	Retail Food Establishment Inspection Report First aid kit Allergy policy Vomit clean up Employee health																		
	Date: Time in: Time out: License/Per 10/11/2023 2:45 4:00 FOO								mit # D 5115						Est. Type Risk Category Page <u>1</u> of <u>2</u>				
Purpose of Inspection: V 1-Routine 2-Follow Up 3-Complain										nves		tion	1	5-CO/Construction 6-Other TOTAL/SCORE					
Establishment Name: Contact/Owner N								Name	e:						* Number of Repeat Violations: ✓ Number of Violations COS:				
Physical Address: Pest control : 2616 Ridge Rd Rockwall, TX Ecolab/9-25-2023								3		Hoo anco		023	Gi ma	reas ana	ager to email No□				
Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- W												pplicable $COS = corrected on site \mathbf{R} = repeat violation W- Watch$							
Mark the appropriate points in the OUT box for each numbered item Mark 's' a checkmark in appropriate box for IN, NO, NA, COS Mark an X in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																			
Compliance Status Time and Temperature for Food Safety 0 I N N C U N O A O						R	F	Compliance StatusOINNCUNOAO				С	Employee Health						
Ť	K O A S (F = degrees Fahrenheit) I I Proper cooling time and temperature						Ť		-		ŝ	12. Management, food employees and conditional employees;							
	~							knowledge, responsibilities, and reporting											
3					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)										Preventing Contamination by Hands				
	~				4. Proper cooking time and temperature					✓ 14. Hands cleaned and properly washed/ Gloves used p gloves used									
	~				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 YN)				
	~	_			6. Time as a Public Health Control; procedures & records										Highly Susceptible Populations				
	•				Ammund Same						~				16. Pasteurized foods used; prohibited food not offered				
					Approved Source 7. Food and ice obtained from approved source; Food in						•			_	Pasteurized eggs used when required eggs cooked				
	~				good condition, safe, and unadulterated; parasite destruction Corporate										Chemicals				
	~		8. Food Received at proper temperature								~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables				
	Check at receipt							-		~		_		Water only 18. Toxic substances properly identified, stored and used					
		Protection from Contamination 9. Food Separated & protected, prevented during food																	
	~				preparation, storage, display, and tasting 10. Food contact surfaces and Returnables ; Cleaned and				19. Water from approved source; Plumbing insta					Water/ Plumbing 19. Water from approved source; Plumbing installed; proper					
	~				Sanitized at <u>272</u> ppm/temperature 11. Proper disposition of returned, previously served or						~				20. Approved Sewage/Wastewater Disposal System, proper				
	~				reconditioned discarded						~				disposal				
O U	I N	N O	N A	C O	•		`	R) vio	latio O U	ons I I N	Requ N O	n N A	Cor C O	rrective Action within 10 days Food Temperature Control/ Identification				
T		0	A	s	Demonstration of Knowledge/ Personnel 21. Person in charge present, demonstration of knowledge,					T		-	A	S	27. Proper cooling method used; Equipment Adequate to				
	~				and perform duties/ Certified Food Manager/ Posted 4						~				Maintain Product Temperature				
	~	22. Food Handler/ no unauthorized persons/ personnel							~				28. Proper Date Marking and disposition						
	Safe Water, Recordkeeping and Food Package Labeling							~				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips digital							
	~	23. Hot and Cold Water available; adequate pressure, safe					Permit Requirement, Prerequisite for Operati												
	~	24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled							30. Food Establishment Permit (Current/insp report sign posted)										
_		Conformance with Approved Procedures											12/31/2023 Utensils, Equipment, and Vending						
	~				25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions						~				31. Adequate handwashing facilities: Accessible and properly supplied, used				
-				i i	Consumer Adviso	ry				2					32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used				
	~				26. Posting of Consumer Advisories; foods (Disclosure/Reminder/Buffet P in menu with asterisks						~				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided				
0	Ι	N	N	С				e Acti R	ion N	0	Ι	Ν	d 90 N) Da C	ys or Next Inspection , Whichever Comes First				
U T	N	0	A	0 S	Prevention of Food Cont 34. No Evidence of Insect contaminat					U T	N	0	A	0 S	Food Identification 41.Original container labeling (Bulk Food)				
<u> </u>	•				animals 35. Personal Cleanliness/eating, drink	-					~								
	~				36. Wiping Cloths; properly used and	-			┥┝	4	-	_			Physical Facilities 42. Non-Food Contact surfaces clean				
	~				37. Environmental contamination				┥┝	1	~	+			43. Adequate ventilation and lighting; designated areas used				
	•				38. Approved thawing method				┥┝		~	+			44. Garbage and Refuse properly disposed; facilities maintained				
Proper Use of Utensils					╎┝	1	-	┥			45. Physical facilities installed, maintained, and clean								
1	39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used							~	╡			46. Toilet Facilities; properly constructed, supplied, and clean							
Ľ					40. Single-service & single-use article	1 2				\downarrow	-	+			47. Other Violations				
	~				and used						~								

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Received by: (signature) Nicole Jankovec	Print: Nicole Jankovec	Title: Person In Charge/ Owner Manager
Inspected by: (signature) Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

Establish	nent Name: D	Physical A 2616	Ridge Rd	City/State: Rockwa	III, TX	License/Permit # Page <u>2</u> of <u>2</u> .						
Item/Loc	ation	Temp F	TEMPERATURE OBSERVA	TIONS Temp F	Item/Locat	ion	Temp F					
	in cooler/hamburger	42	reach in cooler/raw chicke		_	er in ice slurry	41					
h	ashbrowns	60	shredded cheese	e 41	front	t cold top/milk 41						
reach	n in freezer ambient	11	ham	41								
cold	top/cut tomatoes	41	WIF ambient	2								
	ham/ham	41/41	WIC/corn dog	41								
un	der/raw egg	41	ham/diced chicker	41								
egę	g cooler/egg	41	veggie burger	41								
hot ho	lding on stove/sausage	154	raw chicken	41								
OBSERVATIONS AND CORRECTIVE ACTIONS												
Number	NOTED BELOW.											
	Drink hand sink 100+F. Need to post employee health poster											
	Shelf stable creamers/commercially and individually wrapped 3 comp sink 118 F											
	Dishwasher sanitizing at 100 ppm chlorine											
	Line hand sink 100+F equipped											
45	Food debris on floor in cook line											
42												
	Sani bucket setup to 272-700ppm sink and surface											
42	Need to clean waffle machine											
2			on counter for an hour/will b			in 4 hours or discarded						
			or below/not to leave	out on co	ounter							
	· · · ·	•	ses of spent grease									
15	Dumpster area look	-	a apiling tilog motol be	achaard								
45		-	s, ceiling tiles, metal ba	sepoard	S							
43	45 Need to clean floor in WIF/food debris Cloves used for all prep and RTE											
39/32	Gloves used for all prep and RTE 9/32 Need to clean buildup on hashbrown separator for grill/lots of buildup/no longer cleanable											
	Other hand sink 10	•	· · ·			<u></u>						
42 Need to clean ceiling of pass through/some food debris												
	Some surfaces with rust to be cleanable											
Received	by:		Print:			Title: Person In Charge/ Owner						
(signature)		2		ankov	vec	Manager						
Inspected (signature)		tez. 1	RS Christy C	ortez.								
Form EH-0	5 (Revised 09-2015)	0,.	y	,		Samples: Y N # collect	ed					