Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

Da	ate:				Time in:	Time out:	License/P	ermit #						Est. Type	Risk Category		_
3/27/2023 12:18 1:20 FS-93								359	359							Page $\underline{1}$ of $\underline{2}$	<u>-</u>
Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain										ation	1	5-CO/Construction	6-Other	TOTAL/SCOR	RE		
					^{ne:} Wine & Cheese		ntact/Owner l	Name:						★ Number of Repeat Violation✓ Number of Violations COS:			
Pł	nysic	al A	ddre	ess:		Pest con			Но						low-up: Yes	5/95/ <i>P</i>	1
19					Rockwall, TX	w/Groc	ery insp	_	n/a			-		ocery insp No			
M					Status: Out = not in comp points in the OUT box for ea	pliance IN = in compl ach numbered item	Mark	$\mathbf{O} = \text{not}$ $\mathbf{O} = \text{not}$						plicable COS = corrected on site ox for IN, NO, NA, COS Mark an	R = repeat vio	lation W-Watcl e box for R	h
					Priori	ty Items (3 Poin	ts) violations	Requi						ive Action not to exceed 3 days			r
О	ompli I	N	N	С	Time and Temp	erature for Food S	afety	R	О	Compliance S		N	C				R
U T	$ \mathbf{K} \mathbf{O} \mathbf{A} \mathbf{O} \mathbf{S} $ (F = degrees Fahrenheit)						U T		N O A		o s	Employee Health 12. Management, food employees and conditional employees;					
	~				Proper cooling time and	a temperature				~				knowledge, responsibilities, and re		employees;	
		2. Proper Cold Holding temperature(41°F/ 45°F)					+			13. Proper use of restriction and exclu			13. Proper use of restriction and ex	xclusion; No disc	charge from		
	~									~				eyes, nose, and mouth			
		3. Proper Hot Holding temperature(135°F)							Preventing Contamination by					nination by Han	nds		
		4. Proper cooking time and temperature					\Box		V			14. Hands cleaned and properly washed/ Gloves used properly					
		5. Proper reheating procedure for hot holding (165°F in 2				+						Gloves used 15. No bare hand contact with read	dy to eat foods or	r approved			
		Hours)						~				alternate method properly followe	ed (APPROVED	Y. N.)			
	~				6. Time as a Public Health	h Control; procedure	es & records							Highly Susceptil	ble Populations		
														16. Pasteurized foods used; prohib		fered	
					Appr	roved Source				'				Pasteurized eggs used when require no eggs	red		
					7. Food and ice obtained f good condition, safe, and												
	~				destruction	, r								Chem	nicals		
					8. Food Received at prope	er temperature								17. Food additives; approved and	properly stored;	Washing Fruits	
	•				check at receip	ot				~				& Vegetables			
					Protection fr	rom Contamination	n		3				~	18. Toxic substances properly idea	ntified, stored an	d used	
	_				9. Food Separated & prote preparation, storage, displ		ring food							Water/ Plumbing			
					10. Food contact surfaces		laanad and							19. Water from approved source;	Ü	adı propor	
W					Sanitized at pp		leaned and			~				backflow device	Plumbing installe	eu; proper	
	<				11. Proper disposition of reconditioned	returned, previously	served or			1				20. Approved Sewage/Wastewater disposal	r Disposal Syster	m, proper	
					Prior	rity Foundation	Items (2 Po	ints) v	iolat	tions	Req	uire	Cor	rective Action within 10 days			
O U	I N	N O	N A	C O		rity Foundation		oints) v	O U	I N	Req N O	nire N A	C 0	rective Action within 10 days Food Temperature Co	ontrol/ Identific	ation	R
O U T		N O				of Knowledge/ Perso	onnel		О	I N	N	N	С	Food Temperature Co			R
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Retail Food Establishment Inspection Report

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

Form EH-06 (Revised 09-2015)

Establish	ment Name:	Physical A	ddress.	City/State:		License/Permit #	Page 2 of 2				
	r #574 Wine & Cheese		N Goliad	Rockwa	all, TX	FS-9359	Page <u>Z</u> 01 <u>Z</u>				
T4 /T		ТЕ	TEMPERATURE OBSERVA		T4/T	4*	T 1				
Item/Loc		Temp F	Item/Location	Temp F	Item/Loca	uon	Temp I				
	cooler/ambient	26-28	under counter cooler ambien	- 00							
	/charcuterie boards/ambient	29	under counter cooler ambien	36							
olive	e bar/artichokes	41									
	feta	41									
ro	asted garlic	41									
mo	zzarella balls	41									
chee	se bunker ambient	34-36									
back	cheese wall ambient	34									
T	T		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 104 F wi	ith soap	and paper towels. Post	employ	ee heal	th poster.					
	3 comp sink 110+F	•				•					
	Sani sink setup to 2		guats								
18	•		strong (750-1000ppm quats). CO	S by falling	at dispense	er in deli at 200 ppm	guats				
10	 	-			meant to be mixed in sink with water for correct ppm						
42	-					mix with water for come	<u> </u>				
42			ed in cheese bunker/so		uebns		_				
40			s once opened within 7			6.1.1					
42	Some cleaning needed/organization in back shelves where recipe folders are stored										
	Under counter cooler not working/only used for storage/ next to 3 comp sink										
	Cheese slicer WRS after every use										
	Cheese grater brok	ken down and WRS after every use									
	Cheese wrapper sa	anitized a	after every use								
W	When frayed, repla	ce chee	se wrapper protector								
			with soap and paper to	wels							
45	To clean floor behi		1 1								
42			ne is stored behind bar/	dustv							
	All packaged items			adoty							
	7 tii paokagea iteme	proport	y laboloa								
Received	· ·		Print:			Title: Person In Charg	ge/ Owner				
(signature)	Donna Shoven		Donna	Shov	en 'en	Manage	r				
Inspected (signature)		ton.	Print:	ortoz	DC						
	Cru Uscy COV	162, 1	RS Christy C	oi lez,	1/3	Samples: Y N	# collected				