Followup Fee of \$50.00 after First Followup

Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

City of Rockwall

Date: 2/9	/2	4		Time in: 1:55	Time out: 2:40		ense/Per S-90							CPFM 1	Food handlers 2	Page 1	of _2_
				tion: 1-Routine	2-Follow Up		omplaiı		4-	Inve	stiga	tion	1	5-CO/Construction		TOTAL/SO	ORE
Estab RISE				ne: Center Concessior	าร	Contact/O RISD	Owner N	ame:						Number of Repeat ✓ Number of Violation		0/4.00	\ / \
Physic 1205 7				Dr Rockwall, Tx	Mon	t control :			Ho N/a				rease	e trap :/ waste oil	Follow-up: Yes No	0/100)/A
Mark				Status: Out = not in co points in the OUT box for	ompliance IN = in correct reach numbered ite	em			obser neckm					plicable COS = correcte ox for IN, NO, NA, COS	ed on site $\mathbf{R} = \text{repeat}$ where $\mathbf{R} = \mathbf{R}$ in appropriate $\mathbf{R} = \mathbf{R}$		⁄atch
Comp	lianc	e Sta	tus	Prio	ority Items (3 I	Points) vio	lations	Requ		n <i>mea</i> lompl				ve Action not to exceed	3 days		
O I U N	N	N	C		nperature for Fo			R	U	I N	N O	N A	C]	Employee Health		R
T			S	1. Proper cooling time No leftovers	•	.,			Т				S	12. Management, food en		al employees;	
		•				E/ 450E)				~				knowledge, responsibilit		Lashanas frans	
~	'			2. Proper Cold Holding See	g temperature(41 1	r/ 43 °F)				/				13. Proper use of restrict eyes, nose, and mouth	ion and exclusion; No C	iischarge from	
~	•			3. Proper Hot Holding See	temperature(135°	F)				<u> </u>	<u> </u>			Preventing	g Contamination by H	ands	
~	•			4. Proper cooking time See	and temperature					1				14. Hands cleaned and p	properly washed/ Glove	s used properly	
	/	,		5. Proper reheating pro Hours)	cedure for hot hol	ding (165°F	in 2			~				15. No bare hand contact alternate method properly Gloves in use			
~	1			6. Time as a Public Hea	alth Control; proce	edures & rec	cords				<u> </u>	_			Susceptible Population	ns	
				Ap	proved Source					~				16. Pasteurized foods use Pasteurized eggs used wl N/a		offered	
-	,			7. Food and ice obtained good condition, safe, and destruction Labbat	nd unadulterated;	source; Food parasite	d in							14/4	Chemicals		
~	,			8. Food Received at pro						~				17. Food additives; appro & Vegetables Water	oved and properly store	d; Washing Fruit	S
		<u> </u>	ı	Protection	n from Contamin	ation				1				18. Toxic substances pro Store low	perly identified, stored	and used	
~	,			9. Food Separated & pr preparation, storage, di		_	od								Water/ Plumbing		
~	,			10. Food contact surfact Sanitized at 200			and			~			-	19. Water from approved backflow device City approved	I source; Plumbing insta	alled; proper	
•	,			11. Proper disposition of reconditioned	•	ously served	or			/				20. Approved Sewage/W disposal	astewater Disposal Sys	stem, proper	
				Disc	ard									1			
<u>L</u>		-		Dri	ority Foundat	ion Itoms	(2 Poi	ntc)	wiola	tions	Dog		Cor	rective Action within 10	dans		
O I U N	N O	N A	C O S	Demonstration	n of Knowledge/	Personnel		nts)	violat O U T	I N	Req N O	N A	Cor C O S	rective Action within 10 Food Tempe	days rature Control/ Identi	fication	R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Monica Lopez Monica Lopez	Print: Monica Lopez	Title: Person In Charge/ Owner
Inspected by: Richard Hill (signature) Richard Hill	Print: Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name:	Physical A	ddress: C	ity/State:		License/Permit #	Page 2 of 2					
RISD Aquatic Center		1205 TL Townsend Dr		Pockwal	I, Tx	FS-9020	0					
Item/Loca	-4°	Т	TEMPERATURE OBSERVATI	Temp	Item/Loca	At	Т					
Freeze		Temp 10.1	Prep cooler	Temp	Item/Loca	luon	Temp					
	Freezer 2	7.6	Strawberry for ref	34								
Na	acho cheese	140	Yogurt	32								
Rolle	er grill cooking		Milk	33								
21	0, 212, 212		Refrigerator 1	39								
	Hot hold		Refrigerator 2	40								
	Hot dogs											
15	55, 152, 158	0.7		F A CIPTON	IG							
Item	AN INSPECTION OF YOUR EST		SERVATIONS AND CORRECTIVE OF THE SEEN MADE. YOUR ATTENTI			HE CONDITIONS OBSI	ERVED AND					
Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: all temperatures are taken in F											
	Restrooms equipped h	ot water	greater than 100									
	Hand sinks all equipped temp greater than 101 throughout kitchen											
	3 comp sink not set up 111, using quat sani 200ppm strips current											
	Time to remove shipping liner off freezer 1 in back room											
	Health permit is posted											
	Using stem thermo (2) calibrated daily before use, strips current											
	Gloves used to touch											
	Remember to keep water drained out of drink ice barrels											
W	Stainless steel shows signs of rust, keep eye on it											
	All food food contact surfaces and utensils cleaned every 4 hours or as needed											
	·											
	Roller grill cleaned each daily use Making emosthies and strawberry fruit parfaits											
	Making smoothies and strawberry fruit parfaits Candy stored in bottom of prep cooler, no tos itoms											
	Candy stored in bottom of prep cooler, no tcs items Refrigerators storing candy and individual condiments											
	nemgerators storing c	andy and	u marviadai condiments									
Received (signature)	See abov	e 'e	See abo)Ve		Title: Person In Char	ge/ Owner					
Inspected			Print:									
(signature)	K > W	ST	Richard	Hill		Samples: Y N	# collected					