Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

Date: 4/14/2022		22	Time in: 2.05	Time out: 3:35		FS-9511							Est. Type	Risk Category	Page <u>1</u> of <u>2</u>			
Purpose of Inspection: 1-Routine 2-Follow 1							5-CO/Construction	6-Other	TOTAL/SCORE									
Es	Establishment Name: King's Crab Shack					2-F0H0W C	Contact/Owner Name: Sam Nguyen					* Number of Repeat Violations: Vumber of Violations COS:						
Pł	Physical Address: Pest cc 621 White Hills Rockwall, TX owner					est control :	control: Hood Grease er to provide not current owner				33/6	7/0						
M					tatus: Out = not in cor points in the OUT box for	mpliance IN = in each numbered i	n compliance	NO Mark ') = not √' a ch						plicable COS = corrected on site ox for IN, NO, NA, COS Mark	e R = repeat vio an X in appropriate	lation W-V	Watch
					•					ire In	nmed	iate	Cor	recti	ive Action not to exceed 3 days			
0	U N O A O Time and reinperature for Food Safety					R								R				
Т	Proper cooling time and temperature						Т				S	12. Management, food employed	es and conditional	employees;				
3					2. Proper Cold Holding temperature(41°F/45°F)						~				knowledge, responsibilities, and 13. Proper use of restriction and	charge from	\perp	
	~				-						eyes, nose, and mouth					marge from		
	~				3. Proper Hot Holding temperature(135°F)						Preventing Contamination by Hands							
	~				4. Proper cooking time and temperature			°E in 2		3				~	14. Hands cleaned and properly			
W					5. Proper reheating procedure for hot holding (165°F in 2 Hours)						~				15. No bare hand contact with re alternate method properly follow)	
	6. Time as a Public Health Control; proc					ocedures &	records							Highly Suscep	tible Populations			
	Approved Source									~				16. Pasteurized foods used; prob Pasteurized eggs used when requ eggs cooked		ered		
W	7. Food and ice obtained from approvious good condition, safe, and unadulterate			d unadulterated	d; parasite	ood in				•				emicals				
VV					destruction Pacific/US Foods												*** 1. **	
	~				8. Food Received at pro	per temperature	3				~				17. Food additives; approved an & Vegetables water only	d properly stored;	Washing Fru	its
	Protection from Contamination						~				18. Toxic substances properly id	lentified, stored an	d used					
3					9. Food Separated & protected, prevented during food preparation, storage, display, and tasting			ood					Water/ Plumbing					
3					10. Food contact surface Sanitized at			ed and			~			·	19. Water from approved source backflow device	; Plumbing installe	ed; proper	
	~				11. Proper disposition or reconditioned disca			ed or			~				20. Approved Sewage/Wastewa disposal	ter Disposal Syster	n, proper	
					Pri	ority Founda	ation Iten	ns (2 Poi							rective Action within 10 days			
O U T	I N	N O	N A	C O S	Demonstration	of Knowledge	e/ Personnel	l	R	U T	I N	N O	N A	C O S	Food Temperature	Control/ Identific	ation	R
2					21. Person in charge pre and perform duties/ Cer					2					27. Proper cooling method used: Maintain Product Temperature	; Equipment Adec	quate to	
	~				22. Food Handler/ no ur	nauthorized pers	sons/ persor	nnel		2					28. Proper Date Marking and dis	sposition		
	Safe Water, Recordkeeping and Foo Labeling			Food Pack	age		2					29. Thermometers provided, acc Thermal test strips	curate, and calibrate	ed; Chemical	/			
	23. Hot and Cold Water available; ade																	
															Permit Requirement, P			
	~				23. Hot and Cold Water 24. Required records av destruction); Packaged I Oyster tags o	railable (shellsto					<u></u>				Permit Requirement, P 30. Food Establishment Permit 12/31/2022			ted)
	'				24. Required records av destruction); Packaged I Oyster tags o	railable (shellsto Food labeled In file vith Approved	ock tags; par	rasite s			~				30. Food Establishment Permit 12/31/2022 Utensils, Equipm	it (Current/insp re	port sign pos	ted)
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Retail Food Establishment Inspection Report

1st followup is free. Any additional followups will result in a \$50 fee.

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

Form EH-06 (Revised 09-2015)

	ment Name:	Physical A		City/State:		License/Permit #	Page <u>2</u> of <u>2</u>		
King's Crab Shack		621 White Hills		Rockwa	III, IX	FS-9511			
Item/Loc	ation	Temp F	TEMPERATURE OBSERVATION Item/Location	Temp F	Item/Loca	tion	Temp		
under	counter cooler/shrimp	41	onion/garlic sauce						
fish	/hushpuppies	41/41	WIC/shrimp	41					
mder o	counter freezer ambient	-2	oysters	39					
cold	top/boiled egg	41	corn/potatoes	57/58					
CO	oked shrimp	41	sausage	59					
	soup	41	WIC ambient	-2					
white	e freezer/ambient	10							
ric	e in rice pot	177							
Ti			SERVATIONS AND CORRECTI						
Item Number	AN INSPECTION OF YOUR EST NOTED BELOW:	TABLISHME	NT HAS BEEN MADE. YOUR ATTENT	ION IS DIRE	CTED TO TI	HE CONDITIONS OBSE	RVED AND		
	Front hand sink at F	- Post	employee hand poster a	at hand s	sink.				
31/14			nt hand sink for food pr						
		•	Will have to have hand soap to	•		arge jug to use for	now.		
9	-		coolers, not over ready to eat for						
42	Clean storage cons						<u>'</u>		
40			s for spices/dirty and no	t cleana	ıble				
			cleanable/ clean and se						
37			n/under counter. Defros		eezer				
			t. Store knives clean		0020.				
35			food low and separate,	not on	orep tal	oles			
36	Store wiping cloths		<u> </u>		<u>р. ор топ</u>				
10			100 ppm chlorine sanitizer. N	lust always	s be setur	during prep and	service		
			• • • • • • • • • • • • • • • • • • • •			• • •			
40	/45 Clean in/around/on equipment, shelves, floors, walls behind prep areas. O Avoid using styrofoam as a scoop. Use a cleanable handled scoop instead								
28									
W									
37	Found hair in food. Discarded.								
10	Pink and black slime in ice machine ceiling/chute. Need to clean and sanitize								
1	Must aggressively cool foods. Discarded TCS previously cooked foods over 41F								
27			plastic tubs, take temps ofter						
	3 comp sink 110 F								
10/33 Dishwasher 0ppm chlorine sanitizer . No source of sanitizer. Must use 3 comp s									
31	Do not block dishwasher hand sink/not to be used for storage								
29	3								
W	Need to keep oyste	r tags in	order and when used						
21			e on duty at all times d	uring pre	ep and	service			
	No current vent hoc	d clean	ing sticker/last Jan 21.	Need to	check	with fire			
42	Clean hood vents/g	rease a							
Received (signature)	•		Paul Mo	ore		Title: Person In Charge			
Inspected (signature)	Paul Moore 1 by: Christy Cov	ton 1	Print: Christy Co			<u> </u>			
	Crur Uscy COV	10g, 1	Chilisty Co	חוכב,	170	Samples: Y N	# collected		