

Retail Food Establishment Inspection Report

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

Date: 6/14/2024	Time in: 12:10	Time out: 3:00	License/Permit # need current/to post	Est. Type	Risk Category	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	TOTAL/SCORE
--	--------------------------------------	--------------------------------------	--	--	----------------------------------	-------------

Establishment Name: Rockwall Golf and Athletic Club Nineteen	Contact/Owner Name:	* Number of Repeat Violations: _____	14/86/B
		✓ Number of Violations COS: _____	

Physical Address: 2600 Champions Dr Rockwall, TX	Pest control : Versacor/5-30-2024	Hood Metro Fire/3-18-24	Grease trap : Wyble's/750gal/	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 '✓' a checkmark in appropriate box for IN, NO, NA, COS Mark an X 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
Time and Temperature for Food Safety (F = degrees Fahrenheit)						Employee Health					
	✓						✓				
	✓						✓				
	✓					Preventing Contamination by Hands					
	✓					3					
	✓						✓				
	✓					Highly Susceptible Populations					
	✓						✓				
	✓					Chemicals					
	✓						✓				
	✓						✓				
	✓					Water/ Plumbing					
3					✓		✓				
	✓						✓				

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
Demonstration of Knowledge/ Personnel						Food Temperature Control/ Identification					
	✓						✓				
	✓						✓				
Safe Water, Recordkeeping and Food Package Labeling						Permit Requirement, Prerequisite for Operation					
	✓					2					
	✓					Utensils, Equipment, and Vending					
	✓						✓				
Consumer Advisory						2					
	✓						✓				

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
Prevention of Food Contamination						Food Identification					
1							✓				
1						Physical Facilities					
	✓						✓				
1							✓				
	✓						✓				
Proper Use of Utensils						1					
	✓						✓				
	✓						✓				

Retail Food Establishment Inspection Report

Received by: <small>(signature)</small> <i>Ignacio Vela</i>	Print: Ignacio Vela	Title: Person In Charge/ Owner Manager
Inspected by: <small>(signature)</small> <i>Christy Cortez, RS</i>	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: Rockwall Golf and Athletic Club Nineteen	Physical Address: 2600 Champions Dr	City/State: Rockwall, TX	License/Permit # need current/to post	Page <u>2</u> of <u>2</u>
---	--	-----------------------------	--	---------------------------

TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
steam table/gravy	161	shrimp	41	reach in cooler/ranch	41
beans/rice	159/154	flautas	41	fry cold top/raw chicken	41
soup	167	on stove/beans	169	raw chicken	41
grill drawers/cooked beef	39	cold top/pico	41	WIC/diced chicked	40
cooked chicken	40	cut tomatoes	41	rice/beans	39/38
raw chicken	39	boiled egg	41	raw chicken	41/41
raw hamburger	38	ham	41	wings cooked	203
Pizza cold top/cheese	41	under/cut melon	41		

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:
	Hand sink 120F equipped
37	Condensation on air return vent over steam table/to protect foods underneath
45	to clean air return vents/some black slime forming where there is condensation
34	Some flies
	3 comp sink 130F
	Dishwasher sanitizing at 100ppm chlorine
	Warewash hand sink 110+F equipped
34	Gap at back door needs to be sealed/large gap at top
45	Some food debris on floor/to clean
45	To fill holes in walls behind dish pit
32	Condition of cabinets in drink counter/to be sealed and cleanable
32	Some rusty shelves under prep tables
	Soda and tea nozzles cleaned daily
10	One sani bucket setup to 200ppm/other at 0ppm/COS to 200ppm/to change every 2 hours
35/14	No eating on cookline/must eat separately then wash hands before returning to kitchen

Received by: <small>(signature)</small> <i>Ignacio Vela</i>	Print: Ignacio Vela	Title: Person In Charge/ Owner Manager
Inspected by: <small>(signature)</small> <i>Christy Cortez, RS</i>	Print: Christy Cortez, RS	Samples: Y N # collected

Form EH-06 (Revised 09-2015)