## Followup Fee of \$50.00 after First Followup

## Retail Food Establishment Inspection Report

	First aid kit	
	Allergy policy	
	Vomit clean up	
ш.	Employee health	

City of Roo	ckwall
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	ite:				Time in:	Time out:		License/P	ermit #	ŧ						CPFM	Food handlers	Page	of
					etion: 1-Routine	2-Follow U	-	3-Compla		4-	Inve	stig	atior	n	5-CO/Cons		6-Other		/SCORE
Es	tabli	ıshn	nent	Nan	ne:			act/Owner	Name:						✓ Number o	of Repeat Vio of Violations	COS:	32/6	58/D
Ph	ysic	al A	Addre	ess:			st contr			Но	od		G	reas	e trap :/ waste oi	1	Follow-up: Yes No (circle one)		
Ma	ark t	Con he a	nplia pprop	nce s	Status: Out = not in contract points in the OUT box for	mpliance IN = in each numbered it	compliar tem	nce N Mark	$\mathbf{O} = \text{not}$ ' $\checkmark$ ' a ch			Na appi	A = n ropria	ot ap	oplicable COS ox for IN, NO, NA	= corrected or , COS M	n site <b>R</b> = repeat lark an in approp	violation W riate box for R	= Watch
Co	mpli	ianc	e Sta	tus	Prio	rity Items (3	Points	) violation:	s Requi		n <i>med</i> ompl				ive Action not to	exceed 3 d	ays		
O U T	I N	N O	N	C O S		perature for Fe		ety	R	O U T	I N	N O	N A	C O S		Em	ployee Health		R
					1. Proper cooling time a		,							.5	12. Managemen		oyees and condition	nal employees	;
					2. Proper Cold Holding	temperature(41°	°F/ 45°F	)								•	and exclusion; No	discharge from	n
															eyes, nose, and	mouth			
	3. Proper Hot Holding temperature(     4. Proper cooking time and tempera											Preventing Contamination by Hands							
						650E in 2							14. Hands cleaned and properly washed/ Gloves used properly				•		
					5. Proper reheating proc Hours)	cedure for not no	olding (1	65°F IN 2							15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_N_)				
					6. Time as a Public Hea	lth Control; prod	procedures & records				<u> </u>					Highly Sus	ceptible Population	ons	
					App	proved Source									16. Pasteurized Pasteurized egg		prohibited food not required	offered	
					7. Food and ice obtained good condition, safe, an	d from approved													
					destruction		, parasic										Chemicals		
					8. Food Received at pro	pper temperature									17. Food additiv & Vegetables	ves; approved	d and properly store	ed; Washing F	ruits
					Protection	from Contami	nation			3	}				18. Toxic substa	ances proper	ly identified, stored	and used	
					9. Food Separated & propreparation, storage, dis			g food	П							Wat	ter/ Plumbing		
					10. Food contact surface Sanitized at			aned and	$\dagger$						19. Water from backflow device		urce; Plumbing ins	talled; proper	
					11. Proper disposition or reconditioned	of returned, previ	iously se	erved or							20. Approved S disposal	ewage/Waste	ewater Disposal Sy	stem, proper	
						ority Founda	tion It	ems (2 Po				_			rrective Action w	vithin 10 da	ys		
O U T	I N	N O	N A	C O S	Demonstration	of Knowledge/	Person	nel	Dints) 1	violat O U T	I N	Req N O	uire N A	C C O S			ys ure Control/ Ident	ification	R
	I N	N O				of Knowledge/	Person	nel		O U	I N	N	N	C	Food	d Temperatu	ure Control/ Ident		R
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## **Retail Food Establishment Inspection Report**

## City of Rockwall

Received	by:			Print:			Title: Person In	Charge/ Owner	
(signature)							Title: Person In Charge/ Owner  Business Email:		
Inspected (signature)				Print:					
Form EH-0	6 (Revised 09-2015)								
Establish	ment Name:	Physical	Address:		City/State:	Li	License/Permit # Page of		
				URE OBSERVA					
Item/Loc	ation	Temp	Item/Location		Temp	Item/Location		Temp	
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Number	NOTED BELOW: all temp	peratures are taken	in F						
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