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
Vomit clean up Employee health
Employee health

	Date:			Time in: License/Permit #					info				Est. Type	Risk Category	Page 1 of _	2	
		0/22/21 8:50 12:47 FS n			eed info					Bar	Med						
E	stabli	ishme	ent l			Co	ontact/Owner		4-	ınve	suga	ulon	L	5-CO/Construction * Number of Repeat Vio		TOTAL/SCO	KE
		bar al Ac		ec.		Pest co	riftwood		Нос	nd		Gı	rease	✓ Number of Violations	COS: Follow-up: Yes	9/91/	Д
	ımme	er lee				See mai	in		See	mai.		See	e ma	in [*]	No No		
М					Out = not in corpoints in the OUT box for	IN = in components in in components in	Mark	$O = not o$ $\sqrt{ in ap}$						plicable COS = corrected or NA, COS M	n site \mathbf{R} = repeat vio Iark an \mathbf{V} in appropria	lation W- Wate ate box for R	ch
C	omnli	iance	Stat	us	Prio	ority Items (3 Poin	nts) violation	s Requi	_	<i>ımed</i> ompli				ve Action not to exceed 3 de	lays		
O U	I N O A O Time and Temperature for Food Safety				R	O I N U N O		N O	N C A O		Employee Health			R			
Т					Т				S	12. Management, food emplo	•	employees;					
					knowledge, responsibilities, and reporting												
	2. Proper Cold Holding temperature(41°F/ 45°F) See				13. Proper use of restriction and exclusion; No diseves, nose, and mouth				charge from								
	3. Proper Hot Holding temperature(135°F)				Email poster Preventing Contamination by Har					ıds							
	4. Proper cooking time and temperature								14. Hands cleaned and prop								
	5. Proper reheating procedure for hot holding (165°F in 2			+ +	15. No bare hand contact with ready to eat foods of												
	Hours)									alternate method properly fo Gloves on site	llowed (APPROVED	YN)					
		/			6. Time as a Public Hea	alth Control; procedur	res & records							Highly Sus	ceptible Populations		
					App	proved Source						/		16. Pasteurized foods used; pasteurized eggs used when		fered	
					7. Food and ice obtained	ed from approved sour											
	~				good condition, safe, and destruction Approve	nd unadulterated; para	asite								Chemicals		
\vdash	+				8. Food Received at pro			+						17. Food additives; approved	d and properly stored;	Washing Fruits	
	•				At receiving					~				& Vegetables Limes and lemor	ns water		
					Protection	n from Contaminatio	on		W	/				18. Toxic substances properl Watch storage	ly identified, stored an	d used	
	/				9. Food Separated & propagation, storage, dis		iring food								ter/ Plumbing		
	/				10. Food contact surface Sanitized at 100		Cleaned and			~				19. Water from approved sor backflow device	urce; Plumbing installe	ed; proper	
		/			11. Proper disposition or reconditioned	of returned, previously	y served or			/			İ	City approved 20. Approved Sewage/Waste disposal	ewater Disposal System	m, proper	
					Pri	ority Foundation	Items (2 Po	oints) v	iolat	ions	Req	uire	Cor	rective Action within 10 day	ys		
O U		N O	N A	C 0	Demonstration	n of Knowledge/ Pers	sonnel	R	O U	I N	N O	N A	C O	Food Temperatu	ıre Control/ Identific	ation	R
Т				S					T				S	27 Proper cooling method u			
					21. Person in charge pre									27. I Toper cooming memod u	sed; Equipment Adea	quate to	
	•				and perform duties/ Cer 5	rtified Food Manager	(CFM)			~				Maintain Product Temperatu	ire	quate to	
	'				and perform duties/ Cer	rtified Food Manager	(CFM)			'	~			Maintain Product Temperatu 28. Proper Date Marking and	d disposition		
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Peter Andino	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establish: Hiltor	ment Name: 1 bar	Physical A Summ		e City/State:		License/Permit #	Page 2 of 2				
1 111101	1 501	Odiffifi	TEMPERATUR			11000					
Item/Loc	cation	Temp F	Item/Location	E ODSERVAT		Location	Temp				
		OP	CEDVATIONS AND	CODDECTIV	ZE ACTIONS						
Item	AN INSPECTION OF YOUR ES		SERVATIONS AND NT HAS BEEN MADE.			TO THE CONDITIONS OBSI	ERVED AND				
Number	NOTED BELOW: all temps F										
	Confirmed CA on men	าน									
	Need to post permit										
42/45	General cleaning of ed	quipment	Inside and out	and under							
37	Address standing wat	er in any	and all coolers r	needed							
40	Watch storage of strav	ws always	sprotect								
32	Cutting boards to be re	eplaced									
42	Clean under bar nettir	ng									
40	Straws container is such that mouth portion only is exposed therefore would be touched when dispensin										
	Discussed using peroxide spray only on non food contact surfaces										
	Setting up Sani bucket of quats when operating										
34	Fruit flies observed										
W	Best to Protect drain from fruit etc										
32	Reminder - to use was	shable wi	cker								
	Sanitizer next to straw	vs watch									
	Hot water at hand sink	k 119 and	up / equipped w	ith soap an	d towels						
	Sewer gas issue wher	n first run	ning hand sink								
41	When labeling salt and sugar containers to label container instead of lids										
	Glass washer 100 ppr	m hood									
40	Protect to-go containe	ers									
45	Clean all drains										
Received (signature)	by:		Print:			Title: Person In Charg	ge/ Owner				
	<u> </u>	/ ヒ									
Inspected (signature)			Print:								
	Kelly Kirkpo	utrick	/KS			Samples: Y N	# collected				