					1	Retail Fo	od Esta	blis	hm	ent	In	spe	ecti	on Report Image: Constant of the second state of the se				
	ate:)/1	6/2	202	20	Time in: Time o 10:45		License/Pe							Est. Type Risk Category Page <u>1</u> of <u>2</u>	_			
Purpose of Inspection: 🖌 1-Routine 📃 2-Follow Up 📃 3-Complai						int	_	Inve	stiga	atior	1 [5-CO/Construction 6-Other TOTAL/SCOR	E					
Establishment Name: Contact/Owner N La Cocina Dwl Tio Mon Ramon Mel						✓ Number of Violations COS:					✓ Number of Violations COS:							
Pł 10	^{nysic} 5 K	al A	ddre way	ess: / Ro	ockwall, TX	Pest contr All Pest/	monthly		Ho Oil L		3mo	Gi Ca	rease an E	L	ر			
M					Status: Out = not in compliance Dut = not in compliance	IN = in compliant	nce NC	$\mathbf{O} = \text{not}$						plicable $COS = corrected on site R = repeat violation W- Watch x for IN, NO, NA, COS Mark an X in appropriate box for R$	1			
					•				ire In	nmed	liate	Cor	rect	ive Action not to exceed 3 days				
	ompli I N	ianco N O	e Sta N A	tus C O	Time and Temperature		ety	R			iance N O	e Stat N A	tus C O	Employee Health	R			
Т	T S (F = degrees Fahren 1. Proper cooling time and temperature			,			Т				s	12. Management, food employees and conditional employees;	_					
	~							~			knowledge, responsibilities, and reporting							
3				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 properly washed/ Gloves used properly	_					
		~			5. Proper reheating procedure for Hours)	.65°F in 2			~				Gloves used 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_N_)					
	~				6. Time as a Public Health Contro	ol; procedures	& records			<u> </u>				Highly Susceptible Populations				
	Approved Source							~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required eggs cooked						
	~	7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Nogales, Big State										Chemicals						
	~				8. Food Received at proper tempe	erature				~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables	Ī			
					check at receipt	ontomination				· ~				Water only 18. Toxic substances properly identified, stored and used				
3					Protection from Contamination 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting					•				Water/ Plumbing				
3					10. Food contact surfaces and Re Sanitized at <u>100</u> ppm/temp	eturnables ; Cle perature	aned and			~			-	19. Water from approved source; Plumbing installed; proper backflow device	Ī			
-	~				11. Proper disposition of returned reconditioned discarde	d, previously se	erved or			~				20. Approved Sewage/Wastewater Disposal System, proper disposal				
	Priority Foundation Items (2 Po				inte)	. ,	tions	Rea	uira	Cor								
	-				e e e e e e e e e e e e e e e e e e e	oundation n	(210)								_			
O U T	I N	N O	N A	C O S	Demonstration of Know			R	Violai O U T	I N	N O	N A	C O S	Food Temperature Control/ Identification	R			
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Received by: (signature) see below	see below	Title: Person In Charge/ Owner
Inspected by: (signature) see below	Print: see below	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: Dicina Del Tio Mon	Physical A 105 K	lenway	City/State: Rockwa	II, TX	License/Permit # Page 2 of FS-9091		of <u>2</u>		
Item/Loc	ation	Temp F	TEMPERATURE OBSERVA	TIONS Temp F	Item/Locat	Location		emp F		
	ells/beef	194	hot holding on stov	-	ice cream frrez			-		
	pork/pork	158/162	beef/pork	161/145	ice c	ream freez	er -	5.8		
k	peans/rice	148/141	beef	152						
cilar	ntro (not on ice)	68	WIC/beef	42						
cold	top/cut tomatoes	41	pork/chicken	41/41						
	cheese	41	rice/ground bee							
un	der/chicken	41	beans on ice	44						
	ham	41	glass front cooler ambier							
Item	AN INSPECTION OF YOUR ES		SERVATIONS AND CORRECT NT HAS BEEN MADE. YOUR ATTEN			IE CONDITIONS OBSERV	ED AND			
Number	NOTED BELOW:									
0.1	Hand sink 106+									
31	Need paper towels				- la - 4la	Disconderal				
2			cold at 41. Advised to							
40 42			ntainers (sour cream co				se			
42		-	ent shelf. also where t ropriately. (fajita seasoning				26)			
2	-		. Must cold hold at 41 or below			-	-			
45	Clean floors, wall be			W. Ouggeote			o bath.			
45			eboards, broken tiles							
	Clean knife magnet									
36	Store wiping cloths									
9	Store raw eggs low									
_	Sani bucket 100 pp									
37/39	Clean back storage	area, o	rganize, dispose of ur	nused equ	uipment					
31			ump sink. large pieces							
	Beans made this morn	ing. in ic	e baths. within 2 hours to	70 then 4 t	o 41. Wi	II now be placed ir	ו WIC			
42	Clean shelves in ba	ack, prep	o tables							
35										
37										
32	2 Sand, bleach large cutting boards in back									
	40 Maintenace to walls, duct tape on walls to hold together									
32										
34	4 Gap at front door									
Received	by:		Print:			Title: Person In Charge/	Owner			
(signature)	Ramon Melendez		Ramon N	Aelena	dez	Owner				
Inspected (signature)	Ramon Melendez ^{Tby:} Chrísty C	orte	Z Christy	Cort	ez	Samples: Y N #	collected			
Form EH-06	6 (Revised 09-2015)									