drawers |
| | Meals ordered by numbers of attendance |
| | Ingredients by request |
| | Not prepping and not handling foods |
| 29 | Need test strips for quats |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| | | |
|---|---------------|---------------------------------------|
| Received by: (signature) See above | Print: | Title: Person In Charge/ Owner |
| Inspected by: (signature) <i>Kelly kirkpatrick RS</i> | Print: | Samples: Y N # collected |

Form EH-06 (Revised 09-2015)