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
Allergy policy/training Vomit clean up Employee health
Employee health

Date:		\O 1	Time in: Time out: License/Peri 2:15 2:59 FS 87					70 to post 2021				ე (101	Est. Type Choco	Risk Category	Page 1 of	_f 2	
	04/02/2021 2:15 2:59 FS 87 Purpose of Inspection: 1-Routine 2-Follow Up 3-Complai									Inves			_	J∠ I 5-CO/Cons		LOW 6-Other	TOTAL/SC	
Establishment Name: Contact/Owner N								ie:	4-1	IIIVES	uga	шоп		* Number o	of Repeat Violat	ions:	TOTAL/3C	OKE
Rocky Mountain Choco factory Eason Physical Address: Pest control:									Ноо	nd.		Gr	eace	e trap :	of Violations CC	OS: Follow-up: Yes	2/98/	/A
	Summer lee Massey quarterly Compliance Status: Out = not in compliance IN = in compliance NO =							Na To prov						10.00 up. 100			<u> </u>	
Mai		C omplia e appro		Status: Out = not in co	ompliance IN = in reach numbered in	item	NO = : Mark \(\sqrt{ir}								= corrected on si Mark		olation W-Wa	itch
	Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																	
O U									0	O I N N C U N O A O		С	Employee Health				R	
T	G $ G $							T	IN	-	A	s	12 Managemen		ees and conditional	l employees:		
	1. Proper cooling time and temperature								/				knowledge, resp			r employees,		
H	2. Proper Cold Holding temperature(41°F/45°F)														d exclusion; No dis	scharge from	-	
	See							Policy / self screening / covi					eyes, nose, and Policy / self	/ covid policy	•			
	3. Proper Hot Holding temperature(135°F)													Ü	tamination by Ha			
	4. Proper cooking time and temperature							14. Hands cleaned and properly washed/ Gloves u					used properly					
	5. Proper reheating procedure for hot holding (165°F in 2 Hours)				in 2		15. No bare hand contal alternate method proper											
\vdash	6. Time as a Public Health Control; procedures & records					cords							Gloves					
Ш				Choco					1			1		16 Pactourized		ptible Populations		
				Ap	proved Source							~		Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required				
	ī			7. Food and ice obtaine	ed from approved	d source; Food	1 in		ı									
				good condition, safe, and destruction Dawn /											Ch	emicals		
				8. Food Received at pro								T			ves; approved a	nd properly stored	; Washing Fruits	
				At receiving						~				& Vegetables Water on				
				Protection	n from Contami	ination				1				18. Toxic substa	ances properly i	identified, stored a	nd used	
	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting				d						Water/ Plumbing							
	10. Food contact surfaces and Returnables; Cleaned and Sanitized at 200 ppm/temperature				and		19. Water from approved source; Plumbing installed; probackflow device				led; proper							
	11. Proper disposition of returned, previously served or reconditioned Discarded				or						Ī	20. Approved S	ewage/Wastew	ater Disposal Syste	em, proper	+		
				reconditioned Disc	arded					V				disposal				
				DISC		ation Items	(2 Points	s) vio	olati	ions l	Requ	uire	Cor	disposal rective Action w	vithin 10 days			
O U	I N	N N O A	COO	Pri			(2 Points	-	O U		Requ N O	uire N A	C O	rective Action w		· Control/ Identifi	cation	R
O U T		N N O A	C O S	Pri	n of Knowledge/	/ Personnel	R	-	0	I	N	N	С	rective Action w	I Temperature	d; Equipment Ade		R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Jeremy Higgins	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: y mt Choco	Physical Ac Summ			City/State: Rockwall	License/Permit # FS 8770	Page <u>2</u> of <u>2</u>				
110011	<i>y</i> σσσσ	- Cuittin		URE OBSERVA							
Item/Loc	ation	Temp F	Item/Location			Location	Temp]				
Under counter freezer		-7									
		1									
Up	Upright freezer										
Upright cooler		38									
	origini occioi										
		OR	CEDVATIONS AN	ID CODDECTI	NE ACTIONS						
Item	AN INSPECTION OF YOUR ES		SERVATIONS AN NT HAS BEEN MAD			TO THE CONDITIONS OBSE	ERVED AND				
Number	NOTED BELOW:										
	Hot water in restroom 124 and also in kitchen										
	Sanitizer at 200 ppm										
	Ingredients by request out of binder										
	Allergen policy is to separate when possible but no guarantees are provided and this is disclosed to customers										
	Anything that isn't labeled is handed to customers when requested										
45	Maint to counters and	cabinets	various locatio	ons							
45/42											
42	Clean fan guards in upright coolers										
	Sinks wash rinse sanitize sink labels are different BUT training to do the three straps in proper sequence										
45	Need to Clean drains really good!										
45	Repair sprayer without tape										
45	time to resilicone behind three compartment sink										
	Store is showing age and Maint										
	Test strips and digital probe thermo on site										
	Watch use of residential appliances - keeping use with Choco only										
	11 222 224 322 223										
Received (signature)	by:		Print:			Title: Person In Charg	ge/ Owner				
(signature)	See abou	Jt									
Inspected			Print:								
(signature)	Kelly Kírkpo	atríck	RS			Complex V N	# aplicated				
	- 1		1			Samples: Y N	# collected				