Followup								etail Food Establishment Inspection Report City of Rockwall									First aid kit Allergy policy/training Vomit clean up Employee health			
Date: Time in: 10/22/21 8:50				21	Time in: 8:50	Time out:License/Pe12:47Need				permit numbe						Bar	$\begin{array}{ c c c } Risk Category \\ Med \\ Page \underline{1} \\ \end{array}$		2	
Pu	Purpose of Inspection: 🖌 1-Routine 🗌 2-Follow Up 🔲 3-Complain						aint 🗌	4-Investigation 5-			5-CO/Construction 6-Other TOT			TOTAL/SCO)RE					
Hi	Establishment Name: Contact/Owner Na Hilton grab and Go and bar Drift wood						Name:						* Number of Repeat Violations: ✓ Number of Violations COS: 12/			13/87	/R			
	Physical Address: Pest control : Summer lee See main							Hoo Na	od			rease e ma	e trap : ain		Follow-up: Yes 🖌 No 🗌	13/07/	D/			
м					Status: Out = not in cor points in the OUT box for	$\frac{IN}{IN} = in$	complia	nce N Mark	$\mathbf{O} = \text{not } \mathbf{O}$						plicable $COS = c$ D, NA, COS	orrected or	a site \mathbf{R} = repeat vice ark an $$ in appropria	plation W- Wat	ch	
IVI2	irk u	ie ap	ргор	riate					-						ive Action not to ex					
0 U	mpli I N	pliance Status N N C I N N C V O A O					R	Compliance Status Employee Health 0 I N N C U N O A O Employee Health							R					
T		S (F = degrees Fahrenheit) I. Proper cooling time and temperature						Т	~			S	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						
	•	. /				temperature(135	°F)		_		Policy / to post posters									
		3. Proper Hot Holding temperature(135°F) Hot holding being repaired 4. Proper cooking time and temperature						Preventing Contamination by Hand							_					
			~		4. Proper cooking time and temperature5. Proper reheating procedure for hot holding (165°F in 2					Gloves and uten 15. No bare hand contact w					Gloves and	utens	ils		+	
		Hours)						alternate method properly followed (APPROVED Gloves					Y <u>N</u>)							
w					6. Time as a Public Hea Using temporarily for nov	alth Control; prod w / need time lat	cedures pels	& records		Highly Susceptible Populations										
					Арј	Approved Source							~		16. Pasteurized for Pasteurized eggs u	fered				
	~	7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction											Chemicals							
	~				8. Food Received at pro								~		17. Food additives& Vegetables	; approved	and properly stored;	Washing Fruits		
					Protection	n from Contami	nation			w					18. Toxic substanc See	es properl	y identified, stored an	nd used		
	~				 Food Separated & pro preparation, storage, dis Watch 	· • • ·		ng food								Wat	er/ Plumbing			
N					10. Food contact surface Sanitized at 200	es and Returnabi ppm/temperatur	les ; Cle ^e Watch	eaned and food contact		3					19. Water from app backflow device Air gap at 1		rce; Plumbing install	ed; proper	Τ	
		~			11. Proper disposition o reconditioned	of returned, previ	iously s	erved or			~				20. Approved Sew disposal Watch	age/Waste	ewater Disposal Syste	m, proper		
					Prie	iority Founda	tion I	tems (2 Po	oints) vi	iolati	ions		uire	Cor	rective Action with	nin 10 day	VS			
O U T	I N	N O	N A	C O S	Demonstration	n of Knowledge/	Person	mel	R	O U T	I N	N O	N A	C O S	Food T	emperatu	re Control/ Identific	cation	R	
	~			5	21. Person in charge pre and perform duties/ Cer 5						~			5	27. Proper cooling Maintain Product 7		sed; Equipment Ade	quate to	Γ	
	~				22. Food Handler/ no ur All	nauthorized pers	ons/ pe	rsonnel				~			28. Proper Date M	arking and	l disposition			
	1		<u> </u>		Safe Water, Recor	ordkeeping and l Labeling	Food P	ackage			~	-			29. Thermometers Thermal test strips Digital provi	5	accurate, and calibrat	ed; Chemical/		
2					23. Hot and Cold Water Pressure at sink	r available; adeq	uate pre	essure, safe			I						t, Prerequisite for O	peration		
					24. Required records av destruction): Packaged I Need for prep	vailable (shellsto Food labeled	ck tags;	-	i	w	~				30. Food Establis	hment Pe	rmit (Current/ insp s	ign posted)	Τ	
					Conformance w 25. Compliance with Va	with Approved	Proced	ures			1						ipment, and Vendin acilities: Accessible a	-		
			~		HACCP plan; Variance processing methods; ma	e obtained for spe anufacturer instru	ecialize uctions				~				supplied, used	0				
					Cons	sumer Advisory	7			2					32. Food and Non- designed, construct		act <u>surfaces cleanable</u> sed	e, properly		
2					26. Posting of Consume foods (Disclosure/Remi For packaged items	inder/Buffet Plat						~			33. Warewashing I Service sink or cur Not set up	b cleaning	installed, maintained, g facility provided	used/		
					Core Items (1 Poin		Requir	e Corrective									chever <u>C</u> omes First			
O U T	I N	N O	N A	C O S	Prevention of	of Food Contan	ninatio	1	R	O U T	I N	N O	N A	C O S		Food	Identification		R	
W					34. No Evidence of Inse animals Watch for flie	ies						~			41.Original contair	ner labelin	g (Bulk Food)			
	~				35. Personal Cleanliness	-		acco use							10 X =	•	sical Facilities			
	~				36. Wiping Cloths; prop In Sani bucket		ored			1						inside d	cabinets in small of			
W					37. Environmental conta In keg cooler 38. Approved thawing n				+		/				Watch		lighting; designated a berly disposed; faciliti			
	_	<u>~</u>					le			-	<u>~</u>	-	—	_	6	1 1	ed, maintained, and cl			
1					39. Utensils, equipment dried, & handled/ In use		erly use			<u>1</u> W				_	See attached	s; properly	constructed, supplied		-	
	—	_	_		40 Single-service & sin	71 1	2				 	-		_	47. Other Violation	•			+	
					and used See							~								

Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Peter Andino	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: grab and go	Physical A Summ		City/State: Rockwa	I	License/Permit # Page 2.0		<u>2</u> of <u>2</u>		
	0		TEMPERATURE OBSERVA	ATIONS						
Item/Loca		<u>Temp F</u>	Item/Location	<u>Temp F</u>	Item/Locat	ion		Temp F		
Burrito	s 2 hrs tphc		Outside bar	35 /36						
	Freezer	-15/21								
RI	C glass front	30/31								
Ν	lilk reach in	38/42								
Bevera	ge cooler in back room	37								
Nee	d to add time									
	els for burritos									
		OB	SERVATIONS AND CORRECT	TIVE ACTION	NS					
Item AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND										
	NOTED BELOW: All temps F Burritos tphc temporarily only while hot holding unit is being repaired - not labeled but ingredients by request									
••	Pastries served by staff / or in bags -ingredients by request									
!!	Labels for fruit and yogurt cups needed as well									
23	To have pressure issue with hand sink addressed hot water 100 but very little pressure									
	Will keep separate chores in sinks / best to have hand sink on side to left									
	Plans to have dump sink on right and hand sink on left for now - need hand wash sign									
Cos	Set up Sani buckets for Capp machine wands and surfaces									
40	Protect cups and etc next to sinks									
45	Trim on shelving inside cabinets is peeling off - to address									
	Keep an eye on temp of milk coolers - borderline e									
COS	Metal stem thermo									
32	Interior of Ice machine deflector panel to address /rust beginning to form on corner of deflector panel									
39	Clean inside unit routinely / invert ice buckets									
00/45	Outside bar :									
32/45	Keep an eye on grout / rusty legs / peeling black paint on cooler ecposingfmetal that is rusty									
19	Need air gap at three compartment sinks Repair leak faucet at three comp as well									
W	•		•	ha ayan a	n rt hofor	0.1150				
45	Clean inside frozen drink machine — pink in dispenser tube even on rt before use Make repairs to walls etc as needed									
40	•									
	Address standing water in keg cooler Hot water at 110 F at sinks in outside bar									
W	Need paper towels at hand sink when open									
	Best to use caps on spouts at night etc									
	Keep an Eye on dark interiors of middle cabinet unit in area insid e									
W	Label all spray bottles inside cabinet with common name									
Received	by:		Print:			Title: Person In Charg	e/ Owner			
(signature)	^{by:} Kelly Kírkpo	'e								
Inspected (signature)	by:	+ 1	Print:							
		urick	/K3			Samples: Y N	# collect	ed		
Form EH-06	(Revised 09-2015)									