\$50.00 reinspection fee required after 1st Followup Retail Food Establishment Inspection Report Image: First aid kit City of Rockwall Image: Vomit clean up the mology of th																		
				License/P							Est. Type Risk Category HSp HSp Page $\frac{1}{2}$ of	f_2_						
Purpose of Inspection: 1 - Routine 2 - Follow Up 3 - Complai Establishment Name: Contact/Owner N								Inve	stiga	atior	1		ORE					
Highland meadows Gracen						vanie.		1		C		✓ Number of Violations COS:	/Α					
Physical Address: Pest control : Hwy 276 / john king Spider-Man						Ho 11/2	2020		LE	S las	ast month							
Mark the appropriate points in the OUT box for each numbered item Mark						-	approp	riate b	oox fe	or IN	I, NĈ	pplicable $COS = corrected on site M = repeat violation W-Wa O, NA, COS Mark an \sqrt{1000} in appropriate box for R$	atch					
Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days Compliance Status Compliance Status																		
O U T	I N	N O	N A	C O S	Time and Temperature for Foo (F = degrees Fahrenheit)	R	O U T		N O	N A	C O S	Employee Health	R					
		~			1. Proper cooling time and temperature				~				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
	~		2. Proper Cold Holding temperature(41°F/ 45°F)					~				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth						
		3. Proper Hot Holding temperature(135°F)						<u> </u>				Screening at arrival / mask Preventing Contamination by Hands						
		4. Proper cooking time and temperature					~				14. Hands cleaned and properly washed/ Gloves used properly							
		~			5. Proper reheating procedure for hot holding (165°F in 2 Hours)				~				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_N_)					
		6. Time as a Public Health Control; procedures & records							11				Gloves Highly Susceptible Populations					
	11				Approved Source				~				16. 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 destruction									Using P eggs Chemicals							
	~	8. Food Received at proper temperature Reinhardt						~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables						
	Protection from Contamination						~				Water only 18. Toxic substances properly identified, stored and used Stored in mop room							
	~	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting						1. 1				Water/ Plumbing						
	~				10. Food contact surfaces and Returnables ; Cleaned and Sanitized at 200 ppm/temperature To check machine				~				19. Water from approved source; Plumbing installed; proper backflow device City approved					
		~			11. Proper disposition of returned, previou reconditioned Discarded				~				20. Approved Sewage/Wastewater Disposal System, proper disposal					
												rrective Action within 10 days						
O U T	I N	N O	N A	C O S	Demonstration of Knowledge/ P		R	O U T	I N	N O	N A	C O S		R				
	~				21. Person in charge present, demonstration and perform duties/ Certified Food Manage 1 and one more in the works	ger (CFM)			~				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature					
	~	22. Food Handler/ no unauthorized persons/ personnel Food handlers all				~				28. Proper Date Marking and disposition Great								
					Safe Water, Recordkeeping and Fo Labeling		W	~				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Need more for Dishmachine						
	~	23. Hot and Cold Water available; adequate pressure, s See										Permit Requirement, Prerequisite for Operation						
	~				24. Required records available (shellstock destruction); Packaged Food labeled	tags; parasite			~				30. Food Establishment Permit (Current/ insp sign posted) Posted					
	•			Conformance with Approved Procedures 25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions Temps in green book and on coolers / freezers				~				Utensils, Equipment, and Vending 31. Adequate handwashing facilities: Accessible and properly supplied, used Equipped						
					Consumer Advisory			2					32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used See					
	~				26. Posting of Consumer Advisories; raw foods (Disclosure/Reminder/Buffet Plate) Ingredients by request			W					33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided Will confirm with labels					
0	I	N	N	С	Core Items (1 Point) Violations Re	quire Corrective	Action	n Not		xcee N	ed 90 N) Da C	ays or Next Inspection , Whichever Comes First	R				
Ŭ T	N	0	A	0 S	Prevention of Food Contamin 34. No Evidence of Insect contamination,			U T	N	0	A	0 S						
_					animals Watch 35. Personal Cleanliness/eating, drinking		\parallel		~									
-	~				36. Wiping Cloths; properly used and stor		+	_	~				Physical Facilities 42. Non-Food Contact surfaces clean					
W	-	~			Storing 37. Environmental contamination A all amount of condensa	ation in wif	$\left \right $	\vdash	~				43. Adequate ventilation and lighting; designated areas used Watch IN wic					
F	~	~			38. Approved thawing method Pull or cook from frozen		+	1					44. Garbage and Refuse properly disposed; facilities maintained Dumpster					
	·				Proper Use of Utensils			F	~				45. Physical facilities installed, maintained, and clean Watch					
	~				39. Utensils, equipment, & linens; proper dried, & handled/ In use utensils; properly	y used			~				46. Toilet Facilities; properly constructed, supplied, and clean Equipped					
W					40. Single-service & single-use articles; p and used Avoid paper in					~			47. Other Violations					

Retail Food Establishment Inspection Report

City of Rockwall

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

Form EH-06 (Revised 09-2015)

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	nent Name: and meadows	Physical A John		City/State: Rockwal	I	License/Permit #	Page	of			
			TEMPERATURE OBSERVA	TIONS <u>Temp F</u>				I			
Item/Loc		<u>Temp F</u>			Item/Location			Temp F			
2 door	·		Wic	34/35							
Ch	icken noodle	36	Butter	36							
E	Boiled eggs	36	Tomato	36							
2	door freezer	—11	Sausage	36							
			Wif	-3							
OBSERVATIONS AND CORRECTIVE ACTIONS											
Item AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND											
Number	NOTED BELOW: all temps F	110/10									
	Hot water at hand sink 112 / 131 at three comp All meals clam shell styro for quarantine hall / residents receive regular covered plates										
	Sanitizer in bucket 200 ppm quats (discussed cloth towels issue)										
	Gloves used to touch rte foods										
32	Time to replace cutting boards that are badly scored and knives with melted handles										
	These cutting boards are new last month! Keep and eye on them										
32	Keep spatulas trimmed to allow to wash properly										
	Avoiding left overs or using freezer if needed for rapid cooling										
	Great date marking										
W	Avoid using paper to line drawers - best to use washable netting										
	Pulling dented cans										
44	•		aning -no trucks - daily pic	ck up - last	pick up v	was last Saturd	ay				
W	Discussed storage of p Watch smallAmount o										
vv		Conden									
	Great date marking Keep an eye on shelving etc										
	Restroom equipped										
W	External reading for machine is 180 - willFollowup with label										
	Running all faucets at this time / will address any faucet leaks as needed										
	Need to repair paper towel dispenser in dish room										
	Plans for replacing 3										
Received (signature)	See abov	'e	Print:			Title: Person In Char	ge/ Owner				
Inspected (signature)	See abov Kelly Kírkpo	4 - 7	Print:								
Samples: Y N # co											