

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
- Vomit clean up
- Employee health

Date: 10/18/2021	Time in: 9:45	Time out: 10:43	License/Permit # FS 9261	Est. Type FF	Risk Category Med	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 <input type="checkbox"/> TOTAL/SCORE						
Establishment Name: Raising Canes 152			Contact/Owner Name: Jeffrey Grabowski		* Number of Repeat Violations: _____ ✓ Number of Violations COS: _____	
Physical Address: I-30		Pest control : Orkin 9/13/21	Hood 09/27/21	Grease trap : Les 06/15/21	Follow-up: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> COS	

7/93/A

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 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					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Time and Temperature for Food Safety (F = degrees Fahrenheit)						Employee Health					
			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					
1. Proper cooling time and temperature Cook to order						12. Management of food employees and conditional employees; knowledge, responsibilities, and reporting					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
2. Proper Cold Holding temperature(41°F/ 45°F) See						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth Policy in file and posted in back room					
	<input checked="" type="checkbox"/>					Preventing Contamination by Hands					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
3. Proper Hot Holding temperature(135°F) Not officially holding hot buf holding for 6 mins						14. Hands cleaned and properly washed/ Gloves used properly Gloves and utensils					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
4. Proper cooking time and temperature See						15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)					
			<input checked="" type="checkbox"/>			Highly Susceptible Populations					
						<input checked="" type="checkbox"/>					
5. Proper reheating procedure for hot holding (165°F in 2 Hours)						16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required					
	<input checked="" type="checkbox"/>					Chemicals					
6. Time as a Public Health Control; procedures & records Prep only/ dry breading changed every 3 drops						17. Food additives; approved and properly stored; Washing Fruits & Vegetables Lemons - water only					
						<input checked="" type="checkbox"/>					
Approved Source						18. Toxic substances properly identified, stored and used Storage and labeled					
	<input checked="" type="checkbox"/>					Water/ Plumbing					
7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Ben e Keith						<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					19. Water from approved source; Plumbing installed; proper backflow device City approved					
8. Food Received at proper temperature Night drop - to provided temp info						<input checked="" type="checkbox"/>					
Protection from Contamination						20. Approved Sewage/Wastewater Disposal System, proper disposal					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting Chicken low and or separate											
	<input checked="" type="checkbox"/>										
10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature											
	<input checked="" type="checkbox"/>										
11. Proper disposition of returned, previously served or reconditioned No returns											

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					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) 5						27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
22. Food Handler/ no unauthorized persons/ personnel Requirement to begin working						28. Proper Date Marking and disposition Good					
Safe Water, Recordkeeping and Food Package Labeling						29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips					
	<input checked="" type="checkbox"/>					Permit Requirement, Prerequisite for Operation					
23. Hot and Cold Water available; adequate pressure, safe See						<input checked="" type="checkbox"/>					
			<input checked="" type="checkbox"/>			30. Food Establishment Permit (Current/ insp sign posted) Posted					
24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled						Utensils, Equipment, and Vending					
Conformance with Approved Procedures						<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					31. Adequate handwashing facilities: Accessible and properly supplied, used Equipped					
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions						<input checked="" type="checkbox"/>					
Consumer Advisory						32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used Watch condition of shelving / containers etc					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label Ingredients by request						33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided					

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						<input checked="" type="checkbox"/>					
34. No Evidence of Insect contamination, rodent/other animals Flies						41. Original container labeling (Bulk Food)					
	<input checked="" type="checkbox"/>					Physical Facilities					
35. Personal Cleanliness/eating, drinking or tobacco use						<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					42. Non-Food Contact surfaces clean Watch					
36. Wiping Cloths; properly used and stored In buckets						<input checked="" type="checkbox"/>					
1						43. Adequate ventilation and lighting; designated areas used					
37. Environmental contamination Condensation						<input checked="" type="checkbox"/>					
			<input checked="" type="checkbox"/>			44. Garbage and Refuse properly disposed; facilities maintained Looks much better					
38. Approved thawing method Fries and bread only						1					
Proper Use of Utensils						45. Physical facilities installed, maintained, and clean See attached					
1						<input checked="" type="checkbox"/>					
39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used See also watch items over sinks						46. Toilet Facilities; properly constructed, supplied, and clean Equipped					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
40. Single-service & single-use articles; properly stored and used						47. Other Violations					

Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Jeff Grabowski	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) <i>Kelly Kirkpatrick RS</i>	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: Raising canes152	Physical Address: I-30	City/State: Rockwall	License/Permit # FS 9261	Page 2 of 2
--	----------------------------------	--------------------------------	------------------------------------	-------------

TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
Front under counter	33	Freezer upright	16	Wic	
Drive Thur under tea	36	Breading station.		Ambient	37
Drive thru cooler	38	Chicken	38	Cut lettuce	40
Prep cooler	31	Batter	40	Raw chicken	
Cole slaw cooler	31	Below temps	38	37-38	
Slaw	41	Batter	41	Chopped cabbage	38
Canes sauce table	38	Cooked chicken		Wif	-11
Cut lettuce just loaded	43	181/192/189			

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Observation/Action
	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
	Hot water at 104 in restrooms - equipped
	Soda station cleaned daily
	Ice caddy - keeping drained -over floor drain
	Ice machine. Cleaned at all holiday closures - watch line deposited inside
W	Need to address nail brush storage again at hand sink - remove or store in sanitizer
	Hot water at han drains 112
34	Flies observed at drive they
39	Door to cooler under tea and lemonade is not staying closed each time -to address
	Watch storage of Sani buckets under sinks
37	Watch condensation in upright freezer from top down
	Breading station changed out every 3 drops
45	Need to clean inside caster channels on cookline
	Sanitizer in sink 200 ppm
	Sanitizer in buckets 200/200
	To Address tape on pipes in wic - starting to peel
37	To Address condensation behind fan box in WIF
W	Watch for any gaps at back door
	Health poster posted in back area -
	First aid kit near office
18/cos	Watch when using spray bottles with labels of previous or another chemical - store low
	Using quats in sink but bleach product is hanging over it
	Keep spatulas trimmed and watch condition of plastic containers and nailBrushes ans etc
45	Clean under green shelving - against wall on floor
	Discussed the employee health policy poster posting etc
	Dumpster area looks much better - just need lid on one side of small unit / keep and eye on area near back door
	Removed nail brushes!!!

Received by: (signature) See above	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) <i>Kelly Kirkpatrick RS</i>	Print:	Samples: Y N # collected

Form EH-06 (Revised 09-2015)