

Retail Food Establishment Inspection Report

City of Rockwall

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

Date: 11.8.22	Time in: 2:00pm	Time out: 330pm	License/Permit # FS8299 exp12.31.22	Handlers 25	CFM exp12.17.26	Page <u>1</u> of <u>2</u>
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			Contact/Owner Name: Brooke Mayer		Number of Repeat Violations: <input checked="" type="checkbox"/> Number of Violations COS: <input type="checkbox"/>	
Establishment Name: La Madeline			Pest control : serviced 10.27.22		Hood 11.22	
Physical Address: 987 E I-30			Grease trap : 3kgal liquid env 8.4.22		Follow-up: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

4/96/A

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 a checkmark 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) Good job						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth					
<input checked="" type="checkbox"/>						Preventing Contamination by Hands					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
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__)					
		<input checked="" type="checkbox"/>				Highly Susceptible Populations					
5. Proper reheating procedure for hot holding (165°F in 2 Hours)									<input checked="" type="checkbox"/>		
			<input checked="" type="checkbox"/>			16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required					
6. Time as a Public Health Control: procedures & records						Chemicals					
<input checked="" type="checkbox"/>									<input checked="" type="checkbox"/>		
7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction						17. Food additives; approved and properly stored; Washing Fruits & Vegetables					
<input checked="" type="checkbox"/>									<input checked="" type="checkbox"/>		
8. Food Received at proper temperature						18. Toxic substances properly identified, stored and used					
Protection from Contamination						Water/ Plumbing					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting						19. Water from approved source; Plumbing installed; proper backflow device					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
10. Food contact surfaces and Returnables : Cleaned and Sanitized at <u>50</u> ppm/temperature chloro 130F						20. Approved Sewage/Wastewater Disposal System, proper disposal					
				<input checked="" type="checkbox"/>							
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)						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						28. Proper Date Marking and disposition					
Safe Water, Recordkeeping and Food Package Labeling						Permit Requirement, Prerequisite for Operation					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
23. Hot and Cold Water available; adequate pressure, safe						29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips					
			<input checked="" type="checkbox"/>			Utensils, Equipment, and Vending					
24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled						<input checked="" type="checkbox"/>					
Conformance with Approved Procedures						Consumer Advisory					
			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions						31. Adequate handwashing facilities: Accessible and properly supplied, used					
26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label						32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used Clean mixer					
			<input checked="" type="checkbox"/>								
26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label						33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided					

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						41. Original container labeling (Bulk Food) Label bulk foods					
<input checked="" type="checkbox"/>						Physical Facilities					
35. Personal Cleanliness/eating, drinking or tobacco use						<input checked="" type="checkbox"/>					
<input checked="" type="checkbox"/>						42. Non-Food Contact surfaces clean					
36. Wiping Cloths; properly used and stored						<input checked="" type="checkbox"/>					
<input checked="" type="checkbox"/>						43. Adequate ventilation and lighting; designated areas used					
37. Environmental contamination						<input checked="" type="checkbox"/>					
<input checked="" type="checkbox"/>						44. Garbage and Refuse properly disposed; facilities maintained					
38. Approved thawing method						<input checked="" type="checkbox"/>					
Proper Use of Utensils						45. Physical facilities installed, maintained, and clean					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used						46. Toilet Facilities; properly constructed, supplied, and clean					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
40. Single-service & single-use articles; properly stored and used						47. Other Violations Provide hand wash signs at HS/restrooms					

