Followup Fee of																		
•	\$50.00 after Retail Food Establishment Inspection Report Image: Constraint of the second																	
Thist Tollowup															Allergy policy			
City of Rockwall Employee health																		
Date: Time in: Time out: License/Per 3/25/24 8:30 9:38 FS-90								CPFM	$2^{\text{Food handlers}}$ Page <u>1</u> of <u>2</u>									
Purpose of Inspection: 2 1-Routine 2-Follow Up 3-Compla									n	5-CO/Const	ruction							
Establishment Name: Contact/Owner N Scottie's Rockwall Patel						Name:						Number of Number of	[°] Repeat Viola [°] Violations C	ations: COS:				
Physical Address: Pest control :							Ho N/a			G N/a		e trap :/ waste oil		Follow-up: Yes	10/90/	Ά/		
							$\mathbf{O} = \mathrm{not}$	obser	ved		A = n	not ap				olation W= Wat	ch	
Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site \mathbf{R} = repeat violation W = Watch Mark the appropriate points in the OUT box for each numbered item Mark '4' a checkmark in appropriate box for IN, NO, NA, COS Mark and in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																		
0	Î	Ν	Sta N	С		•	,	R	C 0	ompl	lianco N	e Sta N	tus C	[R
U T	N	0	A	$\left \begin{array}{c} \mathbf{O} \\ \mathbf{S} \end{array} \right $ (F = degrees Fahrenheit)					U T		0	A	A O Employee Health 12. Management, food employees and conditional employees;					
		1. Proper cooling time and temperature							12. Management, rood employees and conditional employees; knowledge, responsibilities, and reporting							employees,		
		2. Proper Cold Holding temperature(41°F/ 45°F)						W	13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth							charge from		
		3. Proper Hot Holding temperature(135°F)						-	Vv Need state poster at hand sink Preventing Contamination by Hands						. J			
			./		4. Proper cooking time	and temperature		+	Preventing Contamination by Hands 14. Hands cleaned and properly washed/ Gloves used									
	+				5. Proper reheating pro	cedure for hot holding	(165°F in 2		_	15. No bare hand contact with ready to each								
			~		Hours)					alternate method properly followed (APPROVED Gloves						Y N.)		
	/				6. Time as a Public He	alth Control; procedure	es & records]				
	Approved Source				oproved Source				~				Pasteurized eggs		rohibited food not of equired	fered		
	7. Food and ice obtained from approved source; Food good condition, safe, and unadulterated; parasite							<u> </u>			I	11/4						
destruction GSC, Texas Wholesa														С	hemicals			
					8. Food Received at pro	oper temperature				~				& Vegetables	es; approved	and properly stored;	Washing Fruits	
					Protection		_	· ·				Water 18. Toxic substances properly identified, stored and used						
					9. Food Separated & pr			•					XX 7 4					
					preparation, storage, display, and tasting 10. Food contact surfaces and Returnables ; Cleaned and								1	10 Water from a		r/ Plumbing rce; Plumbing install	ad: proper	
3					Sanitized at <u>100</u>					~				backflow device		ice, i funionig nistan	ed, proper	
	11. Proper disposition of returned, previously served or reconditioned D : a court						~						water Disposal Syste	m, proper				
H	Priority Foundation I tems (2 Point								viola	tions	Rea	uire	Cor	rrective Action wi	thin 10 day	s		<u> </u>
O U	O I N N C				R	O U	I N	N O	N A	C O			re Control/ Identific	ation	R			
T				S	21. Person in charge pr				Т				S	27. Proper coolin	g method us	ed; Equipment Ade	quate to	
		and perform duties/ Certified Food Manager (CFM) 1 22 First Handler/ga unsubscient assess/assessed										Maintain Product 28. Proper Date M			-			
	2					22. Food Handler/ no unauthorized persons/ personnel 2 Safe Water: Recordkeeping and Food Package									e	accurate, and calibrat	ed: Chemical/	
Safe Water, Recordkeeping and Food Package Labeling								2					Thermal test stri	ps	o, no test strip			
					23. Hot and Cold Wate 110, good press					. <u> </u>				, Prerequisite for O				
					24. Required records av destruction); Packaged		s; parasite		W					30. Food Establi Posted, e		mit/Inspection Curr 1 2/3 1/23	ent/ insp posted	
					Conformance	with Approved Proce	dures							U	tensils, Equi	ipment, and Vendin		
					25. Compliance with V HACCP plan; Variance	e obtained for specializ	red							supplied, used		cilities: Accessible a	nd properly	
					processing methods; m		IS							Equipped				
					Con	sumer Advisory				~				32. Food and Nor designed, constru		act surfaces cleanable ed	e, property	
					26. Posting of Consum- foods (Disclosure/Rem					~				33. Warewashing Service sink or cu		nstalled, maintained,	used/	
					Core Items (1 Poin			Actio	n No	t to E	Trac	ad 01		Equipped	not set		_	
O U	I N	N O	N A	C O		of Food Contaminati		R		Ι	N O	N A	C O			Identification		R
т 1	+			S	34. No Evidence of Ins	sect contamination, rod	ent/other		Т	~			S	41.Original conta	iner labeling	g (Bulk Food)		
ا ا					animals 35. Personal Cleanlines	ss/eating, drinking or t	obacco use	+		-					Physi	cal Facilities		
F (36. Wiping Cloths; pro	perly used and stored		+	1					42. Non-Food Co	·			
					37. Environmental cont				F	~				43. Adequate ven	tilation and	lighting; designated	areas used	
	/				38. Approved thawing	method			\vdash	~				44. Garbage and	Refuse prope	erly disposed; faciliti	es maintained	1
					•	er Use of Utensils			1	1				2		d, maintained, and cl		1
					39. Utensils, equipmen dried, & handled/ In us					~				46. Toilet Faciliti		constructed, supplied	d, and clean	
H	┥				40. Single-service & si	ngle-use articles; prop	erly stored	+	-		\vdash			47. Other Violati	ons	-		+
1					and used See				1					CO2 tank				

Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Tiffany Williams	Print: Tiffany Williams	Title: Person In Charge/ Owner
Inspected by: (signature) Richard Hill	Print: Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: es Rockwall	Physical A 2860	Ridge Rd	City/State: Rockwal	l, Tx	License/Permit # Page FS-9049		<u>2</u> of <u>2</u>			
Item/Loc:	ation	Тетр	TEMPERATURE OBSERVA' Item/Location	TIONS Temp	Item/Locat	Item/Location		Тетр			
	erchandiser	18	Drink merchandise	-				Temp			
Re	d Bull cooler	48	Melon/cheese cake coole	r 39,40							
	WIC tcs	38-40	Rear Beer WIC								
	Milk	38	34, 38								
	Juice	40	Milk @ coffee make	r 36							
	Beer area	38-41	Freezer back roon	ו 9							
F	lot holding		Ice cream freeze	r -15							
	Tamales	136									
Itom	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 temperatures are taken in F										
	Restrooms equipped greater than 101 in each room, added hand wash signs in both restrooms										
	Hand sink equipped temp greater than 101										
29	3 comp sink not set up, using chlorine as sanitizer, no test strips onsite										
42/45	Using Ready Ice in outdoor merchandiser										
42/45											
42	Rear Beer WIC, fan guards need to be cleaned										
42	Need to clean in cabinets and drawers where microwaves are located										
34/45	Need to address small gap at side exit door										
10	To clean pink slime in the ice dispenser chute at soda machine										
47	Need to secure small CO2 tank to shelf with chain										
42	Minor cleaning inside of freezer in back room										
45	Need to fill holes in frp										
45	Need to seal around n										
40	Discourage using cardboard under equipment in back area, non cleanable										
W	Need to check with fruit vendor if apples have been washed? If not need to wash with water Need to request license from Dana's cheesecake, is it a manufacturing license?										
W W	•		a's cheesecake, add net w		•	ISE ?					
vv					unces						
	Cleaning soda nozzles on a nightly basis										
Received (signature)	See abov	/e	See ab	ove		Title: Person In Charge/	Owner				
Inspected (signature)	-	ST.	T Richard			Samples: Y N #	collected				
Form EH-06	(Revised 09-2015)		4 1			•					