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: Time in: Time out: License/Pi   106/27/2024   12:38   1:14   To po						ermit # Ost 2024					F	ood handle	Food managers None on site	Page 1 of 2	 2_			
	Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain									_		5-CO/Construction 6-Other TOTAL/			RE.			
Establishment Name: Contact/Owner N								IIIVC	<i></i>	44101		* Number of R	Repeat Viol	ations:	TOTAL			
					on		erkins ontrol :		Но	od		G	reasi	✓ Number of V	olations (	Follow-up: Yes	9/91/	4
	3045 North Goliad To provide								Hood Na				prov			No  Pics Pics	1 0/0 1// 1	
Ma					tatus: Out = not in compoints in the OUT box for	mpliance IN = in com	ipliance N Mark	$\mathbf{O} = \mathbf{no}$						oplicable COS = co	orrected on	site $\mathbf{R} = \text{repeat vio}$ ark an $\mathbf{V}$ in appropria	olation W-Watc	h
		<sub>F</sub>	rr						iire In	nmed	liate	Cor	rect	tive Action not to ex		- 11 1		
Co	mpli I	ance N	Stat	C	Time and Tem	perature for Food	Safaty	R	O		N	N	C					R
U T	N	0	A	o s	(F = de	egrees Fahrenheit)	Safety		U T	U N O A O						oloyee Health		
		/			1. Proper cooling time a	and temperature				_				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting				
-					2. Proper Cold Holding	tomporatura(41°E/	15°E)							0 1		and exclusion; No dis	aharga from	
	/				See	temperature(41 F/	+3 Г)			/				eyes, nose, and mo		and exclusion, No dis	charge from	
		. /			3. Proper Hot Holding t Making oatmeal per orde	temperature(135°F)								Duran	ontino Co	ntominotion by Hon	ada	
		•			4. Proper cooking time			*		۰ ا					Ü	erly washed/ Gloves u		
		•				*	(1650E: 0			~								
		•			5. Proper reheating prod Hours)						<b>'</b>				roperly fol	h ready to eat foods o llowed (APPROVED		
		/			6. Time as a Public Hea	alth Control; procedu	ires & records							H	ighly Suso	ceptible Populations		
					Ap	proved Source						~		16. Pasteurized foo Pasteurized eggs us None on site	sed when	prohibited food not of required	fered	
					7. Food and ice obtained	d from approved sou	irce; Food in			<u> </u>				INOTIC UIT SILE				
	′				good condition, safe, and destruction Walmar	id unadulterated; par it frozen	rasite								(	Chemicals		
					8. Food Received at pro	oper temperature						/		17. Food additives: & Vegetables	; approved	and properly stored;	Washing Fruits	
					HTT									Freezer on		.1 .:6. 1 . 1	1 1	
						from Contaminati				~				18. Toxic substance	es properi	y identified, stored an	ia usea	
	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting											Wat	er/ Plumbing					
	10. Food contact surfaces and Returnables; Cleaned and Sanitized at 200 ppm/temperature 400						<b>/</b>				19. Water from approved source; Plumbing installed; proper backflow device To clean			*				
		~			11. Proper disposition of reconditioned Toss	of returned, previous	ly served or			/					age/Waste	water Disposal System	m, proper	
	<u></u>						n Items (2 P	oints)	violat	tions	Req	uire	Cor	l rrective Action with	nin 10 day	?S		
O U	I N	N O	N A	C O	Demonstration	of Knowledge/ Per	rsonnel	R	O U	N	N O	N A	C	Food T	emperatu	re Control/ Identific	cation	R
т 2		21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)				T	/			S	27. Proper cooling Maintain Product T		sed; Equipment Ade	quate to				
					On duty 22. Food Handler/ no us	nauthorized persons	/ personnel		-					28. Proper Date Ma				
	•				3 -						V			To date whipp		am accurate, and calibrat	ed: Chemical/	
						rdkeeping and Foo Labeling			2					Thermal test strips	S	w quats strips		
	~				23. Hot and Cold Water See	r available; adequate	pressure, safe									t, Prerequisite for O	•	
	/				24. Required records av destruction); Packaged	Food labeled	0 1		2					30. Food Establish To post 202		rmit (Current/ insp s	sign posted)	
					Handed to cu	ISTOMET/ OF with Approved Pro-		10						•		ipment, and Vendin	ıσ	
					25. Compliance with V	ariance, Specialized	Process, and							31. Adequate hand		acilities: Accessible a		
			<b>'</b>		HACCP plan; Variance processing methods; ma				2				/			els at three com	•	
					Cons	sumer Advisory			W					32. Food and Non- designed, construct		act surfaces cleanable	e, properly	
			ı		26. Posting of Consume	er Advisories: ****	r under cocked							Watch mate	erials	installed, maintained,	used/	<b> </b>
	/				foods (Disclosure/Remi Discussed low and	inder/Buffet Plate)/	Allergen Label			~				Service sink or cur			useu/	
		_			Core Items (1 Point			e Actio	n Not	t to F	xcee	od 90	) Da	Fauinned	ion Whi	chever Comes First		
O U				С	Core reems (110m	ie) violations req	une correctiv	R	0	-	N	N	C	ys or riext mspeet	011, 11111	merer comes i ust		R
T	I N	N O	N A		Provention	of Food Contamina	tion					Α.	0		Food	Identification		
	I N	N O	N A	o s		of Food Contamina		K	U	N	0	A	o s	41 Original contain		Identification		
				О	34. No Evidence of Inseanimals	ect contamination, re	odent/other	K	$\mathbf{U}$	N		A		41.Original contain				
				О	34. No Evidence of Inseanimals 35. Personal Cleanlines	ect contamination, ros/eating, drinking or	odent/other tobacco use		$\mathbf{U}$	N		A		Ü	ner labelin	g (Bulk Food)		
				О	34. No Evidence of Inseanimals	ect contamination, ros/eating, drinking or	odent/other tobacco use		$\mathbf{U}$	N		A		41.Original contain 42. Non-Food Con Watch	ner labelin	g (Bulk Food)		
				О	34. No Evidence of Instantinals 35. Personal Cleanlines 36. Wiping Cloths; proping Cloths; pro	ect contamination, research street, and stored	odent/other tobacco use		U	N		A		42. Non-Food Con Watch	Phys	g (Bulk Food)	areas used	
				О	34. No Evidence of Inso animals 35. Personal Cleanlines 36. Wiping Cloths; prop Discussed	ect contamination, res/eating, drinking or perly used and stored amination dup	odent/other tobacco use		U	N		A		42. Non-Food Con Watch 43. Adequate venti	Physitact surfactilation and	g (Bulk Food)  ical Facilities  res clean  lighting; designated a		
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## Retail Food Establishment Inspection Report

## City of Rockwall

Received by: (Printed) Kyla Hampton	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: nix nutrition	Physical A	Goliad	-	Sity/State: Rockwall	License/Permit # Need 2024	Page <u>2</u> of <u>2</u>					
			TEMPERATUR	E OBSERVAT	IONS							
Item/Loc	eation	Temp F	Item/Location		Temp F Item/I	Location	Temp I					
Coole	r	38										
		0	DOEDNATIONS AND	CODDECTIV	TE ACTIONS							
Item	AN INSPECTION OF YOUR F		<b>BSERVATIONS AND</b> ENT HAS BEEN MADE.			O THE CONDITIONS OBSER	VED AND					
Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: All temps F											
	Herbal life location - powders are mixed with ice and water											
	Restroom equipped											
	Three comp hot water 116/ hand sink 110											
31/cos	<del>                                     </del>											
45	To clean drains and pipes at three comp											
	Mop is drying over mop bucket											
	Faucet at mop sink is above sink and is secure - cannot be pulled out											
29	Test strips for quats - damaged need new											
	Gloves on site to touch Rte foods											
W	Watch wooden handled spatulas and spoons - must remain washable											
	Confirmed air gap at ice machine											
	When ordered protein balls are handed to customers											
	Tested. Sanitizer in front area spray bottles to be 400 - okay per label											
W	Discussed quats binding with cotton towels - to wet first											
**	Ice is being drained daily as needed											
	loc is being drained e	daily as in	Joaca									
<b>.</b>			I									
Received (signature)	Coo obox	\/C	Print:			Title: Person In Charge/	Owner					
	See and	<u>v                                    </u>										
Inspected (signature)			Print:									
	Keuy Kurp	airick	VKS			Samples: Y N #	collected					