

Additional followups
\$50.00 fee

Retail Food Establishment Inspection Report
City of Rockwall

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

Date: 05/31/2024	Time in: 11:22	Time out: 12:12	License/Permit # Fs 9343 need 2024	Food handlers 1	Food managers Need	Page <u>1</u> of <u>2</u>
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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: Rockwall drug and general store			Contact/Owner Name: Downing		* Number of Repeat Violations: ____ ✓ Number of Violations COS: ____	
Physical Address: : 106 S Goliad			Pest control :		Hood Na Grease trap/ waste oil Need info / to check	
					Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Pics	

18/82-B

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	OUT	IN	NO	NA	COS		
Time and Temperature for Food Safety (F = degrees Fahrenheit)					Employee Health						
			<input checked="" type="checkbox"/>		1. Proper cooling time and temperature	<input checked="" type="checkbox"/>				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
			<input checked="" type="checkbox"/>		2. Proper Cold Holding temperature(41°F/ 45°F)	<input checked="" type="checkbox"/>				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth Posted	
			<input checked="" type="checkbox"/>		3. Proper Hot Holding temperature(135°F)					Preventing Contamination by Hands	
			<input checked="" type="checkbox"/>		4. Proper cooking time and temperature	<input checked="" type="checkbox"/>				14. Hands cleaned and properly washed/ Gloves used properly Gloves	
			<input checked="" type="checkbox"/>		5. Proper reheating procedure for hot holding (165°F in 2 Hours)	<input checked="" type="checkbox"/>				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)	
			<input checked="" type="checkbox"/>		6. Time as a Public Health Control; procedures & records					Highly Susceptible Populations	
					Approved Source					16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required I'm	
	<input checked="" type="checkbox"/>				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction					Chemicals	
	<input checked="" type="checkbox"/>				8. Food Received at proper temperature					17. Food additives; approved and properly stored; Washing Fruits & Vegetables	
					Protection from Contamination					18. Toxic substances properly identified, stored and used Low	
	<input checked="" type="checkbox"/>				9. Food Separated & protected, prevented during food preparation, storage, display, and tasting					Water/ Plumbing	
3					10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>0</u> ppm/temperature Need today	3				19. Water from approved source; Plumbing installed; proper backflow device	
			<input checked="" type="checkbox"/>		11. Proper disposition of returned, previously served or reconditioned	<input checked="" type="checkbox"/>				20. Approved Sewage/Wastewater Disposal System, proper disposal	

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days													
Compliance Status					Compliance Status								
OUT	IN	NO	NA	COS	OUT	IN	NO	NA	COS				
Demonstration of Knowledge/ Personnel					Food Temperature Control/ Identification								
2					21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) Need one on site	<input checked="" type="checkbox"/>				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature			
	<input checked="" type="checkbox"/>				22. Food Handler/ no unauthorized persons/ personnel 1 on-site		<input checked="" type="checkbox"/>			28. Proper Date Marking and disposition			
					Safe Water, Recordkeeping and Food Package Labeling					29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Provided			
	<input checked="" type="checkbox"/>				23. Hot and Cold Water available; adequate pressure, safe	2				Permit Requirement, Prerequisite for Operation			
			<input checked="" type="checkbox"/>		24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled	<input checked="" type="checkbox"/>				30. Food Establishment Permit (Current/ insp sign posted)			
					Conformance with Approved Procedures					Utensils, Equipment, and Vending			
			<input checked="" type="checkbox"/>		25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions	2				31. Adequate handwashing facilities: Accessible and properly supplied, used To Set up			
					Consumer Advisory					W			32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used Watch
			<input checked="" type="checkbox"/>		26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label	2				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	OUT	IN	NO	NA	COS				
Prevention of Food Contamination					Food Identification								
1					34. No Evidence of Insect contamination, rodent/other animals Gap at back door	<input checked="" type="checkbox"/>				41. Original container labeling (Bulk Food)			
	<input checked="" type="checkbox"/>				35. Personal Cleanliness/eating, drinking or tobacco use					Physical Facilities			
	<input checked="" type="checkbox"/>				36. Wiping Cloths; properly used and stored Set up bucket when in operation	1				42. Non-Food Contact surfaces clean Watch			
		<input checked="" type="checkbox"/>			37. Environmental contamination	<input checked="" type="checkbox"/>				43. Adequate ventilation and lighting; designated areas used			
		<input checked="" type="checkbox"/>			38. Approved thawing method	<input checked="" type="checkbox"/>				44. Garbage and Refuse properly disposed; facilities maintained Watch			
					Proper Use of Utensils					1			45. Physical facilities installed, maintained, and clean See
	<input checked="" type="checkbox"/>				39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used	1				46. Toilet Facilities; properly constructed, supplied, and clean			
	<input checked="" type="checkbox"/>				40. Single-service & single-use articles; properly stored and used		<input checked="" type="checkbox"/>			47. Other Violations			

Retail Food Establishment Inspection Report

City of Rockwall

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

Form EH-06 (Revised 09-2015)

Establishment Name: Rockwall drug and general store	Physical Address: : 106 S Goliad	City/State: Rockwall	License/Permit # Fs9343	Page 2 of 3
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TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F

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: ALL TEMPS TAKEN in F
	Still selling unwrapped candy 12 types
	Therefore scoops to be washed daily
	Not selling any with nuts
	Plans to have an soft serve in future machine
	Discussed dishmachine uses and types of sanitizer
W	Hot water or chemical — new unit appears to be residential
33/10	Will need to use three comp sink for washing scoops and parts to new sift serve parts that cannot be cleaned in place
31	To set up hand sink with soap and towels
	Employee poster is posted at hand sink
10	Need to get sanitizer (bleach) for three comp sink
	may use quats sanitizer - but need to have it today to wash and sanitize scoops
	Hot water 110'at three comp and 106 at hand sink
!!	May not provide scented or splashless bleach
	If decided to use quats the remove all bleach as these chemicals don't react well with each other
W	Make sure table etc is washable and nonabsorbent: ss table would be great
	Clean new unit per manufacturer guideline
19	Make sure that faucet pull down is self retracting above sink - at all levels - sticking at longest
	Or make sure you can't pull it at all
	Currently not selling any Tcs foods
45	To clean under sinks
X	To send pics of bleach and faucet self retracting today as well as soap and towels at hand sink
10	To wash glass containers tie candy as needed - several in need
40/46	Avoid storing paper towels in baby changing mat in rr (self closing door)
	To call when you get the new unit in 214-202-1202
	To see set up!
33	No mop sink in site

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

Form EH-06 (Revised 09-2015)