Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

	rate: Time in: Time out: License/P					current/to post					po	OST Est. Type	e Risk Category	Page <u>1</u> of <u>2</u>	<u>,</u>			
	Purpose of Inspection: 1-Routine 2-Follow Up 3-Complai												TOTAL/SCOR	E				
Es	tabli	ishm	ent	Nan	ne:		Contact/O	Owner Na	ame:						* Number of Repeat V ✓ Number of Violation	ns COS:	16/84/	
Physical Address: 2785 Ridge Rd Rockwall, TX Pest control: Berrett/4-11-2024							Ho n/a	Hood n/a		Grease tra		e trap : s/250gal/6-20-24	Follow-up: Yes	10/04/0				
Compliance Status: Out = not in compliance IN = in compliance NO							= not				4 = n	ot ap	oplicable COS = corrected	on site R = repeat vio	olation W- Watch	ı		
Ma	ark t	he ap	prop	riate	points in the OUT box for	r each number	ed item						-		ox for IN, NO, NA, COS ive Action not to exceed 3	Mark an X in appropriat 3 days	te box for R	
O U	Compliance Status O I N N C Time and Temperature for Food Safety							R	_	ompliance Sta		e Stat	atus C	Employee Health			R	
T	11	U	А	s	(F = do	legrees Fahrer and temperate				T			Α.	s	12. Management, food em		employees:	
	~				Traper cooming time t	and temperate					~				knowledge, responsibilitie		emprojecs,	
	~				2. Proper Cold Holding	g temperature	(41°F/ 45°F)				~				13. Proper use of restriction eyes, nose, and mouth	on and exclusion; No dis	scharge from	
	3. Proper Hot Holding temperature(135°F)								Preventing Contamination by Har					nds				
		~			4. Proper cooking time	and temperat	ture				V				14. Hands cleaned and pr	roperly washed/ Gloves u	used properly	
					5. Proper reheating prod	cedure for ho	ot holding (165°F	in 2							15. No bare hand contact			
		•			Hours)						•				alternate method properly	followed (APPROVED	O Y N)	
	~				6. Time as a Public Hea	alth Control;	procedures & rec	cords								Susceptible Populations		
	Approved Source							~				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 unadulterated; parasite			d in	П									
	~				destruction Sysco											Chemicals		
	7				8. Food Received at pro	oper temperat	ture				/				17. Food additives; appro-& Vegetables	ved and properly stored;	Washing Fruits	
					check at rece	PIPT 1 from Conta	omination			3					18. Toxic substances prop	perly identified, stored an	nd used	
				l	9. Food Separated & pro			d		3						•		
	~				preparation, storage, dis	splay, and tas	sting								W	Vater/ Plumbing		
3					10. Food contact surfact Sanitized at			and			/			ĵ	19. Water from approved backflow device	source; Plumbing install	led; proper	
	~				11. Proper disposition of reconditioned	of returned, p	reviously served	or			~				20. Approved Sewage/Wadisposal	astewater Disposal Syste	m, proper	
	_				Pri	iority Four	ndation Items	s (2 Poi							rective Action within 10 a	days		
O U T	I N	N O	N A	C O S	Pri-			s (2 Poin	nts) ı	O U	I N	Req N O	nuire N A	C 0		days ature Control/ Identific	cation	R
о и т		N O				n of Knowled	dge/ Personnel	/ledge,		О	I N	N	N	С		ature Control/ Identific		R
T		N O		О	Demonstration 21. Person in charge pro	resent, demor	dge/ Personnel nstration of know Manager/ Posted	vledge,		O U	I N	N	N	C 0	Food Tempera 27. Proper cooling method	ature Control/ Identific d used; Equipment Ade ature		R
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Received by: (signature) Marty Hoff	Print: Marty Hoff	Title: Person In Charge/ Owner Manager
Inspected by: Christy Cortez, RS (signature)	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name:	Physical A	ddress:	City/State:	all TV	License/Permit # need current/to post	Page <u>2</u> of <u>2</u>			
JIIIIII	ny John's	2765	Ridge Rd TEMPERATURE OBSERVA	Rockwa	aII, I∧	need current to post				
Item/Loc	cation	Temp F	Item/Location	Temp F	Item/Loca	tion	Temp F			
cold to	op/ham	40	meat	36						
	turkey		bacon	37						
	cheese	39	WIF ambient	8						
C	cut lettuce	40								
ι	under/ham	40								
alteri	nate cooler/turkey	39								
reach	n in cooler/capicola	41								
WI	C/tomatoes	38								
Itam			SERVATIONS AND CORRECT							
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:									
	Hand sink 100+F equipped									
	3 comp sink 120F									
	Sani sink setup to 2	:00ppm	quats							
	Have spray bottles (labeled) of both chlorine and quats									
	Discussed only using chlorine spray for Restrooms only, label, and store separately to not confuse									
18	Spic and Span is what they were using for sanitizer/ far too strong									
10		•	nd Span had water in t			•				
18	* *		food contact/should be using disp			·	ppm			
10/42	Had been only using water and soap to clean slicer/discussed and COS Bread covered on shelf above cold table									
34	Bread covered on shelf above cold table Some flies									
32										
32	Ceiling of ice machine/to be addressed to be cleanable around ice chute Rusty shelves in WIC/to be cleanable									
37	Condensation in WIF/protect foods underneath									
<u> </u>	Gloves used for all prep and RTE									
21										
22	Nobody had food handlers/MUST have within 30 days of hire/discussed 6 months ago									
45 Clean wall behind 3 comp sink and behind dry dish rack, behind prep wall/slicer wall										
10	Need to clean ice machine chute									
45	To clean floors under equipment in front prep area/food debris									
	Very confusing for employees to know what to use where as far as sanitizer.									
	You have multiple products for different things as different concentrations and different chemicals.									
Received (signature)			Marty H	Hoff		Title: Person In Charge/ Manager	Owner			
Inspected (signature)	Marty Hoff d by: Chvisty Cov	tez, 1	RS Christy C		RS	Samples: Y N #	collected			