	Retail Food Establishment Inspection Report ビ First aid kit ビ Allergy policy レ Vomit clean up Employee health																		
	Date: Time in: Time out: License/Pe 9/22/2021 2:04 2:55 FS-9													Est. Ty	уре	Risk Category	Page <u>1</u> of	2	
Pu	Purpose of Inspection: 1 I-Routine 2-Follow Up 3-Complai											5-CO/Construction	_	6-Other	TOTAL/SCC	ORE			
	Establishment Name: Contact/Owner N Kroger # 574 Wine/Cheese							Name:						* Number of Repeat Violations: ✓ Number of Violations COS:				^	
Ph	vsic	al A	ddre	ess:	Rockwall, TX	Pe	st contr nain i			Ho n/a					e trap : in insp		Follow-up: Yes✔ No	4/96/	A
	Compliance Status: Out = not in compliance IN = in compliance N								not observed $NA = not applicable COS = c$				iot ap	oplicable COS = correct	corrected on site \mathbf{R} = repeat violation W - Watch			ch	
Mark the appropriate points in the OUT box for each numbered item Mark '\$\sigma' 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																			
Co O U	mpliance Status						R	0	Compliance Status O I N N C U N O A O Employee Health					II 141		R			
T	1							T S Image: 12 transmission of the second sec					employees;						
	~								~				knowledge, responsibili						
	~	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	sed properly					
			~		5. Proper reheating proc Hours)	cedure for hot ho	lding (1	65°F in 2			✓ I5. No bare hand contact with ready to eat for alternate method properly followed (APPRO								
			•		6. Time as a Public Hea	alth Control; proc	edures	& records			_							1	
	~					· 1					Highly Susceptible Populations 16. Pasteurized foods used; prohibited food not offer						fered		
						proved Source					~				Pasteurized eggs used w NO EGGS	when re	quired		
	 7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction 																		
	~				8. Food Received at pro	oper temperature					~				17. Food additives; appr& Vegetables	proved a	and properly stored;	Washing Fruits	
			<u> </u>		Protection	n from Contamii	nation				~				18. Toxic substances pro	roperly	identified, stored an	d used	
	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting						<u>]-</u>			Water/ Plumbing									
	~				10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature					~				 Water from approve backflow device 	19. Water from approved source; Plumbing installed; proper backflow device				
	~				11. Proper disposition of reconditioned disc	of returned, previ		erved or			r				20. Approved Sewage/V disposal	Wastew	ater Disposal Syster	m, proper	
	Priority Foundation Items (2 Pd						_				_	rrective Action within 10	0 days						
O U T	I N	N O	N A	C O S	Demonstration	n of Knowledge/	Person	nel	R	O U T	N	N O	N A	C O S	Food Tempe	eratur	e Control/ Identific	ation	R
	~				21. Person in charge pro and perform duties/ Cer						~				27. Proper cooling meth Maintain Product Temp			quate to	
	~	7 22 Food Handler/ no unauthorized persons/ personnel					~				28. Proper Date Markin								
					Safe Water, Recordkeeping and Food Package Labeling						~				29. Thermometers provided, accurate, and calibrated; Chem Thermal test strips				
	~				23. Hot and Cold Water	er available; adequ	ate pre	ssure, safe							Permit Require	ement,	Prerequisite for O	peration	
	~				24. Required records av destruction); Packaged		ck tags;	parasite	\prod	M					30. Food Establishmen)
					Conformance v	with Approved I	Procedu	ires		Ĥ					need current, Utensils		20 displayed pment, and Vendin		
	~				25. Compliance with Va HACCP plan; Variance processing methods; ma	e obtained for spe	cialized			2					31. Adequate handwash supplied, used	hing fac	ilities: Accessible a	nd properly	
					Cons	sumer Advisory				W					32. Food and Non-food designed, constructed, a			e, properly	
	~				26. Posting of Consume foods (Disclosure/Remi						~				33. Warewashing Facili Service sink or curb clea			used/	
		b.	B 7	C	Core Items (1 Poin	nt) Violations I	Require	e Corrective		_				-	ys or Next Inspection,	Which	never Comes First		
O U T	I N	N O	N A	C O S		of Food Contam			R	O U T	N	N O	N A	C O S			dentification		R
1					34. No Evidence of Inse animals						~				41.Original container la	abeling	(Bulk Food)		
	~				35. Personal Cleanlines			acco use			1					•	al Facilities		
	~				36. Wiping Cloths; prop		ored			1					42. Non-Food Contact s				
L	~				37. Environmental cont						~				43. Adequate ventilation				
	38. Approved thawing method						~				44. Garbage and Refuse45. Physical facilities in								
					Prope 39. Utensils, equipment	er Use of Utensil		d stored			~				45. Physical facilities in 46. Toilet Facilities; pro				-
	~				dried, & handled/ In us	se utensils; prope	rly used	1			~					Sporty C	sonotracted, supplied	., and crean	
	~				40. Single-service & sir and used	ngle-use articles;	properl	y stored			~				47. Other Violations				

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

Form EH-06 (Revised 09-2015)

Establishment Name: Kroger # 574 Wine/Cheese		Physical A	^{ddress:} N Goliad	City/State: Rockwa		License/Permit #	Page <u>2</u> of <u>2</u>	
nioge		1330	TEMPERATURE OBSERVA		III, IA	10-0003		
Item/Loc	ation	Temp F	Item/Location	Temp F	Item/Locat	ion	Temp F	
cheese island ambient		28-33						
3 door cooler ambient		35						
bulk cheese display ambient		33						
unde	r counter ambient	34						
cheese wall display case ambient		34						
olive	bar/lime beans	38						
mushrooms in garlic		36						
Ite		-	SERVATIONS AND CORRECT					
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW:	TABLISHME	NT HAS BEEN MADE. YOUR ATTEI	NTION IS DIRE	CTED TO TH	E CONDITIONS OBSE	RVED AND	
	Hand sink 100+F							
	3 comp sink 110+ F		opportunited and and	100				
			oncentrated and over			to roach 200	quata	
			sink full of water, test, then a		iecessary	to reach 200ppm	quais	
	Sani bottle filled in o							
	All items labeled correctly with ingredients listed							
	Items in olive bar stirred every hour							
Olive bar utensils WRS daily or as needed Barmosan wordges and wheels out at room temp/wrapped, non TCS								
Parmesan wedges and wheels out at room temp/wrapped, non TCS								
42	wine bar hand sink 129 F42 Organizing, cleaning of underneath cabinets							
42 W	Rusty cart/step stor							
			sink/attracted fruit flie	s in wine	bar			
51707					N 41			
Dishwasher in wine bar sanitizing per Temp Rite strips Sanitizer bottle available in cheese area for use in wine a								
	Disposable cups us				<u> </u>			
Received (signature)			Donna	Shov	en	Title: Person In Charge		
Inspected	Donna Shoven ^{Iby:} Chrísty Cov		Print:			manayer	ļ	
(signature)		tez, î	RS Christy C	cortez,	RS	Samples: Y N	# collected	
Form EH-06	(Revised 09-2015)							