Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

6/						me out: :40	FOO	D5	01						Risk Category	Page 1 o	
		se of				2-Follow Up Co	3-Compla ntact/Owner N		4-	Inve	stiga	ation	1	5-CO/Construction * Number of Repeat Violation	6-Other ss:	TOTAL/SC	CORE
Na	ıрс	oli I	Ital	iar	Restaurant	Zik	kri Nasufi		**			La		✓ Number of Violations COS:	:	16/84	1/B
40	7 S	al A Gc	olia	d R	ockwall, TX		rike/6-1-20)23	Ho Mille		2020	IMC	7/5-2	e trap : Foll 27-2023/80gal/monthly No	llow-up: Yes		
Ma					Status: Out = not in complia points in the OUT box for each	ance IN = in compl i numbered item	liance No Mark	$\mathbf{O} = \text{not}$						plicable COS = corrected on site ox for IN , NO , NA , COS Mark an	\mathbf{R} = repeat viole in appropriate	lation W-W e box for R	⁷ atch
Co	mnli	iance	Sto	tue	Priority	Items (3 Poin	ts) violations	Requi	_	nmea ompl				ive Action not to exceed 3 days			
O U	I N	N O	N A	C	Time and Tempera		afety	R	O U	I N	N O	N A	C	Employe	ee Health		R
Т				S	1. Proper cooling time and to	es Fahrenheit) emperature			Т				S	12. Management, food employees		employees;	
W					2 D 2 D 2 D 2 D 2 D 2 D 2 D 2 D 2 D 2 D	(1107) 15	077			~				knowledge, responsibilities, and re			
	~				2. Proper Cold Holding temp	perature(41°F/ 45	°F)			~				13. Proper use of restriction and e eyes, nose, and mouth	exclusion; No disc	charge from	
	~				3. Proper Hot Holding tempe	erature(135°F)		\Box						Preventing Contan	mination by Han	ds	
	~				4. Proper cooking time and t	temperature				~				14. Hands cleaned and properly v	washed/ Gloves u	sed properly	
	~				5. Proper reheating procedur Hours)	re for hot holding	(165°F in 2			7			-	15. No bare hand contact with real alternate method properly followe			
	_				6. Time as a Public Health C	Control: procedure	es & records										
	/					, r								Highly Susceptil		ered	
					Approv	ved Source				~				Pasteurized eggs used when requi			
	_				7. Food and ice obtained from good condition, safe, and un									Chem	ui.aala		
					destruction Lisanti												
	/				8. Food Received at proper t	•				~				17. Food additives; approved and & Vegetables	l properly stored;	Washing Fruit	S
					check at receipt	m Contamination	1		3					Water only 18. Toxic substances properly idea	entified, stored and	d used	
					9. Food Separated & protects		ring food							W-4I D	N b. !		
	_				preparation, storage, display 10. Food contact surfaces an		Tooped and			1				Water/P. 19. Water from approved source;		d: proper	
W					Sanitized at 100 ppm/		realied allu			~				backflow device	r fullioning instance	a, proper	
	,				11. Proper disposition of return reconditioned	urned, previously	served or			/				20. Approved Sewage/Wastewate disposal	er Disposal System	n, proper	
	_									Ľ							
					Priority	v Foundation	Itams (2 Po	inte) "	iolat	tions	Dog	uiro	Cor	ractive Action within 10 days			
O U	I N	N O	N A	C				ints) v	o U	I	Req N O	N A	Cor C O	rective Action within 10 days Food Temperature Co	Control/ Identific	ation	R
Т	I N				Demonstration of E	Knowledge/ Persot, demonstration of	onnel of knowledge,		O U T	I N	N	N	С	Food Temperature Co			R
	I N			О	Demonstration of E 21. Person in charge present and perform duties/ Certified	Knowledge/ Person t, demonstration of d Food Manager/	onnel of knowledge, Posted		O U	I N	N	N	C O	Food Temperature Co 27. Proper cooling method used; Maintain Product Temperature	Equipment Adec		R
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Received by: (signature) Zikni Nasufi	Print: Zikri Nasufi	Title: Person In Charge/ Owner OWNEr
Inspected by: Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	_{nment Name:} Ili Italian Restaurant	Physical A	ddress: 6 Goliad	City/State:	JI TY	License/Permit # Page FOOD5013	2 of 2				
ιναρυ	ii italian Nestaurant	407 3	TEMPERATURE OBSERVA		all, I 🔨	1 0000010					
Item/Loc	cation	Temp F	Item/Location	Temp F	Item/Loca	tion	Temp F				
cold wells/cut tomatoes		41	dessert cooler/cheesecak	41	back w	hite freezer ambient	13				
	shrimp	41	reach in freezer ambien	t 5	back	14					
stea	m wells/meatballs	167	reach in cooler/pasta	41							
Pizza	a cold top/sausage	41	pizza	41							
	cheese	41	WIC/chicken	112							
be	eef crumbles	41	pasta	41							
salad	cold top/cut tomatoes	41	lasagna	41							
unc	der/tomatoes	41	sausage	41							
T ₄ .			SERVATIONS AND CORRECT								
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:										
	Back hand sink 100	+F with	soap and paper towels	<u> </u>							
	To post health emp	loyee po	oster								
	Dishwasher sanitizi	ng at 10	00 ppm chlorine sanitize	er							
	3 comp sink 125 F										
42/45	Need to clean hand	sink/wa	alls, under equipment								
36	Store wiping cloths										
45	· · · ·		loors, ceilings/to be cle	anable							
			, replace with cleanabl								
45	Need to clean walls		•								
42	To clean in/around/										
18			ng. COS to 100 ppm ch	lorine sa	nitizer						
29	 		e. Need quats test strips for sp			nt and dining room only					
W	 '	•	rent sanitizers on same								
18	1		separate/not on prep								
36	· · ·		•	41040							
39											
36			o line shelves/and insid	e cooler	s to ahs	sorh condensation					
42					- 10 000	, c. b condendation					
27											
<u> </u>	to the first term of the first										
Cooling down temps are 2 hours to 70 then 4 hours to 41F or below 35 Store personal items, cups, drinks low and separate											
45	Store personal items, cups, drinks low and separate Maintenance to walls, floors in back storage/large holes in walls to be repaired.										
45	, 5 5										
32	0										
21	<u> </u>	-	er on duty at all time du		p and s	ervice					
			·	<u> </u>	-						
Received (signature)			Print: 7:14 si NLa	r:		Title: Person In Charge/ Owner	•				
	Likri Nasufi		Zikri Na	SUII		Owner					
Inspecte (signature)		tez, 1	RS Christy C	ortez,	RS						
	16 (Revised 09-2015)	<i>U</i> :	-	•		Samples: Y N # collect	eu				