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

Retail Food Establishment Inspection Report City of Rockwall

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

					Permit # 004053						Food handlers Food managers Need another Page 1 of _	2				
				tion: 12.00		Follow		3-Compl	_			estig	ation	n	5-CO/Construction 6-Other TOTAL/SCO	
Estal	olish	nment	Nan	ne:		I OHOW		act/Owner	_		-111 V	csug	atioi	u I	* Number of Repeat Violations:	KE
		oees		fee		Т	Kim Pest contr			11.	1		LC		✓ Number of Violations COS: e trap/ waste oil: Follow-up: Yes ✓ 9/91//	Α
		Addro nmer le				Α	BC 07/20	22		Na	ood				e trap/ waste oil: Follow-up: Yes 7/5 177 /15/23 40 gals Follow-up: Yes 7/5 177	
Mark				Status: Out = not in components in the OUT box for	omplian	ce IN = i	in complia Litem	nce Mark	NO = no						policable COS = corrected on site R = repeat violation W-Wate O, NA, COS Mark an In appropriate box for R	ch
With	the	ирргор	riace						-	•••	•				ive Action not to exceed 3 days	
		nce Sta	C	Time and Tem	nnarat	ure for	Food Safe	atro	R		O I		N	C		R
U N	1 (0 A	o s	(F = de	legrees	Fahrenh	heit)	cty		Ţ		0	A	O S	Employee Health	
	ı			1. Proper cooling time a	and ten	nperatur	re								12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
	_	+		2. Proper Cold Holding	temne	rature(4	11°F/ 45°F)	+		_				13. Proper use of restriction and exclusion; No discharge from	-
V				See	, tempe	ruture(i	11 17 13 1	,			V				eyes, nose, and mouth Poster posted	
	•			3. Proper Hot Holding t	temper	ature(13	35°F)								Preventing Contamination by Hands	
	4. Proper cooking time and temperature										14. Hands cleaned and properly washed/ Gloves used properly					
\vdash				Proper reheating proc	cedure	for hot	holding (1	65°F in 2							15. No bare hand contact with ready to eat foods or approved	+
	V			Hours)								/			alternate method properly followed (APPROVED Y N) Gloves and Lutensils	
	v	/		6. Time as a Public Hea	alth Co	ntrol; pi	rocedures	& records							Highly Susceptible Populations	
	1-										Τ				16. Pasteurized foods used; prohibited food not offered	1
						d Sourc							V		Pasteurized eggs used when required Precooked	
				Food and ice obtained good condition, safe, and	ed from nd unac	approvidulterate	ed source; ed; parasite	Food in								
				destruction Sysco			·								Chemicals	
				8. Food Received at pro		mperatu	ire								17. Food additives; approved and properly stored; Washing Fruits & Vegetables	Т
Ľ				To always che	CK						V				Water	
_				Protection	n from	Contan	nination				1				18. Toxic substances properly identified, stored and used Low	
				Food Separated & propreparation, storage, disconnected watch				g food							Water/ Plumbing	
V				10. Food contact surface Sanitized at 200				aned and		3	3				19. Water from approved source; Plumbing installed; proper backflow device	
				11. Proper disposition of	of retur	ned, pre	eviously se	erved or				_			Leak in RR see below 20. Approved Sewage/Wastewater Disposal System, proper	╁
											4					
	V			reconditioned Disc	arde	ed									disposal	
	V		G	DISC			dation It	ems (2 P					_		rective Action within 10 days	
O 1 U 1 T		N N O A	C O S	DISC	iority	Found		,	oints)		O I U N	N	_	C C O S		R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: (Printed) Kevin Echagarruga	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	•											
	nent Name: abee coffee	Physical A		City/State: Rockwa	II	License/Permit # Fs0004053	Page _	2 of 2				
TIUCK	abec conce	2000 8	TEMPERATURE OBSERVAT		<u> </u>	1 3000 4000						
Item/Loca	ation	Temp F	<u>Item/Location</u>	Temp F	Item/Locat	<u>iion</u>		Temp F				
Freeze	er ice cream	-1.8	Espresso cooler	40	Dessert cooler							
Milk (glass front cooler	33-39	Milk	40	Cake			41				
Freez	zer for food items	9.4	Bev cooler	28	Tcs foods display on		nly					
Uŗ	oright cooler	40	Deep freezer	.7								
	Milk	40										
-		OB	SERVATIONS AND CORRECTI	VE ACTIO	NS		ı					
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW: All temps F	TABLISHME	NT HAS BEEN MADE. YOUR ATTENT	TON IS DIRE	ECTED TO TH	HE CONDITIONS OBSERV	ED AN	D				
	Time to defrost freeze	r										
46/19	Must provide hot wate	r in restro	om / turned off due to leak									
	Hot water in food prep	127										
45	Need to reseal behind	hand si	nk									
42/45			elving etc and paint where	needed								
40	Avoid reuse of card bo											
			cooked when ordered (reth		ea)							
- 00	_		ening if not using with in 24	4 nrs								
39	To store ice scoop with		•									
42	Sanitizer 200/200/200			· · · · · · · · · · · · · · · · · · ·	al arada i	undar auna ata						
42	To clean first	11011 01 511	elving to add bar netting co	JIIIIIeicia	ai graue u	inder cups etc						
47	Gaskets on coolers to	address	where not tight fitting etc									
	Watch storage of boxe											
	Book in back with labe	ls //discu	ssed allergen poster for fut	ure								
39/w	Need to see less resid	ential ite	ms and more nsf approved	- avoid fo	od conta	iners with snap fla	p lids	s etc				
	Ex - waffle irons too /	tongs /										
42/45	Watch clutter and gene											
45	Test strips quats/ therr				. / -:	fuere ice receleire	!					
45	To clean drain under id	e macnir	e and pipes to under three	comp etc	: / air gap	from ice macnine	main	tainea				
D : -			l n : .		Т	mu p						
Received (signature)		e'e	Print:			Title: Person In Charge/ (wner					
Inspected	l by:		Print:									
(signature)	Kelly kirkpa	ıtrick	\mathcal{RS}			Samples: Y N # o	collecte	d				