Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

Date: 12/4/2023			202	23	Time in: 11.02	Time out: 11:48		se/Permit # Est. Type Risk Category -0002238						Est. Type Risk Category Page 1 of	2	
Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain								4-Investigation					5-CO/Construction 6-Other TOTAL/SCO	RE		
Establishment Name: Contact/Owner N Lone Star Donuts Yuneun Kim													* Number of Repeat Violations: ✓ Number of Violations COS:			
Physical Address: Pest control:								Hood Grease Vent US/8-31-22/yearly FS/9-			Gı	reas	e trap : Follow-up: Yes 6/94/	A		
3045 Goliad St Rockwall, TX Wise Choice/1-3-22/monthly Vent US Compliance Status: Out = not in compliance IN = in compliance NO = not observed.										-		9-13-22/100gal/6mo No V pplicable COS = corrected on site R = repeat violation W- Wat	a.L.			
М					points in the OUT box for	each numbered item	Mark '	'√' a cl	heckm	ark in	appr	opria	te bo	ox for IN , NO , NA , COS Mark an X in appropriate box for R	cn	
C	mpli	iance	e Sta	tus	Prio	rity Items (3 Point	ts) violations	Requ		nmea Compl				ive Action not to exceed 3 days		
O U	O I N N C U N O A O Time and Temperature for Food Safety						R	U N O A O				О	Employee Health			
Т	_			S	(F = degrees Fahrenheit) 1. Proper cooling time and temperature					T S 12. Management, food employees and condition						
	~									~				knowledge, responsibilities, and reporting		
	~		2. Proper Cold Holding temperature(41°F/ 45°F)							1				 Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth 		
		3. Proper Hot Holding temperature(135°F)					+	Preventing Contamination by Ha					Preventing Contamination by Hands			
		4. Proper cooking time and temperature				\vdash		1./				14. Hands cleaned and properly washed/ Gloves used properly				
		5. Proper reheating procedure for hot holding (165°F in 2						-				IS. No bare hand contact with ready to eat foods or approved	-			
	Hours)						~				alternate method properly followed (APPROVED Y N)					
	6. Time as a Public Health Control; procedures & records time stickers to discard @ 4 hours										Highly Susceptible Populations					
		<u> </u>				Approved Source								16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required		
		1 1					or Food in			Ľ				eggs cooked		
	7. Food and ice obtained from approved source good condition, safe, and unadulterated; parasit			ite							Chemicals					
						TX Bakery										
-					8. Food Received at pro				1				17. Food additives; approved and properly stored; Washing Fruits & Vegetables			
					check at rece	ipt from Contamination				~				water only 18. Toxic substances properly identified, stored and used	+	
					9. Food Separated & pro									spray bottles labeled		
	~											Water/ Plumbing				
	~				10. Food contact surface Sanitized at 100		leaned and			~			î	19. Water from approved source; Plumbing installed; proper backflow device		
	~				11. Proper disposition or reconditioned		served or			~				20. Approved Sewage/Wastewater Disposal System, proper disposal	1	
					disc	arded	Itama (2 Da	inta			D		C	rective Action within 10 days		
					1110	ority Foundation	1101115 (2 1 0	_	O		N	N	COI	recuve Acuon wanta 10 days	_	
O U T	I N	N O	N A	C O S		of Knowledge/ Perso		R	U	N	Ö	A	o s	Food Temperature Control/ Identification	R	
		N O	N A		21. Person in charge pro and perform duties/ Cer 1	esent, demonstration o rtified Food Manager/	f knowledge, Posted	R	U	N	O		О	Food Temperature Control/ Identification 27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	R	
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Retail Food Establishment Inspection Report

Received by: (signature) Yuneun Kim	Yuneun Kim	Title: Person In Charge/ Owner Owner
Inspected by: Christy Cortez, RS (signature)	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

Establish	ment Name:	Physical A	.ddress:	City/State:		License/Permit #	Page <u>2</u> of <u>2</u>					
	Star Donuts		Goliad St	Rockwa	all, TX	FS-0002238						
Item/Loc	ation	Tomp E	TEMPERATURE OB Item/Location	SERVATIONS Temp F	Item/Loca	tion	Temp F					
	reach in	Temp F	TICHI/ LOCATION	1emp F	itein/Loca	uvii	1emp F					
cooler/sausage		41										
sausage		41										
residential cooler/ham		41										
	in freezer ambient	7										
	in freezer ambient	3										
2 doo	r glass front ambient	37										
glass	front cooler ambient	38										
Item	AN INSPECTION OF VOLUE ES		SERVATIONS AND COR			HE CONDITIONS OPER	VED AND					
Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:											
	Front hand sink 100	O+F with	soap and paper t	owels. Emplo	oyee he	alth poster post	ted.					
	Time stickers for TF											
	Back hand sink 109	F with	soap and paper to	wels								
	3 comp sink 119 F	· · ·										
	Sani bucket setup t	ini bucket setup to 100 ppm chlorine sanitizer										
32	Avoid reuse of plastic to				Start to re	eplace with cleanal	ble lids					
35	Store personal item					<u> </u>						
	Eggs cooked on sit											
39	Clean knife magnet			g cloth								
RR sink 100+F with soap and paper towels												
45 Some minor cleaning of walls/behind prep areas, floors and under equipment												
42 Some minor cleaning of carts and speed racks												
32	Watch condition of	_	•		sed woo	d to be cleanab	ole					
				•								
Received	by:		Print:			Title: Person In Charge/	Owner (
(signature)	· ·		Yune	eun Kin	า	Owner						
Inspected (signature)	Yanean Kim 1 by: Chvisty Cov	tez 1	Print: Christ	y Cortez,	RS							
	2. 1. 202y 231	8, 1		, Joine,	. 、	Samples: Y N #	# collected					