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: Time out: License/PG 13/2023 12:09 1:31 FS 00						03817					Food handlers Pood managers Page 1 of 2	2_			
Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain						_		estiga	ation	1	5-CO/Construction 6-Other TOTAL/SCOR	RE				
Esta	blis	hment	Nan	ne:		Contact/Owner N	Vame:		11170	sug	41101		* Number of Repeat Violations:	· CL		
		n nu		on		leather/Rach	nel						e tran//waste oil Follow-un: Yes 4/96/	Δ		
		l Addr rizon	ess:		T. rex	ontrol :		Hoo Na	od			reas ed ir	trap// waste on	•		
		omplia		tatus: Out = not in co	mpliance IN = in com	npliance No	$\mathbf{O} = \text{not } \mathbf{c}$						oplicable $COS = corrected on site $	h		
Marl	k the	appro	oriate	points in the OUT box for				_					NA, COS Mark an X in appropriate box for R ive Action not to exceed 3 days			
Con	ıplia	nce Sta	tus	1110	Tity Items (310)	ints) violations	Kequii	_		liance			we Action not to exceed 3 days			
U	I N	N N O A	O		perature for Food	Safety	R	O U	N	O	N A	O	Employee Health	R		
T						T				S	12. Management, food employees and conditional employees;					
	1. Froper cooming time and temperature							/				knowledge, responsibilities, and reporting				
3				2. Proper Cold Holding Small under C	temperature(41°F/2	^{45°F)} er 50's		eyes, nose, and mouth								
				3. Proper Hot Holding	temperature(135°F)		+						Posted at hand sink			
\vdash	•			4. Proper cooking time	and temperature		\blacksquare						Preventing Contamination by Hands 14. Hands cleaned and properly washed/ Gloves used properly			
	•				*	(1.550)										
				5. Proper reheating pro- Hours)	cedure for hot holdin	ig (165°F in 2							15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)			
\vdash	-			6. Time as a Public Hea	alth Control: procedu	ires & records	+									
	•								ı				Highly Susceptible Populations			
				Ap	proved Source				/				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required			
				7. Food and ice obtaine					1				Using pasteurized for waffles			
•				good condition, safe, and destruction Herbalit									Chemicals			
				8. Food Received at pro	oper temperature								17. Food additives; approved and properly stored; Washing Fruits			
				To keep cold o	luring transp	ort			•				& Vegetables Using frozen			
	Protection from Contamination					/				18. Toxic substances properly identified, stored and used Low						
	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting									Water/ Plumbing						
	10. Food contact surfaces and Returnables; Cleaned and Sanitized at 100 ppm/temperature					backflow device										
	11. Proper disposition of returned, previously served or reconditioned Discarded									City approved 20. Approved Sewage/Wastewater Disposal System, proper disposal						
						n Itams (2 Da	inte) w	iolat	tions	Pag	ina	Cor	rrective Action within 10 days			
	I N	N N O A	C				R	OU	I	N O	N A	CO		R		
T	14	O A	s		of Knowledge/ Per			T		U	A	s	Food Temperature Control/ Identification			
•	1			21. Person in charge pr and perform duties/ Cer 2	rtified Food Manage	r (CFM)			~				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature			
				22. Food Handler/ no u 1	nauthorized persons	/ personnel				/			28. Proper Date Marking and disposition Reminder to date mark when opening			
				Safe Water, Reco	rdkeeping and Foo	d Package			/				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips See			
	/			23. Hot and Cold Wate	r available; adequate	pressure, safe				1			Permit Requirement, Prerequisite for Operation			
H	See 24. Required records available (shellstock tags; parasite				Ι.				30. Food Establishment Permit (Current/ insp sign posted)							
•				destruction); Packaged Per order	Food labeled				/				Posted			
				Conformance v	with Approved Pro					1			Utensils, Equipment, and Vending			
				25. Compliance with V HACCP plan; Variance									31. Adequate handwashing facilities: Accessible and properly supplied, used			
				processing methods; ma					'							
				Con	sumer Advisory				/				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used			
				26. Posting of Consume	er Advisories: raw o	r under cooked							33. Warewashing Facilities; installed, maintained, used/	┝		
•				foods (Disclosure/Rem						/			Service sink or curb cleaning facility provided			
	+			Core Items (1 Poin	nt) Violations Reg	uire Corrective	Action	Not	to E	Exce	ed 90) Da	ys or Next Inspection , Whichever Comes First			
	I N	N N O A	C		of Food Contamina		R	O	I	N O	N A	C	Food Identification	R		
Т		_ A	s	34. No Evidence of Ins				T			•	s	41.Original container labeling (Bulk Food)			
W				animals Watch for flie	es		Щ		~				Label container not lids			
				35. Personal Cleanlines									Physical Facilities			
	/			36. Wiping Cloths; pro	perly used and stored	1			1				42. Non-Food Contact surfaces clean			
	+			37. Environmental cont See	amination		H		. 1				43. Adequate ventilation and lighting; designated areas used	\vdash		
$\vdash \vdash$	+			See 38. Approved thawing			H	-					44. Garbage and Refuse properly disposed; facilities maintained	<u> </u>		
Ш	-			20.1.pproved diawnig				W	V				Watch dumpster / needs lid	<u> </u>		
				D				I	1	1			45. Physical facilities installed, maintained, and clean	ı		
				Propo	er Use of Utensils									l		
	/			39. Utensils, equipment dried, & handled/ In us	t, & linens; properly				~				46. Toilet Facilities; properly constructed, supplied, and clean Equipped			
•	/			39. Utensils, equipmen	t, & linens; properly se utensils; properly ngle-use articles; pro	operly stored			~				46. Toilet Facilities; properly constructed, supplied, and clean			

Retail Food Establishment Inspection Report

City of Rockwall

Received by: (Printed / Covid Rachel Watson	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: On nutrition	Physical Address: Horizon 5737			City/State: Rockwall	License/Permit # 3817	Page <u>2</u> of <u>2</u>			
110112	on nathaon	1101120	TEMPERATURE (0017				
Item/Loca	ation	Temp F	Item/Location	ODSERVIII		em/Location	<u>Temp</u>			
Milk co	ooler okay at 7:00									
		F 0								
Cre	eamers 12:30	52								
Egg	whites 12:30	53								
- 55	<u> </u>									
P	ersonal unit	29/33								
			SERVATIONS AND							
Item Number	AN INSPECTION OF YOUR EST NOTED BELOW: ALL TEMPS		NT HAS BEEN MADE. YO	OUR ATTENT	TION IS DIRECTE	ED TO THE CONDITIONS OBS	ERVED AND			
	Hot water at hand sinl	k / three c	omp 112							
	Sink sanitizer at 100 p		· · · · · · · · · · · · · · · · · · ·							
	Washing ramekins for	•								
02		•		to colde	r cooler as ı	under counter is not h	noldina			
	Will have to move all customer items that are Tcs to colder cooler as under counter is not holding Correct temps today									
	Ice machine attached	to pump								
	Food thermo and test									
02/cos		-	today							
	Will monitor both cool		,							
	Will store employee for	ods belo	w customer foods							
37	Time to defrost the fre						-			
	Discussed date marki	ng								
	Discussed sanitizer bu		age							
	Will need to Followup	on coole	storage! COS for	today						
			Ι = -			1				
Received (signature)	Soo obox	10	Print:			Title: Person In Charg	ge/ Owner			
	See and	/ U								
Inspected (signature)	See abou		Print:							
	кешу кикро	urick	/K3			Samples: V N	# collected			