Follow-up fee of \$50.00 is required after 1st Followup

Retail Food Establishment Inspection Report City of Rockwall

✓ First aid kit
Allergy policy/training
Allergy policy/training Vomit clean up Employee health
Employee health

Date				Time in:	Time out:	License/						Est. Type Risk Category Page 1 of	_f 2
				9:08	9:48	FS 8		_			_	Cale Low	
_		of In	_	tion: 1-Routine	2-Follow Up	Contact/Owner		4-1	Invest	igati	on	5-CO/Construction 6-Other TOTAL/SCO * Number of Repeat Violations:	ORE
-	<u> </u>	on In				Henry Perez	<u> </u>				~	V Number of Violations COS: 2/98/	/Δ
Phys 1549		Addro Juna	ess:		ABC	t control : Monthly		Hoo Na	od			e trap : Follow-up: Yes 🗸 🖊 Yo // No 🗌	<i>,</i> ,
Mark		omplia		Status: Out = not in co	ompliance IN = in c	compliance Marl	NO = not o					pplicable COS = corrected on site R = repeat violation W - W_a , NA , COS Mark an in appropriate box for R	itch
Wark	· tric	арргор	riace				•••					tive Action not to exceed 3 days	
OI]	nce Sta N N	С	Time and Ter	nperature for Fo	od Safety	R	О		N N	C		R
U N	N	O A	o s	(F = c)	legrees Fahrenheit			U T	N () A	S	Employee Health	
	·			Proper cooling time	and temperature				/			12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
				2. Proper Cold Holding	g temperature(41°1	F/ 45°F)						13. Proper use of restriction and exclusion; No discharge from	-
V				Good					'			eyes, nose, and mouth Posting in kitchen	
	ı	/		3. Proper Hot Holding	temperature(135°)	F)						Preventing Contamination by Hands	
	ı	/		4. Proper cooking time	and temperature				/			14. Hands cleaned and properly washed/ Gloves used properly	
				5. Proper reheating pro Hours)	cedure for hot hol	ding (165°F in 2						15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)	
	_			,	alth Control: proce	aduras le racords	_					Gloves	
-				6. Time as a Public He Service time is limited to	o less than 4 hrs	cuires & records					1	Highly Susceptible Populations	
				A _I	oproved Source				/			16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
Т				7. Food and ice obtained	ed from approved	source; Food in						Precooked eggs	
V				good condition, safe, a destruction Sysco	nd unadulterated;	parasite						Chemicals	
				8. Food Received at pr	oper temperature						Τ	17. Food additives; approved and properly stored; Washing Fruits	_
				Checking					/			& Vegetables Water only	
				Protection	n from Contamin	ation			/			18. Toxic substances properly identified, stored and used Low and separated	
L				Food Separated & preparation, storage, di								Water/ Plumbing	
\vdash				No raw 10. Food contact surface	ces and Returnable	es; Cleaned and						19. Water from approved source; Plumbing installed; proper	
-				Sanitized at 150					'			backflow device	
				11. Proper disposition reconditioned	of returned, previo	ously served or			/			20. Approved Sewage/Wastewater Disposal System, proper disposal	
				Pr	iority Foundat	tion Items (2 P	oints) v			equi	re Con	rrective Action within 10 days	
		N N O A	COS		iority Foundat		Points) v	O U		N N	CO	rrective Action within 10 days Food Temperature Control/ Identification	R
		N N O A	C O S	Demonstration 21. Person in charge pr	n of Knowledge/	Personnel	R	0	I I	N N	С	Food Temperature Control/ Identification 27. Proper cooling method used; Equipment Adequate to	R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Henry Perez	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

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	ment Name: Oton Inn	Physical A	ddress: a Rockwall	City/State: Rockwa	II	License/Permit # FS 8827	Page <u>2</u> of <u>2</u>					
Tiani		Laguii	TEMPERATURE OBSERV		<u> </u>	1 0 0027						
Item/Loc	eation	Temp F	Item/Location	Temp F	Item/Loc	ation	Temp 1					
Milk co	ooler	35/37	Market									
Bad	ck glass front	39	Freezer	-11								
D	eep freezer	-11	Bev cooler	39								
Up	oright freezer	-7										
Ur	oright cooler	39										
	Cheese	40										
	Milk	41										
		OB	SERVATIONS AND CORREC	TIVE ACTION	NS							
Item Number	AN INSPECTION OF YOUR ES	TABLISHME	NT HAS BEEN MADE. YOUR ATTE	ENTION IS DIRE	CTED TO	THE CONDITIONS OBS	ERVED AND					
Covid	NOTED BELOW.											
	Dairy and etc											
	No hot holding to ched	k at this	time									
	Gloves used as well a	s utensils	s to touch rte foods									
	Sink sanitizer - 150-20	00 within i	ange per label									
	Hot water 112		<u> </u>									
W	Watch storage of mop	bucket n	ext to paper goods / stor	ed in mop a	area in l	aundry when do	ne for the day					
	Using new purell prod			•		,	,					
	Not holding any heated foods over the next day but labels still on site if needed											
	Watch interiors of cab	inets										
	All foods places into fo	ood box a	and handed to guests who	o then get o	own mill	k and beverages	3					
	Meal time - 6-9 7 days	per wee	k									
	Dairy creamers require	e no chill										
	Ingredients by request											
	Keep an eye on storage in back room											
	Changing towels daily after air drying cleaned and sanitized utensils etc on ghr											
	Using dial thermo - to confirm cooking temp for hot holding											
	Test strips for sanitizer on site											
	Surfaces sanitized with quats											
26	Discussed providing ingredients for popcorn pouches or provide labeled bags											
	Will Followup on label for popcorn											
Received (signature)	lby:		Print:			Title: Person In Char	rge/ Owner					
	See abov	<u>/e</u>										
Inspected (signature)		utríck	Print:									
Farms FIL 00	6 (Revised 09-2015)					Samples: Y N	# collected					