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
Allergy policy/training Vomit clean up Employee health
Employee health

Date: 01/25/2021	Time in: 9:03	Time out: 9:55	License/Pe							Est. Type	Risk Category	Page 1	of <u>2</u>
	ction: 1-Routine	2-Follow Up	3-Complai		_	Inves	stiga	ation	[	5-CO/Construction	6-Other	TOTAL/S	CORE
Establishment Name: Contact/Owner La Quinta inn & suites Jay soun					* Number of Repeat Violations:     ✓ Number of Violations COS:						ions:		
Physical Address: 689 E I -30			ontrol : monthly		Hoo Na	od		Gı Na			Follow-up: Yes  8/92/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 \( \) 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 O I N N C U N O A O	N N C Time and Temperature for Food Safety					ompli I N	ance N O		waa Maalth		R		
T S	A U (E = degrees Eshrapheit)					14	0	A	yee Health ees and conditional	employees;			
					knowledge, responsibilities, and reporting Policy and posting								
	2. Proper Cold Holding <b>See</b>	; temperature(41°F/	45°F)			/			charge from				
	3. Proper Hot Holding t	temperature(135°F)			Screening at arrival							ds	
	4. Proper cooking time	and temperature			14. Hands cleaned and properly washed/ Glove							sed properly	
	5. Proper reheating prod Hours)	cedure for hot holdir	ng (165°F in 2		15. No bare hand contact with ready to eat foods or a alternate method properly followed (APPROVED)								)
	6. Time as a Public Hea	alth Control; procedi	ires & records		Gloves used								-/
		-								16. Pasteurized foods used; prol	hibited food not off	ered	
	-	proved Source						<b>'</b>		Pasteurized eggs used when req Precooked only rte	uired		
	7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Sysco									Cho	emicals		
	8. Food Received at pro									17. Food additives; approved ar & Vegetables	nd properly stored;	Washing Fru	its
	To always che	r from Contaminati	ion		3					Not using fruit curr 18. Toxic substances properly in See attached	ently dentified, stored and	d used	
	Food Separated & protected, prevented during food preparation, storage, display, and tasting				Water/ Plumbing						Plumbing		
	10. Food contact surfaces and Returnables ; Cleaned and Sanitized at 200 ppm/temperature				19. Water from approved source; Plumbing instabackflow device						e; Plumbing installe	ed; proper	
	11. Proper disposition of returned, previously served or reconditioned Discarded				20. Approved Sewage/Wastewater Disposal System, disposal						n, proper		
O I N N C	Pri	ority Foundatio	n Items (2 Poi	ints) vi	olati		Req N	uire N	Cor	rective Action within 10 days			R
U N O A O S	Demonstration 21. Person in charge pro	n of Knowledge/ Per			U T	N	0	A	o S	Food Temperature	Control/ Identifica	ation	
	and perform duties/ Cer	rtified Food Manage	er (CFM)			~			27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature				
22. Food Handler/ no unauthorized persons/ personnel							/			28. Proper Date Marking and di Frozen today		1.01 : 1	
Safe Water, Recordkeeping and Food Package Labeling					29. Thermometers provided, accurate, and calil Thermal test strips  Digital						curate, and calibrate	ed; Chemical	
23. Hot and Cold Water available; adequate pressure, safe See										Permit Requirement, I	Prerequisite for O <sub>J</sub>	peration	
	24. Required records av destruction); Packaged Commercial	vailable (shellstock to Food labeled	ags; parasite			~			30. Food Establishment Permit (Current/ insp sign poste Need 2021				
	25. Compliance with V		Process, and							Utensils, Equip	ment, and Vending lities: Accessible ar		
	HACCP plan; Variance processing methods; ma					~				supplied, used Equipped			
		sumer Advisory			2					32. Food and Non-food Contact designed, constructed, and used Colander etc			
	26. Posting of Consume foods (Disclosure/Remindled on labels					<u> </u>				33. Warewashing Facilities; ins Service sink or curb cleaning fa Wrsequipped		used/	
0 I N N C	Core Items (1 Poir	nt) Violations Req	uire Corrective	Action R	Not O		xcee N	ed 90 N	Da C	ys or Next Inspection , Which	ever Comes First		R
U N O A O S		of Food Contamina			U T	N	0	A	o S		entification		
	34. No Evidence of Instantinals				Ш		<b>/</b>			41.Original container labeling (	bulk rood)		_
W	35. Personal Cleanlines Watch in cool	er in back w	ash area				-			Physica 42. Non-Food Contact surfaces	clean		
	Setting up who	en în use			1	ام				Minor  43. Adequate ventilation and lig		reas used	
	38. Approved thawing	method			$\vdash$	•				44. Garbage and Refuse properl			i —
38. Approved thawing method Serving semi thawed  Proper Use of Utensils				-	<u>~</u>	_	_	-	45. Physical facilities installed,	maintained, and cle	ean		
	39. Utensils, equipment dried, & handled/ In us	t, & linens; properly			_	<u> </u>	_		_	46. Toilet Facilities; properly co Equipped / hot wa		, and clean	
1	40. Single-service & sin and used See	ngle-use articles; pro	operly stored				~		_	47. Other Violations			

## Retail Food Establishment Inspection Report

## City of Rockwall

Received by: (signature) Jay Soun	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: La Quinta & suites		Physical Address: 689 E I-30		City/S Roc	tate: ckwa		License/Permit # Page 2 of 2 FS 7920		
			TEMPERATURE OBSERVA	TION	S				
Item/Loc	ation	Temp F	Item/Location	<u>Te</u>	emp F	Item/Loc	ation_		Temp 1
Market freezer		-2/8	Upright freezer	•	-3				
Beverage cooler		37	Freezing yogur	t					
Residential cooler 1			Cooler for prebagged mea	ıls (	31				
Cream cheese		38							
	eezer empty	15							
Hesi	dential cooler 2	_							
	Butter	38							
	Freezer	9	SSERVATIONS AND CORRECT	TVE A	CTION	NC NC			
Item	AN INSPECTION OF YOUR ES		ENT HAS BEEN MADE. YOUR ATTEN	-			THE CONDITIONS OBS	ERVED A	ND ND
Number	NOTED BELOW:								
	Not using dining room (yo	gurt/ muff	in / granola bar and water ) eg	g san	dwiche	es Jimmy	dean fully cooked	and froz	en HTT
	All meals are prebagge	ed in to g	go containers and provided	l to g	uest t	o eat in	their rooms etc		
	All ingredients on pack		•						
	Hot water in kitchen -1								
			act surfaces and peroxide	for n	onfoo	d comm	only touched su	rfaces	
18	<u> </u>		bottle of peroxide or yellow of				-		d etoroe
	-			leane	1 15 5	ioreu/avi	nd storing by napi	NIIIS AIIC	1 510165
42 45	Minor cleaning inside Seal any exposed woo		and under sink etc						
40	Quats sanitizer at 200								
W		• • • • • • • • • • • • • • • • • • • •	als below and away from f	acility	v food	d etc			
	,		cooler that they don't preve				sina		
40			for no original product - si				<u> </u>		
40	·		lastic utensils that you are			them fr	om what is abov	<u>——</u>	
	Two microwaves and		•		<u> </u>				
			nould be commercial when	repla	acina				
32			colander as it is difficult to			and is	easilv broken		
			coffee. All areas sanitized						
	All stirrs are sleeved e								
	Advised to use chemic		abels						
	Nothing to wash other than hands all items that go I to bag are prepackaged								
	Guest will heat sandwi				<u> « о р</u>	Торологи	9 - 0.		
Received	by:		Print:				Title: Person In Char	ge/ Owner	
(signature)	See abov	e /e							
See above  Inspected by: (signature)  Kelly Kirkpatrick			Print:						
(gature)	Kelly Kirkpa	itrick	(KS				Samples: Y N	# collect	ed