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: 07/06/202	Time in: 4:05	Time out: 5:20	FS 93						Page 1 of _	2
Purpose of Inspe	ection: 1-Routine	2-Follow Up	3-Complai		4-Inv	estiga	ation		5-CO/Construction 6-Other TOTAL/SCO	RE
Establishment Na	me:	C	Contact/Owner N	lame:					* Number of Repeat Violations:	
Little Caesars			&b team piza						Number of Violations COS: 7/93//	Δ
Physical Address Ridge road	:		ontrol : x 06/29/2020		Iood odz p1	/30/20			e trap : Follow-up: Yes 7 / 193//	$\overline{}$
Compliance	Status: Out = not in c	ompliance IN = in com		not obs	•				plicable COS = corrected on site R = repeat violation W-Water	ch
Mark the appropria	te points in the OUT box for	or each numbered item	Mark X	in approp	priate b	ox fo	r IN, I	VO,	NA, COS Mark an in appropriate box for R	
G P St.		ority Items (3 Poi	ints) violations	Require				_	ive Action not to exceed 3 days	_
O I N N C	Time and Te	mperature for Food	Safety	R	Comp O I	N	N	C		R
U N O A C T S	(F = 0	degrees Fahrenheit)	v		U N T	O		o S	Employee Health	
	1. Proper cooling time and temperature 12. Management, food employees and conditional employee						12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting			
	2. Proper Cold Holdin See	g temperature(41°F/ 4	15°F)			,			13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
		(1250)		_					Poster	
	3. Proper Hot Holding Ambient temp	temperature(133 F)							Preventing Contamination by Hands	
	4. Proper cooking time	e and temperature			/				14. Hands cleaned and properly washed/ Gloves used properly	
	5. Proper reheating pro	ocedure for hot holdin	ng (165°F in 2	-					15. No bare hand contact with ready to eat foods or approved	
	Hours)				~				alternate method properly followed (APPROVED Y N) Gloves or utensils	
•	6. Time as a Public He	ealth Control; procedu	ires & records		ı				Highly Susceptible Populations	
									16. Pasteurized foods used; prohibited food not offered	
	A	pproved Source			~				Pasteurized eggs used when required	
	7. Food and ice obtain	ed from approved sou	ırce; Food in							
3 •	good condition, safe, a	and unadulterated; par	rasite						Chemicals	
	destruction Dentec									
	8. Food Received at pr	roper temperature				,			17. Food additives; approved and properly stored; Washing Fruits & Vegetables	
	Blue line								Received washed	
	Protectio	n from Contaminati	on		/				18. Toxic substances properly identified, stored and used Stored below other items	
	9. Food Separated & p		uring food							
	preparation, storage, d	ispiay, and tasting							Water/ Plumbing	
	10. Food contact surfa Sanitized at 200		Cleaned and		/			ı	19. Water from approved source; Plumbing installed; proper backflow device	
	11. Proper disposition			\dashv		,		Ī	20. Approved Sewage/Wastewater Disposal System, proper	
	reconditioned Disc	carded							disposal	
	Pr	riority Foundation	n Items (2 Poi	ints) viol	ations	Req	uire (Cor	rective Action within 10 days	
O I N N O U N O A		on of Knowledge/ Per	rsonnel	R	O I U N	N O		C O	Food Temperature Control/ Identification	R
T					T			S	•	
T		resent demonstration	of knowledge						27. Proper cooling method used; Equipment Adequate to	
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	21. Person in charge p and perform duties/ Co 3 22. Food Handler/ no	ertified Food Manager	r (CFM)		•	,			Maintain Product Temperature 28. Proper Date Marking and disposition	
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Retail Food Establishment Inspection Report

City of Rockwall

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

Form EH-06 (Revised 09-2015)

	shment Name: Physical Address: e Caesars Ridge road			City/State: Rockwal	I	License/Permit # FS 9301	Page <u>2</u> of <u>2</u>			
		- nage	TEMPERATURE OBSERVAT		•					
Item/Loc	cation	Temp F	Item/Location	Temp F	Item/Loc	ation_	Temp			
Bottle	cooler	30	Pizza table							
Piz	zza warmers		Meat	39						
1	42/157/172		Sausage	37						
	Wic		Ham	40						
	Sauce	40	Below	40 am						
	Wing	39	Upright freezer	10						
	<u> </u>		1 0							
		OF	 	VE ACTION	NS					
Item Number	AN INSPECTION OF YOUR ES	TABLISHME	ENT HAS BEEN MADE. YOUR ATTENT	ION IS DIRE	CTED TO T	THE CONDITIONS OBS	ERVED AND			
	NOTED BELOW: Hot water in restroom - 100									
	Sanitizer in bucket -200 ppm									
	Sani wipes 200 ppm									
	Hot water at three compartment sink 110									
07		-		on bottor	n seem					
34/	Discussed discarding dented cans / found one can dented on bottom seem Back door to be self closing									
	Watch dumpster area									
W	Repair door to pizza cooler - materials on site									
	Watch grout throughout									
42	Minor cleaning of lids	and shelv	ving and outsides of food co	ntainers	etc					
	All items are precooke									
	Avoid reuse of card bo	ard for s	torage of non original produ	cts ex : n	nops in	cheese box				
					·					
Covid	SocialDistancing signa	age / mas	sked work by employees / V	Vill begin	thermo	checks of emplo	oyees and			
	Screening questions/ social distancing in kitchen where possible / cleaning and sanitizing surfaces									
	Every 20 mins and ha									
Da' '	lhri		Du:4-			Title: Decree Y Co	ago/ O			
Received (signature)	See abov	e/e	Print:			Title: Person In Char	ge/ Owner			
Inspected (signature)		, , 4	Print:							
(orginature)	Kelly Kirkpa	itríck	/RS			Samples: Y N	# collected			