|  | Retail Food Establishment Inspection Report          |   |   |   |  |   |           |  |                                   |  |        |  |  |  |  |  |  |  |
|--|--|---|---|---|--|---|-----------|--|-----------------------------------|--|--------|--|--|--|--|--|--|--|
| Date:         Time in:         Time out:         License/P           6/8/2022         10:55         11:55         FS-9   |  |   |   |   |  |   |           | ,  |                                   |  |        |  | Est. Type Risk Category Page <u>1</u> of <u>2</u>  |  |  |  |  |  |
| Purpose of Inspection: 1-Routine 2-Follow Up 3-Compla  |  |   |   |   |  |   |           |  | Inve                              | stiga  | atio   | 1  | 5-CO/Construction 6-Other TOTAL/SCORE  |  |  |  |  |  |
| Establishment Name: Contact/Owner N<br>Sake Bomb Thai & Sushi Bar Kathy Prax   |  |   |   |   |  |   |           |  |                                   |  |        | <ul> <li>★ Number of Repeat Violations:</li> <li>✓ Number of Violations COS:</li> </ul>          |  |  |  |  |  |  |
| Physical Address:<br>489 I-30 Rockwall, TX<br>Pest control :<br>Shamrock/monthly   |  |   |   |   |  |   |           | Hoo  | Hood Grease t<br>&V/3mo Garcia/   |  |        | reas   | e trap : Follow-up: Yes 11/89/E  |  |  |  |  |  |
|  |  |   |   |   |  | -   | · · · · · |  |                                   |  | -      |  | pplicable $COS = corrected on site R = repeat violation W- Watch$  |  |  |  |  |  |
| Mark the appropriate points in the OUT box for each numbered item Mark 🗸 a checkmark 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  |  |   |   |   |  |   |           |  |                                   |  |        |  |  |  |  |  |  |  |
| U<br>T   | N  | 0   | A   | o<br>s  | <b>Time and Temperature for Food Safety</b><br>(F = degrees Fahrenheit)  | Ň   |           | U<br>T   | N                                 | Ő  | A      | o<br>s   | Employee Health  |  |  |  |  |  |
|  | ~  | 1. Proper cooling time and temperature  |   |   |  |   |           |  |                                   |  |        |  | 12. Management, food employees and conditional employees;<br>knowledge, responsibilities, and reporting  |  |  |  |  |  |
|  |  | 2. Proper Cold Holding temperature(41°F/ 45°F)  |   |   |  |   |           | 13. Proper use of restriction and exclusion; No discharge from |                                   |  |        |  |  |  |  |  |  |  |
|  | ~  |   |   |   |  |   |           | eyes, nose, and mouth  |                                   |  |        |  |  |  |  |  |  |  |
|  | ~  |   |   |   | 3. Proper Hot Holding temperature(135°F)   |   |           |  | Preventing Contamination by Hands |  |        |  |  |  |  |  |  |  |
|  | ~  |   |   |   | 4. Proper cooking time and temperature   |   |           |  |                                   |  |        |  | 14. Hands cleaned and properly washed/ Gloves used properly  |  |  |  |  |  |
|  |  | ~   |   |   | 5. Proper reheating procedure for hot holding (165°F in 2 Hours)   |   |           |  |                                   |  |        |  | 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N )  |  |  |  |  |  |
| $\vdash$   | ~  | 6. Time as a Public Health Control; procedures & records  |   |   |  |   |           |  |                                   |  |        |  | Highly Susceptible Populations   |  |  |  |  |  |
|  | •  |   |   |   |  |   |           |  | ~                                 |  |        | Γ  | 16. Pasteurized foods used; prohibited food not offered  |  |  |  |  |  |
|  |  |   |   |   | Approved Source  |   |           |  | •                                 |  |        |  | Pasteurized eggs used when required<br>eggs cooked   |  |  |  |  |  |
|  | ~  | ~   |   |   | 7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction |   |           |  |                                   |  |        |  | Chemicals  |  |  |  |  |  |
|  | destruction Dr Fi                                    |   |   |   | 8. Food Received at proper temperature   |   |           |  |                                   |  |        |  | 17 Food additions are needed and are only stored. We him Frein   |  |  |  |  |  |
|  | ~  |   |   |   | check at receipt   |   |           |  | ~                                 |  |        |  | 17. Food additives; approved and properly stored; Washing Fruits & Vegetables<br>Water only  |  |  |  |  |  |
|  |  |   |   |   | Protection from Contamination  |   |           |  | ~                                 |  |        |  | 18. Toxic substances properly identified, stored and used  |  |  |  |  |  |
|  | 9. Food Separated & protected, prevented during food |   |   |   |  |   |           |  |                                   |  |        | Water/ Plumbing  |  |  |  |  |  |  |
|  | ~  |   |   | 10. Food contact surfaces and Returnables ; Cleaned and |  |   |           |  |                                   |  |        |  | 19. Water from approved source; Plumbing installed; proper   |  |  |  |  |  |
| W  |  |   |   |   | Sanitized at <u>100</u> ppm/temperature  |   |           |  | ~                                 |  |        |  | backflow device  |  |  |  |  |  |
|  | ~  |   |   |   | 11. Proper disposition of returned, previously served or reconditioned <b>discarded</b>                              |   |           |  | ~                                 |  |        |  | 20. Approved Sewage/Wastewater Disposal System, proper disposal  |  |  |  |  |  |
| 0  | I  | N   | N   | С   | Priority Foundation Items (2 Po  | Dints<br>R                                  |           | 0  | Ι                                 | Req<br>N<br>O  | Ν      | С  |  |  |  |  |  |  |
| U<br>T   | N  | 0   | A   | O<br>S  | Demonstration of Knowledge/ Personnel  |   |           | U<br>T   | N                                 | 0  | A      | O<br>S   | Food Temperature Control/ Identification   |  |  |  |  |  |
|  | ~  |   | 21. Person in charge present, demonstration of knowledge,<br>and perform duties/ Certified Food Manager/ Posted |   |  | ''  |           |  | ~                                 |  |        |  | 27. Proper cooling method used; Equipment Adequate to<br>Maintain Product Temperature  |  |  |  |  |  |
|  | ~  |   | 22. Food Handler/ no unauthorized persons/ personnel  |   |  |   |           |  | ~                                 |  |        |  | 28. Proper Date Marking and disposition  |  |  |  |  |  |
|  |  |   |   | Safe Water, Recordkeeping and Food Package              |  |   |           |  | ~                                 |  |        |  | 29. Thermometers provided, accurate, and calibrated; Chemical/<br>Thermal test strips  |  |  |  |  |  |
|  |  | Labeling           23. Hot and Cold Water available; adequate pressure, safe  |   |   |  | _   |           |  | Ľ                                 |  |        |  | digital  |  |  |  |  |  |
| ⊢  | ~  | 24. Required records available (shellstock tags; parasite   |   |   |  | ⊢   | -         |  |                                   | Permit Requirement, Prerequisite for Operation 30. Food Establishment Permit (Current/insp report sign posted) |        |  |  |  |  |  |  |  |
|  | ~  |   |   |   |  |   |           |  | ~                                 |  |        |  | 12/31/2022   |  |  |  |  |  |
|  |  |   |   |   | Conformance with Approved Procedures<br>25. Compliance with Variance, Specialized Process, and                       |   |           |  |                                   |  |        | Utensils, Equipment, and Vending<br>31. Adequate handwashing facilities: Accessible and properly |  |  |  |  |  |  |
|  | ~  | 425. Compliance with Variance, Specialized Process, and<br>HACCP plan; Variance obtained for specialized<br>processing methods; manufacturer instructions |   |   |  |   |           | 2  |                                   |  |        |  | supplied, used COS   |  |  |  |  |  |
|  |  |   | _   |   | Consumer Advisory  |   |           | 2  |                                   |  |        | _  | 32. Food and Non-food Contact surfaces cleanable, properly desined struct surfaces with the surface struct surface structure s |  |  |  |  |  |
|  | ~  |   |   |   | 26. Posting of Consumer Advisories; raw or under cooked<br>foods (Disclosure/Reminder/Buffet Plate)/ Allergen Label  |   |           |  | ~                                 |  |        |  | 33. Warewashing Facilities; installed, maintained, used/<br>Service sink or curb cleaning facility provided  |  |  |  |  |  |
|  |  |   |   |   | Core Items (1 Point) Violations Require Corrective   |   |           |  |                                   |  |        |  |  |  |  |  |  |  |
| O<br>U<br>T  | I<br>N   | N<br>O  | N<br>A  | C<br>O<br>S   | Prevention of Food Contamination   | R   |           | O<br>U<br>T  | I<br>N                            | N<br>O   | N<br>A | C<br>O<br>S  | Food Identification  |  |  |  |  |  |
|  | ~  |   |   |   | 34. No Evidence of Insect contamination, rodent/other animals  | Γ   |           | 1  | ~                                 |  |        |  | 41.Original container labeling (Bulk Food)   |  |  |  |  |  |
| 1  |  |   |   |   | 35. Personal Cleanliness/eating, drinking or tobacco use   | 1   | 1         |  |                                   |  |        |  | Physical Facilities  |  |  |  |  |  |
| 1  |  |   |   |   | 36. Wiping Cloths; properly used and stored  | 1   | 1         | 1  |                                   |  |        |  | 42. Non-Food Contact surfaces clean  |  |  |  |  |  |
| 1  |  |   |   |   | 37. Environmental contamination  | 1   | 1         |  | ~                                 |  |        |  | 43. Adequate ventilation and lighting; designated areas used   |  |  |  |  |  |
|  | 38. Approved thawing method                          |   |   |   | 1  | 1   |           | ~  |                                   |  |        | 44. Garbage and Refuse properly disposed; facilities maintained                                  |  |  |  |  |  |  |
|  |  |   |   |   | Proper Use of Utensils   |   | 1         | 1  |                                   |  |        |  | 45. Physical facilities installed, maintained, and clean   |  |  |  |  |  |
| 1  |  | 39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used  |   |   |  |   | 1         |  | ~                                 |  |        |  | 46. Toilet Facilities; properly constructed, supplied, and clean   |  |  |  |  |  |
| 1  |  |   |   |   | 40. Single-service & single-use articles; properly stored and used   | Ť   |           |  | ~                                 |  |        |  | 47. Other Violations   |  |  |  |  |  |
| L  |  |   |   | L   |  | <u>ــــــــــــــــــــــــــــــــــــ</u> | I         | <u>ا</u> ا   | L                                 |  |        |  |  |  |  |  |  |  |

| Received by:<br><sup>(signature)</sup> Angie Praxaybane | Angie Praxaybane          | Title: Person In Charge/ Owner<br>Owner |
|---|---------------------------|---|
| Inspected by:<br>(signature) Christy Cortez, RS         | Print: Christy Cortez, RS | Business Email:                         |

Form EH-06 (Revised 09-2015)

|                              | <sup>nent Name:</sup><br>Bomb Thai & Sushi Bar   | Physical A <b>489</b> - | 30                             | City/State:<br>Rockwa | all, TX    | License/Permit # Page Page |           | 2 of <u>2</u>     |  |  |  |  |  |
|------------------------------|--|-------------------------|--------------------------------|-----------------------|------------|----------------------------|-----------|-------------------|--|--|--|--|--|
| Item/Loc                     | ation  | Temp F                  | TEMPERATURE OBSERVA            | TIONS<br>Temp F       | Item/Locat | p/Location                 |           |                   |  |  |  |  |  |
|                              | cold top/potatoes  | 41                      | rice in rice cooke             |                       |            | up pot/soup                | )         | <sup>тетр F</sup> |  |  |  |  |  |
| CL                           | it tomatoes  | 41                      | white freezer ambient          | -9                    |            |                            |           |                   |  |  |  |  |  |
| large                        | cold top/raw chicken   | 41                      | white freezer ambient          | -8                    |            |                            |           |                   |  |  |  |  |  |
| r                            | aw shrimp  | 41                      | 2 door freezer ambient         | 4                     |            |                            |           |                   |  |  |  |  |  |
| und                          | er/raw chicken   | 42                      | white freezer amb              | <b>-</b> 3            |            |                            |           |                   |  |  |  |  |  |
| WIC                          | C/raw chicken  | 42                      | bar under counter cooler/fis   | <sup>h</sup> 41       |            |                            |           |                   |  |  |  |  |  |
| 0                            | lumplings  | 42                      | fish                           | 41                    |            |                            |           |                   |  |  |  |  |  |
|                              | noodles  | 42                      | cream cheese                   |                       |            |                            |           |                   |  |  |  |  |  |
| Item                         | OBSERVATIONS AND CORRECTIVE ACTIONS  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
| Number                       | AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND<br>NOTED BELOW: |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              | Grill hand sink 100+F  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
| 40                           | Change foil daily on cart. Best to simply clean cart daily/no foil   |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
| 45                           | Clean walls, floors  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
| 31                           | Keep hand sinks accessible/ no utensils, bowls, etc Cos  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
| 39/37                        | Avoid storing/using  |                         |                                | - !!                  |            |                            |           |                   |  |  |  |  |  |
| 39                           | Store small crockpot for rice scoops clean/WRS daily   |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
| 36                           | Store wiping cloths  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
| 35                           | Store employee drinks low and separate   |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              | Dishwasher 100 pp  | m chiori                | ne sanitizer                   |                       |            |                            |           |                   |  |  |  |  |  |
| 35                           | 3 comp sink 146F   | woo foo                 | d on clean dish rack           |                       |            |                            |           |                   |  |  |  |  |  |
|                              |  |                         | eparate employee item          | e from ro             | etaurant   | itoms                      |           |                   |  |  |  |  |  |
| 40                           |  |                         | use. Avoid WalMart bags for fo |                       |            |                            | ead.      |                   |  |  |  |  |  |
|                              |  |                         | nent/mixers, walls behi        | -                     |            | -                          |           |                   |  |  |  |  |  |
| 10/12                        | Drink hand sink 129  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              |  |                         | om chlorine sanitizer          |                       |            |                            |           |                   |  |  |  |  |  |
|                              | Sani bucket setup to 100 ppm chlorine sanitizer Bar hand sink 100+F  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              | 3 comp sink 110+F  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              | Sushi rice log current   |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              | Plastic sushi rice rollers WRS every 4 hours   |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
| 40                           | Avoid wrapping spice containers in saran   |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
| 37                           | Store items 6 inches off of floor to clean/organize dry storage  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              | Sushi only made for dinner   |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              |  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              |  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              |  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
|                              |  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |
| Received                     | by:  |                         | Print:                         |                       | I          | Title: Person In Charge/   | Owner     |                   |  |  |  |  |  |
| (signature)                  |  | 1e                      |                                | axayba                |            | Owner                      |           |                   |  |  |  |  |  |
| Inspected<br>(signature)     | Angie Praxayban<br><sup>Iby:</sup><br>Chrísty Cov  | tez, 1                  | RS Christy C                   | ortez,                | RS         | Samples: Y N #             | collected | d                 |  |  |  |  |  |
| Form EH-06 (Revised 09-2015) |  |                         |                                |                       |            |                            |           |                   |  |  |  |  |  |