## **Retail Food Establishment Inspection Report**

First aid kit
Allergy policy
Vomit clean up
Employee health

7/					Time in: 2:20	Time out: 3:10		S-9							Est. Type Risk Category Page 1 of _	2	
Es	tabli	ishme	nt l	Vam		2-Follow	Contac	t/Owner N	lame:	4-	Inve	stiga	tion		5-CO/Construction 6-Other TOTAL/SCO	RE	
Ph	ysic	ny J al Ad	dre	ss:			Pest control			Но			Gı	rease	se trap : Follow-up: Yes 🗸	/B	
27					ckwall, TX  tatus: Out = not in co	IN -	none/NEED in compliance	2	= not	n/a obser		N/	-	_	$^{\circ}$ /s/250gal/6-7-2023 No $\square$ pplicable COS = corrected on site $\mathbb{R}$ = repeat violation W-Water	ch	
Ma	ırk tl	he app	ropi	riate	points in the OUT box for <b>Prio</b>							appr	opria	te bo	ox for IN, NO, NA, COS Mark an in appropriate box for R tive Action not to exceed 3 days		
O U	mpli I N		Stat N A	us C O	Time and Ten	nperature for	r Food Safety	y	R	O U		iance N O	Stat N A	C O	Fundance Health	R	
T	14	U	A	s	(F = d 1. Proper cooling time a	legrees Fahren and temperatu	-			T		U	A	s	Employee Health  12. Management, food employees and conditional employees;		
	~										~				knowledge, responsibilities, and reporting		
	~				2. Proper Cold Holding	g temperature(	(41°F/ 45°F)				~				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth		
		•	/		3. Proper Hot Holding	temperature(1	35°F)								Preventing Contamination by Hands		
		•	/		4. Proper cooking time						~				14. Hands cleaned and properly washed/ Gloves used properly <b>Gloves used</b>		
		•	/		5. Proper reheating pro- Hours)	cedure for hot	t holding (165	5°F in 2			~				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N )		
	~				6. Time as a Public Hea	alth Control; p	procedures &	records							Highly Susceptible Populations		
					Ap	proved Sour	rce				~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required		
						7. Food and ice obtained from approved source; Food in											
	~				good condition, safe, and destruction Nogale	es, Sys	-								Chemicals		
	/				8. Food Received at pro	oper temperati					_				17. Food additives; approved and properly stored; Washing Fruits & Vegetables		
					check at rece	PIPT n from Conta	mination				~				18. Toxic substances properly identified, stored and used	-	
					9. Food Separated & pr preparation, storage, di	rotected, preve	ented during f	food							Water/Dismbine		
	~				10. Food contact surfac		C	ed and							Water/ Plumbing  19. Water from approved source; Plumbing installed; proper		
	•				Sanitized at 200	ppm/tempera	ıture			3					backflow device		
	~				11. Proper disposition of reconditioned disc		reviously serv	ed or			~				20. Approved Sewage/Wastewater Disposal System, proper disposal		
					Pri	iority Foun	Ja4'an T4an	ms (2 Poi	inta) .	violar	tions	Rea	uire	Cor			
0	T	N	N	С		ority roun	idation Iter	1115 (2 1 0)		_	_	_		_	rrective Action within 10 days	D	
O U T	I N		N A	C O S	Demonstration	n of Knowled	lge/ Personne	el	R	O U T	I N	N O	N A	C O S	Food Temperature Control/ Identification	R	
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## **Retail Food Establishment Inspection Report**

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

Form EH-06 (Revised 09-2015)

	ment Name: Ny John's	Physical A	ddress: Ridge	City/State: Rockwall	TX	License/Permit # FS-9292	Page <u>2</u> of <u>2</u>				
Omm	iy domino	2700	TEMPERATURE OBSEI		, 17	1 6 6262					
Item/Loc	ation	Temp F	Item/Location	Temp F	Item/Locat	ion	Temp F				
front c	cold top/turkey	40									
roast beef		38									
	cheese	40									
CL	ıt tomatoes	39									
uı	under/turkey										
reach	reach in cooler/capicola										
		OF	SERVATIONS AND CORRE	CCTIVE ACTIONS							
Item Number	AN INSPECTION OF YOUR EST NOTED BELOW:	TABLISHME	NT HAS BEEN MADE. YOUR AT	TENTION IS DIRECT	TED TO TH	IE CONDITIONS OBSE	RVED AND				
	front hand sink 100	+F equi	oped. Need to post e	employee hea	alth po	ster					
42/45	Need to clean hand	sink/insi	de and behind/wall, so	oap dispense	r and p	aper towels ho	lder				
45			out/ looks like they ha		opped/	some food deb	ris				
	•		ed/ not working/cooli	ng							
42	Need to clean shelv										
32	The state of the s	ards wh	en discolored or bad	ly scored							
	3 comp sink 119 F										
36	Avoid using wiping cloths on plumbing at 3 comp sink										
34 Some flies and fruit flies											
			ne door and ice chute			•					
45			ots of food debris and			es that have fa	illen				
24	•		np sani sink setup to			•					
21			nanager on duty duri ing/under plumbing being	<u> </u>			mahla				
32/19			• , • •			u wnich is not clea	nable				
45	•		commercial. Need	to see mvoic	е						
45	Need to clean floors	s and wa	alis inroughout								
Received (signature)	•		Print: Charle	es Hoff		Title: Person In Charge Managel					
Inspected (signature)		tez, 1	RS Christy	Cortez, F	RS	Samples: Y N	# collected				
Form FH-06	5 (Revised 09-2015)		I			r					