

Follow-up fee of \$50.00 is required after 1st Followup

Retail Food Establishment Inspection Report

City of Rockwall

- First aid kit
- Allergy policy/training
- Vomit clean up
- Employee health

Date: 02/24/2021	Time in: 8:45	Time out: 1:26	License/Permit # FS 8032	Est. Type Deli	Risk Category Med	Page <u>1</u> of <u>2</u>
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Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine <input type="checkbox"/> 2-Follow Up <input type="checkbox"/> 3-Complaint <input type="checkbox"/> 4-Investigation <input type="checkbox"/> 5-CO/Construction <input type="checkbox"/> 6-Other							TOTAL/SCORE
Establishment Name: Kroger 575 deli			Contact/Owner Name: Kroger		* Number of Repeat Violations: _____		5/95/A
Physical Address: Ridge road			Pest control : Store	Hood 02/21	Grease trap : Store	Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- Watch
 Mark the appropriate points in the OUT box for each numbered item Mark in appropriate box for IN, NO, NA, COS Mark an in appropriate box for R

Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Time and Temperature for Food Safety (F = degrees Fahrenheit)						Employee Health					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
1. Proper cooling time and temperature						12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
2. Proper Cold Holding temperature(41°F/ 45°F) See						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth					
		<input checked="" type="checkbox"/>				Preventing Contamination by Hands					
3. Proper Hot Holding temperature(135°F)						14. Hands cleaned and properly washed/ Gloves used properly					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
4. Proper cooking time and temperature						15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y. N.) Using gloves					
		<input checked="" type="checkbox"/>				Highly Susceptible Populations					
5. Proper reheating procedure for hot holding (165°F in 2 Hours)						16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required					
		<input checked="" type="checkbox"/>				Chemicals					
6. Time as a Public Health Control; procedures & records Watch when meats our for slicing						17. Food additives; approved and properly stored; Washing Fruits & Vegetables Water only					
Approved Source						18. Toxic substances properly identified, stored and used Watch storage					
	<input checked="" type="checkbox"/>					Water/ Plumbing					
7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Commercial						19. Water from approved source; Plumbing installed; proper backflow device City approved					
	<input checked="" type="checkbox"/>					20. Approved Sewage/Wastewater Disposal System, proper disposal					
8. Food Received at proper temperature At receiving											
Protection from Contamination											
	<input checked="" type="checkbox"/>										
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting											
	<input checked="" type="checkbox"/>										
10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature Watch											
11. Proper disposition of returned, previously served or reconditioned											

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Demonstration of Knowledge/ Personnel						Food Temperature Control/ Identification					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) 11						27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
22. Food Handler/ no unauthorized persons/ personnel All employees as part of training						28. Proper Date Marking and disposition Good					
Safe Water, Recordkeeping and Food Package Labeling						29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Yellow digital					
	<input checked="" type="checkbox"/>					Permit Requirement, Prerequisite for Operation					
23. Hot and Cold Water available; adequate pressure, safe See						30. Food Establishment Permit (Current/ insp sign posted) To post new					
	<input checked="" type="checkbox"/>					Utensils, Equipment, and Vending					
24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled						31. Adequate handwashing facilities: Accessible and properly supplied, used Equipped					
Conformance with Approved Procedures						32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used Watch condition of food containers etc					
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided Set up and working					
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions											
Consumer Advisory											
	<input checked="" type="checkbox"/>										
26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/ Buffet Plate)/ Allergen Label Posting											

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First											
Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Prevention of Food Contamination						Food Identification					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
34. No Evidence of Insect contamination, rodent/other animals Watch for flies						41. Original container labeling (Bulk Food)					
	<input checked="" type="checkbox"/>					Physical Facilities					
35. Personal Cleanliness/eating, drinking or tobacco use						42. Non-Food Contact surfaces clean See					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
36. Wiping Cloths; properly used and stored Using spray						43. Adequate ventilation and lighting; designated areas used					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
37. Environmental contamination						44. Garbage and Refuse properly disposed; facilities maintained Watch					
	<input checked="" type="checkbox"/>					Proper Use of Utensils					
38. Approved thawing method Pull or cook						45. Physical facilities installed, maintained, and clean See					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used Watch storage						46. Toilet Facilities; properly constructed, supplied, and clean Equipped					
	<input checked="" type="checkbox"/>					47. Other Violations					
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40. Single-service & single-use articles; properly stored and used Watch cardboard use											

