	Retail Food Establishment Inspection Report																	
Date: Time in: Time out: License/Per 12/13/2023 11:30 2:30 FS-93								5					Est. Type Risk Category Page <u>1</u> of	2				
Purpose of Inspection: 1 - Routine 2 - Follow Up 3-Complai								_	Inve	stig	atio	n	5-CO/Construction 6-Other TOTAL/SC	ORE				
Establishment Name: Contact/Owner N RGAC Warming Kitchen							e:						* Number of Repeat Violations: ✓ Number of Violations COS:					
Physical Address: Pest control :						2000	Hood				Grease		se trap: 16/270 cp/40.5.2022 Follow-up: Yes	Ά				
26	2600 Champions Dr Rockwall, TX Versacor/11-15-20 Compliance Status: Out = not in compliance IN = in compliance							<u> </u>					I I	tch				
Mark the appropriate points in the OUT box for each numbered item Mark '\si a checkmark 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			e Sta	tus						
U T	N	0	A	o s	Time and Temperature for Food Safety (F = degrees Fahrenheit)	R		U T		0	N A	o s	Employee Health					
	~	1. Proper cooling time and temperature							~				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
					2. Proper Cold Holding temperature(41°F/45°F)								13. Proper use of restriction and exclusion; No discharge from					
	~								~				eyes, nose, and mouth					
		~			3. Proper Hot Holding temperature(135°F)				1				Preventing Contamination by Hands					
		~			4. Proper cooking time and temperature		-		~				14. Hands cleaned and properly washed/ Gloves used properly					
		~			5. Proper reheating procedure for hot holding (165°F in 2 Hours)				~				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED $Y_{}N_{}$)					
		~			6. Time as a Public Health Control; procedures & records						Highly Susceptible Populations							
	11	L			Approved Source				~		16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required							
_					7. Food and ice obtained from approved source; Food in				Ľ				- accounce eggs asso when required					
	~		good condition, safe, and unadulterated; parasite destruction							Chemicals								
	8. Food Received at proper temperature								~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables					
	Protection from Contamination							3 18. Toxic substances pro					18. Toxic substances properly identified, stored and used					
	9. Food Separated & protected, prevented during food																	
	~				preparation, storage, display, and tasting							Water/ Plumbing						
3									19. Water from approved source; Plumbing installed; proper backflow device									
	~	11. Proper disposition of returned, previously served or reconditioned							~				20. Approved Sewage/Wastewater Disposal System, proper disposal					
0	I	N	N	С	Priority Foundation Items (2 P	oints R		olat 0		Req N	uire N	Cor	rrective Action within 10 days	R				
U T	N	0	A	o s	0 Demonstration of Knowledge/Personnel U N O A O Food Temperature Control/ Identification					Food Temperature Control/ Identification	Ň							
	~				21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager/ Posted				~				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature					
	~	22. Food Handler/ no unauthorized persons/ personnel							~				28. Proper Date Marking and disposition					
Safe Water, Recordkee					Safe Water, Recordkeeping and Food Package Labeling				29. Thermometers provided, accurate, an Thermal test strips				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips					
	~	23. Hot and Cold Water available; adequate pressure, safe					Permit Requirement, Prerequisite for Ope											
	~				24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled				~		30. Food Establishment Permit (Current/insp report sign posted	1)						
					Conformance with Approved Procedures								12/31/2023 Utensils, Equipment, and Vending					
	~				25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions				~				31. Adequate handwashing facilities: Accessible and properly supplied, used					
					Consumer Advisory			W					32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used					
	~				26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffet Plate)/ Allergen Label 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided													
0	Core Items (1 Point) Violations Require Corrective							Not 0	Ι	Ν		Day	tys or Next Inspection, Whichever Comes First	R				
U T	Ι	N	N			R	1	U	Ν	0	Α	0	Food Identification					
Í	I N	N O	N A	C O S	Prevention of Food Contamination		-	Т				S	41 Original container labeling (Duth Eagl)					
┣—	I N	N O		0	34. No Evidence of Insect contamination, rodent/other animals			Т	~			5	41.Original container labeling (Bulk Food)					
		N O		0	34. No Evidence of Insect contamination, rodent/other animals35. Personal Cleanliness/eating, drinking or tobacco use				~			8	Physical Facilities					
	ン ン ン	N O		0	 34. No Evidence of Insect contamination, rodent/other animals 35. Personal Cleanliness/eating, drinking or tobacco use 36. Wiping Cloths; properly used and stored 		-	т 1				8	Physical Facilities 42. Non-Food Contact surfaces clean					
	ン ン ン ン	N O		0	 34. No Evidence of Insect contamination, rodent/other animals 35. Personal Cleanliness/eating, drinking or tobacco use 36. Wiping Cloths; properly used and stored 37. Environmental contamination 		-		·			8	Physical Facilities 42. Non-Food Contact surfaces clean 43. Adequate ventilation and lighting; designated areas used					
	ン ン ン			0	 34. No Evidence of Insect contamination, rodent/other animals 35. Personal Cleanliness/eating, drinking or tobacco use 36. Wiping Cloths; properly used and stored 37. Environmental contamination 38. Approved thawing method 		-		~ ~ ~				Physical Facilities 42. Non-Food Contact surfaces clean 43. Adequate ventilation and lighting; designated areas used 44. Garbage and Refuse properly disposed; facilities maintained					
	ン ン ン ン			0	34. No Evidence of Insect contamination, rodent/other animals 35. Personal Cleanliness/eating, drinking or tobacco use 36. Wiping Cloths; properly used and stored 37. Environmental contamination 38. Approved thawing method Proper Use of Utensils				·				Physical Facilities 42. Non-Food Contact surfaces clean 43. Adequate ventilation and lighting; designated areas used 44. Garbage and Refuse properly disposed; facilities maintained 45. Physical facilities installed, maintained, and clean					
	ン ン ン ン			0	 34. No Evidence of Insect contamination, rodent/other animals 35. Personal Cleanliness/eating, drinking or tobacco use 36. Wiping Cloths; properly used and stored 37. Environmental contamination 38. Approved thawing method 		-		~ ~ ~				Physical Facilities 42. Non-Food Contact surfaces clean 43. Adequate ventilation and lighting; designated areas used 44. Garbage and Refuse properly disposed; facilities maintained					

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

Form EH-06 (Revised 09-2015)

	nent Name: C Warming Kitchen	Physical A 2600	ddress: Champions Dr	City/State: License/Permit # FS-9366			Page <u>2</u> of <u>2</u>		
			TEMPERATURE OBSERVA						
Item/Loc	ation	Temp F	Item/Location	Temp F	Item/Locat	ion		Temp F	
reach	in cooler ambient	37							
		01							
T			SERVATIONS AND CORRECT						
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW:	TABLISHME	NT HAS BEEN MADE. YOUR ATTE	NTION IS DIRE	CTED TO TH	IE CONDITIONS OBSER	VED AN	ID	
		hanninn	with soap and paper t	owels					
	3 comp sink 110+F	1 uppeu		0000					
10/22		itizina/r	o sanitizer at source.						
10/33		-		oonitiaar					
10			nust not wash without		1				
18	• •		h pure bleach. remove	ea from k	itchen				
	Must be labeled for		•						
			ets where clean dishes						
W			s/ exposed wood/to be						
42	Need to clean strain	ner in di	shwasher/some buildu	p of grea	se				
42	To clean in/around/	on coole	ers and equipment, ins	ide hot ho	olding u	nit			
	All food cooked and	l transp	orted covered from ma	ain kitchei	n/hot he	ld for service			
	Ice machine is clear	n/good							
	Text strips on site								
	•								
Received (signature)	-		Print:			Title: Person In Charge/			
(Ignacio Vela		Ignacio	vela	a l	Manager			
Inspected	Ignacio Vela ^{by:} Chrísty Cov		Print:			~			
(signature)	Chrísty Cor	tez, 1	RS Christy C	cortez,	RS	0 1 1 1	11	1	
	<i>J</i>	0.5				Samples: Y N #	t collecte	d	