e q u ollow	ir	ec		of \$50.00 is ifter 1st			City of	Ro	ckv			Ins	spe	ecti	tion Report
Date: Time in: Time out: License/P 06/01/2022 2:09 2:45 FS 9													Food Managers Food Handlers 1 Page $\underline{1}$ of		
Purpose of Inspection: 1-Routine 2-Follow Up 3-Compla Establishment Name: Contact/Owner N											tion	n	5-CO/Construction 6-Other TOTAL/SCO * Number of Repeat Violations:		
Lakes	s R	egi	ona	c. community cente		Balv	rinder Ca			-			~		✓ Number of Violations COS: 1/00/
Physical Address: Pest control : Versacore monthly Compliance Status: Out = not in compliance						Hood Na					G Tra	reas	se trap / waste oil : Follow-up: Yes I 79977		
				tatus: Out = not in co points in the OUT box for	ompliance IN = r each numbere	in complia d item	nce N Mark	$\mathbf{O} = \mathbf{n}$ \mathbf{V} ir							pplicable $COS = corrected on site O, NA, COS Mark an \sqrt{n} ppropriate box for R$
Compl	ianc	e Sta	tus	Prio	ority Items	(3 Points	s) violation	s Req	uire		<i>medi</i> mpli				tive Action not to exceed 3 days
O I U N T	s (F = degrees Fahrenheit)						R			Î	N O	N A	C O S	Employee Health	
	1. Proper cooling time and temperature							12. Management, food employees and condition knowledge, responsibilities, and reporting						12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
~	2. Proper Cold Holding temperature(41°F/ 45°F)						13. Proper use of restriction and exclusion; No disevery eyes, nose, and mouth						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth		
-	3. Proper Hot Holding temperature(135°F)						Posting at hand sink						Posting at hand sink Preventing Contamination by Hands		
	4. Proper cooking time and temperature							5					14. Hands cleaned and properly washed/ Gloves used properly		
	~	,		5. Proper reheating pro Hours)	cedure for hot	holding (1	165°F in 2					/			15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_ $N_{\rm e}$)
	6. Time as a Public Health Control; procedures & records													Highly Susceptible Populations	
				Approved Source						Pasteurized eggs used when required					
~	good condition,			good condition, safe, a	e obtained from approved source; Food in , safe, and unadulterated; parasite Dommercial grocery							To be used f			To be used for baking only Chemicals
~				8. Food Received at pro	oper temperat				1		~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables
				To transport sa	-	mination			_	_	~ ~				Water only 18. Toxic substances properly identified, stored and used
				Protection from Contamination 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting					Stirred low an						Stirred low and labeled Water/ Plumbing
				· · ·		-	aned and								19. Water from approved source; Plumbing installed; proper
				10. Food contact surface Sanitized at <u>200</u>	ppm/tempera		uats			(~				backflow device City approved 20. Approved Sewage/Wastewater Disposal System, proper
		~		11. Proper disposition or reconditioned Own	n meals	eviously s	erved or			(~				disposal
O I U N	N	N	С		Ľ			Dints R		0	I	Req N O	Ν	С	
U N T	0	A	O S	Demonstration 21. Person in charge pr	esent, demons	stration of	knowledge,		_	U T	N	0	A	O S	Food Temperature Control/ Identification 27. Proper cooling method used; Equipment Adequate to
				and perform duties/ Ce. New manager pl 22. Food Handler/ no u	lans to get	cfm as	ар			(~	_			Maintain Product Temperature 28. Proper Date Marking and disposition
V				On site currently						_					Discussed date marking 6 days 29. Thermometers provided, accurate, and calibrated; Chemical/
	1			Safe Water, Reco	Labeling		-				~				Thermal test strips Digital and test strips on site
~				23. Hot and Cold Wate 100/118 hand s	er available; ac	lequate pre	essure, safe								Permit Requirement, Prerequisite for Operation
		~		24. Required records av destruction); Packaged		stock tags;	parasite				~				30. Food Establishment Permit (Current/ insp sign posted) Posted
		1		Conformance 25. Compliance with V											Utensils, Equipment, and Vending 31. Adequate handwashing facilities: Accessible and properly
		~		HACCP plan; Variance processing methods; m	e obtained for anufacturer in	specialized structions				1	~				supplied, used
				Con	sumer Advis	ory				(~				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used Watch condition
~		~		26. Posting of Consum- foods (Disclosure/Rem Not serving meals at	inder/Buffet F	Plate)/ Alle	rgen Label					~			33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided Supplied
		T		Core Items (1 Poin	nt) Violation	ns Requir	e Corrective		ion N					_	ays or Next Inspection , Whichever Comes First
O I U N T	N O	N A	C O S	Prevention 34. No Evidence of Ins	of Food Cont			R		O U T	I N	N O	N A	C O S	Food Identification
/				34. No Evidence of Ins animals 35. Personal Cleanlines		,						/			41.Original container labeling (Bulk Food)
				36. Wiping Cloths: pro	Ge perly used and			-	╎┝	_		_			Physical Facilities 42. Non-Food Contact surfaces clean
	~	/	\vdash	Using spray be 37. Environmental cont	ottle						~ ~	-			43. Adequate ventilation and lighting; designated areas used
+	, ,	,		38. Approved thawing	method			-			~				44. Garbage and Refuse properly disposed; facilities maintained Checking / coming Tuesday
1				Prop	er Use of Ute	nsils				1					45. Physical facilities installed, maintained, and clean See attached
~				39. Utensils, equipmen dried, & handled/ In us	t, & linens; pr se utensils; pr	operly use	d, stored, 1				~				46. Toilet Facilities; properly constructed, supplied, and clean Equipped
				Watch 40. Single-service & sin and used	ngle-use articl	les; proper	ly stored			╡					47. Other Violations
											ľ	-			

Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Balvinder Cantu	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

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	nent Name:	Physical A		City/State:		License/Permit # FS 9342	Page	Page <u>2</u> of <u>2</u>			
Lakes	s regional	400 ai	rport TEMPERATURE OBSERVA	Rockwa	uii	F3 9342					
Item/Loc	ation	Temp F	Item/Location	Temp F	Item/Loca	ion		Temp F			
2 door	cooler										
	Maya	20									
	Mayo	39									
	Freezer	2.3									
		OB	SERVATIONS AND CORRECT	IVE ACTIC	NS						
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW: temps in F	TABLISHME	NT HAS BEEN MADE. YOUR ATTEN	TION IS DIR	ECTED TO TH	IE CONDITIONS OBSER	VED AI	ND.			
	Portion of kitchen is residential for instruction										
	Three comp sink and hand sink an Dishmachine also on site										
	Currently not teaching classes now in kitchen / all food is personal / any shared meal will be catered										
	from a permitted facilit	ty									
	Members bring own m	eals and	store in 2 door cooler								
	Thermo in cooler and in freezers I										
			ats product -tested to be 2								
	Test strips for bleach also on site for three comp sink - Dishmachine is not in use										
			np sink - soap and sanitize								
45	Need to clean drains		r classes etc / no commor	n meals co	okea etc						
45 45	Also need to clean uno										
-10	Inside ice machine loo										
	Hot water in restrooms is 100 F and equipped										
Received (signature)	by: Coo aboy		Print:			Title: Person In Charge/	Owner				
	See abov	<u>'</u>									
Inspected (signature)	See abov Kelly kirkpa	trick	\mathcal{RS}								
	(Revised 09-2015)	n un				Samples: Y N #	¢ collecte	ed			