

\$50.00 reinspection fee  
required after 1st Followup

## Retail Food Establishment Inspection Report

City of Rockwall

- First aid kit
- Allergy policy/training
- Vomit clean up
- Employee health

Date: <b>03/08/2022</b>	Time in: <b>10:17</b>	Time out: <b>11:30</b>	License/Permit # FS need to post 2022 for public to read	Food handlers <b>18</b>	Food Managers <b>6</b>	Page <u>1</u> of <u>2</u>
----------------------------	--------------------------	---------------------------	---	----------------------------	---------------------------	---------------------------

Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine	<input type="checkbox"/> 2-Follow Up	<input type="checkbox"/> 3-Complaint	<input type="checkbox"/> 4-Investigation	<input type="checkbox"/> 5-CO/Construction	<input type="checkbox"/> 6-Other	<b>TOTAL/SCORE</b>
--	--------------------------------------	--------------------------------------	--	--	----------------------------------	--------------------

Establishment Name: <b>Mod Pizza</b>	Contact/Owner Name: <b>Bryan Mcclain</b>	* Number of Repeat Violations: _____	<b>7/93/A</b>
		✓ Number of Violations COS: _____	

Physical Address: 2901 Ridge Road and	Pest control : 03/02/22	Hood Heat hood over oven	Grease trap : To be checked	Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
--	----------------------------	-----------------------------	--------------------------------	---

**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						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Time and Temperature for Food Safety</b> (F = degrees Fahrenheit)						<b>Employee Health</b>					
	✓						✓				
1. Proper cooling time and temperature <b>Great</b>						12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
	✓						✓				
2. Proper Cold Holding temperature(41°F/ 45°F) <b>See</b>						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth <b>Emailed poster</b>					
			✓			<b>Preventing Contamination by Hands</b>					
3. Proper Hot Holding temperature(135°F) No hot holding							✓				
		✓				14. Hands cleaned and properly washed/ Gloves used properly					
4. Proper cooking time and temperature							✓				
		✓				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y. N. ) <b>Gloves used / no contact after cooking</b>					
5. Proper reheating procedure for hot holding (165°F in 2 Hours)							✓				
		✓				<b>Highly Susceptible Populations</b>					
6. Time as a Public Health Control; procedures & records Not using									✓		
<b>Approved Source</b>						16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required					
	✓					<b>Chemicals</b>					
7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction <b>Commercial</b>							✓				
	✓					17. Food additives; approved and properly stored; Washing Fruits & Vegetables <b>Water if used</b>					
8. Food Received at proper temperature <b>To always check</b>						W				✓	
<b>Protection from Contamination</b>						18. Toxic substances properly identified, stored and used <b>Hand soap</b>					
	✓					<b>Water/ Plumbing</b>					
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting							W				
	✓					19. Water from approved source; Plumbing installed; proper backflow device <b>Will address under soda station / passed per plumbing</b>					
10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature <b>160 SR</b>							✓				
			✓			20. Approved Sewage/Wastewater Disposal System, proper disposal					
11. Proper disposition of returned, previously served or reconditioned							✓				

**Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Demonstration of Knowledge/ Personnel</b>						<b>Food Temperature Control/ Identification</b>					
	✓						✓				
21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) <b>See</b>						27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature					
	✓						✓				
22. Food Handler/ no unauthorized persons/ personnel <b>See</b>						28. Proper Date Marking and disposition <b>Good</b>					
<b>Safe Water, Recordkeeping and Food Package Labeling</b>						2					
	✓					29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Dishmachine at 160 SR / thermos placed into coolers at insp					
23. Hot and Cold Water available; adequate pressure, safe						<b>Permit Requirement, Prerequisite for Operation</b>					
			✓			W					
24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled						30. <b>Food Establishment Permit</b> (Current/ insp sign posted ) <b>To post for public to read</b>					
<b>Conformance with Approved Procedures</b>						<b>Utensils, Equipment, and Vending</b>					
	✓						✓				
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions <b>Logs kept</b>						31. Adequate handwashing facilities: Accessible and properly supplied, used <b>Equipped</b>					
<b>Consumer Advisory</b>						2					
	✓					32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used <b>See attached</b>					
26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label Ingredients by request							✓				
						33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided <b>Confirmed</b>					

**Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Prevention of Food Contamination</b>						<b>Food Identification</b>					
W	✓						✓				
34. No Evidence of Insect contamination, rodent/other animals <b>No flies today</b>						41. Original container labeling (Bulk Food)					
1						<b>Physical Facilities</b>					
35. Personal Cleanliness/eating, drinking or tobacco use <b>See</b>							1				
	✓					42. Non-Food Contact surfaces clean <b>See</b>					
36. Wiping Cloths; properly used and stored <b>Returned to Sani bucket</b>							✓				
		✓				43. Adequate ventilation and lighting; designated areas used <b>Watch inside</b>					
37. Environmental contamination <b>Watch</b>							✓				
		✓				44. Garbage and Refuse properly disposed; facilities maintained					
38. Approved thawing method						1					
<b>Proper Use of Utensils</b>						45. Physical facilities installed, maintained, and clean <b>Equipped</b>					
W	✓						✓				
39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used <b>Inverted plates for customers</b>						46. Toilet Facilities; properly constructed, supplied, and clean <b>See</b>					
	✓						✓				
40. Single-service & single-use articles; properly stored and used <b>Watch</b>						47. Other Violations					

# Retail Food Establishment Inspection Report

## City of Rockwall

Received by: (signature) <b>Bryan McClain</b>	Print:	Title: Person In Charge/ Owner <b>GM</b>
Inspected by: (signature) <i>Kelly kirkpatrick RS I</i>	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: <b>MOD pizza</b>	Physical Address: 2901 ridge road	City/State: Rockwall	License/Permit # FS to post	Page 2 of 2
---	--------------------------------------	-------------------------	--------------------------------	-------------

### TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
Online digital make line		Regular salad unit		Below make table chicken	36
Tomato/ spicy chicken sausage	36/38	Cut greens / ricotta	38/39	Pesto under expo	40
Chicken / ricotta	37/36	Cheese	38	Wic	35
Below temps		Below	38/39	Tomatoes	36
Cheese	37	Pizza make regular		Chicken/	35
Salad digital		Chicken/ vegan sausage	39/40	Just cooked corn 10:15	47
Cut lettuce / cut tomatoes	39/38	Sausage / cheese	40/39	Wif	-11
Below greens	39	Tomatoes / garlic	39/ 39		

### OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: all temps F
w	Working on drain from ice machine
	Hot water 120 plus
	Emailed employee health poster for hand sinks
35	Watch placement of personal keys on cutting board at digital make line
W / cos	Add thermo in coolers near doors for warmest temp / one placed in rear per manuf
45	Shelving to be 6 inches above floors to allow to clean under - one solid shelf near digital make line
	Sanitizer 200 ppm in bucket
	Pizza cutters are w r s every 4 hrs or less
	Cutters are changed for any allergy notification.
W	Discussed watching finishing sauces and avoid dripping water from bottom onto pizza places in front
	Pesto is required to be refrigerated per labels - must used with 4 hrs or keep cold ... if using tphc must have Sops
	Placed pesto back into cooler to store ...not using TPHC for pesto
	Cooling down log on outside of wic today for corn
32	Flooring in wic is peeling to address
45	Minimal cleaning under shelving in wic of flooring
	Flow of sinks is toward machine - everything goes into sinks then also into machine
	Sanitizer in three comp 200 ppm
29	Need test strips for machine - high temp
w/ COS	Store soap under wiping cloths and soda boxes in back room
42	To clean top of Dishmachine
32	Replace cutting boards where needed
	Restrooms equipped hot water 107
Note	Watch placing anything in from of hand sinks
	Thermo digital - iPad recording once per shift
	Soda area cleaned daily

Received by: (signature) <b>See above</b>	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) <i>Kelly kirkpatrick RS</i>	Print:	Samples: Y N # collected

Form EH-06 (Revised 09-2015)