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 |
| Employee health                |

| Date: Time in: 12/08/2020 9:15  |   |          |   | Time out: <b>11:28</b> |  | nse/Per   |                                 |             |             |   |   |                 |  | Est. Type<br>Bar | Risk Category   | Page 1 of   | 2   |                                |   |
|---|---|----------|---|------------------------|--|---|---------------------------------|-------------|-------------|---|---|-----------------|--|------------------|---|---|---|--------------------------------|---|
| Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain   |   |          |   |                        |  |   |                                 |             |             | 4-Investigation 5-CO/Construction 6-Other |   |                 |  |                  | TOTAL/SCO   | RE  |   |                                |   |
| Establishment Name: Contact/Owner I Shenaniganz Z lounge Ripp   |   |          |   |                        |  |   |                                 | vner Na     | ame:        |   |   |                 |  |                  | * Number of Repeat Violations:<br>✓ Number of Violations COS:   |   |   | 8/92/                          | Δ |
| Physical Address: Pest control: 11/13/2020 versacor   |   |          |   |                        |  |   |                                 | cor         |             |   | Hood Grease trap :<br>10/06/2020 Les  |                 |  |                  | e trap :  |   | Follow-up: Yes <a>✓</a> <a>✓</a> <a></a> <a>✓</a>                     | 0/32/A                         |   |
| Ma  | Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site Mark the appropriate points in the OUT box for each numbered item Mark in appropriate box for IN, NO, NA, COS Mark in |          |   |                        |  |   |                                 |             |             |   |   |                 | ch   |                  |   |   |   |                                |   |
| Compliance Status  O I I N N C Time and Temperature for Food Safety  Time and Temperature for Food Safety |   |          |   |                        |  |   |                                 | R           | O           | ompl<br>I                                 | iance<br>N  | Sta<br>N        | tus  |                  | ·   |   |   | R                              |   |
| U<br>T  | N   | 0        | A   | o<br>s                 |  | egrees Fahrenheit   |                                 |             |             |   | U N O A O Employee Health  12. Management, food employees and conditional employees |                 |  |                  |   |   | employees:  |                                |   |
|   |   | /        |   |                        | 8  | r   |                                 |             |             |   | ~   |                 | knowledge, responsibilities, and reporting |                  |   |   |   |                                |   |
|   | ~   |          |   |                        | 2. Proper Cold Holding See attached  | temperature(41°I  | F/ 45°F)                        |             |             |   | /   |                 |  |                  | 13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth Policy and posters           |   |   |                                |   |
|   |   | /        |   |                        | 3. Proper Hot Holding t  | emperature(135°l  | F)                              |             |             |   | <u> </u>  |                 |  |                  |   |   | tamination by Han   | ıds                            |   |
|   |   | <b>/</b> |   |                        | 4. Proper cooking time   | and temperature   |                                 |             |             |   | ~   |                 |  |                  | 14. Hands cleane<br>Gloves  | ed and properl  | y washed/ Gloves u  | sed properly                   |   |
|   |   | ~        |   |                        | 5. Proper reheating proc<br>Hours)   | cedure for hot hol  | ding (165°F ir                  | n 2         |             |   |   | /               |  |                  | 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y_ N_ ) |   |   |                                |   |
|   |   |          |   |                        | 6. Time as a Public Hea  | alth Control; proce   | edures & reco                   | ords        |             |   | Highly Susceptible Populations  |                 |  |                  |   |   |   |                                |   |
|   |   |          |   |                        | Ap   | proved Source   |                                 |             |             |   |   |                 | /  |                  | 16. Pasteurized for Pasteurized eggs Cooking  |   | hibited food not off<br>quired  | fered                          |   |
|   | •   |          |   |                        | 7. Food and ice obtained<br>good condition, safe, an<br>destruction  |   |                                 | in          |             |   |   |                 |  |                  |   | Ch  | emicals   |                                |   |
|   | •   |          |   |                        | 8. Food Received at pro  | oper temperature  |                                 |             |             |   | /   |                 |  |                  | 17. Food additive & Vegetables  | es; approved a  | nd properly stored;   | Washing Fruits                 |   |
|   |   |          |   |                        | Protection   | from Contamin   | ation                           |             |             | 3   |   |                 |  |                  | Using wat<br>18. Toxic substan  | nces properly i   | identified, stored an   | d used                         | + |
|   | ~   |          |   |                        |  | P. Food Separated & protected, prevented during food preparation, storage, display, and tasting    Always label spray bottles |                                 |             |             |   |   |                 |  |                  |   |   |   |                                |   |
|   | ~   |          |   |                        | 10. Food contact surfaces and Returnables ; Cleaned and Sanitized at 200 ppm/temperature                       |   |                                 |             |             |   | ~   |                 |  |                  | 19. Water from a backflow device City appro   |   | ee; Plumbing installe   | ed; proper                     |   |
|   |   | ~        |   |                        | 11. Proper disposition of returned, previously served or reconditioned Discarded                               |   |                                 |             |             |   | ~   |                 |  |                  | 20. Approved Sewage/Wastewater Disposal System, proper disposal   |   |   |                                |   |
|   |   |          |   |                        | Pri  | ority Foundat   | ion Items (                     | 2 Poir      | _           | _   |   | Req             | uire                                       | _                | rective Action wi   | thin 10 days  |   |                                |   |
| O<br>U<br>T   | I<br>N  | N<br>O   | N<br>A  | C<br>O<br>S            |  | of Knowledge/   |                                 |             | R           | O<br>U<br>T                               | N   | N<br>O          | N<br>A                                     | C<br>O<br>S      | Food 7  | Temperature   | Control/ Identific  | ation                          | R |
|   | ~   |          |   |                        | <ol> <li>Person in charge preand perform duties/ Cer</li> </ol>  | tified Food Mana  | ger (CFM)                       |             |             |   | ~   |                 |  |                  | 27. Proper coolin<br>Maintain Product   |   | d; Equipment Adea   | quate to                       |   |
|   | <b>/</b>  |          |   |                        | 22. Food Handler/ no un<br>All servers and allCo   | nauthorized perso<br>ooks within 60 d   | ns/ personnel<br>ays            |             |             |   |   |                 |  |                  | 28. Proper Date N   |   | •   |                                |   |
| Safe Water, Recordkeeping and Food Package<br>Labeling  |   |          |   |                        |  |   | ~                               |             |             |   | 29. Thermometer Thermal test strip Using digital                                    | ps              | curate, and calibrat                       | ed; Chemical/    |   |   |   |                                |   |
|   | /   |          | 23. Hot and Cold Water available; adequate pressure, safe |                        |  |   |                                 |             |             |   |   |                 |  | • ′              | Prerequisite for O  |   |   |                                |   |
|   |   |          | ~   |                        | 24. Required records av destruction); Packaged   |   | k tags; parasit                 | e           |             |   | ~   |                 |  |                  | 30. Food Establi<br>Posted  | ishment Pern  | nit (Current/ insp s  | ign posted)                    |   |
|   |   |          | ~   |                        | 25. Compliance with Va<br>HACCP plan; Variance<br>processing methods; ma                                       | obtained for spec   | ed Process, an                  | nd          |             |   | •   |                 |  |                  |   | ndwashing fac   | oment, and Vendin<br>ilities: Accessible and                          |                                |   |
| Consumer Advisory   |   |          |   |                        |  | 2   |                                 |             |             |   | 32. Food and Nor<br>designed, constru<br>See attack                                 | icted, and used | t <u>surfaces cleanable</u><br><u>1</u>    | e, properly      |   |   |   |                                |   |
|   | <u> </u>  |          |   |                        | 26. Posting of Consume foods (Disclosure/Remi Ingredients by reque   | inder/Buffet Plate  | or under cool<br>)/ Allergen La | ked<br>abel |             |   |   | <u> </u>        |  |                  | 33. Warewashing<br>Service sink or cu   | Facilities; ins   | stalled, maintained,<br>acility provided                              | used/                          |   |
| 0   | ı   | N        | N   | С                      | Core Items (1 Poin   | t) Violations R   | equire Corre                    | ective A    | Action<br>R | Not                                       |   | xcee<br>N       | ed 90<br>N                                 | 0 Da             | ys or Next Inspec   | ction , Which   | ever Comes First  |                                | R |
| U<br>T  | N   | 0        | A   | o<br>s                 |  | of Food Contami   |                                 |             |             | U<br>T                                    | N   | 0               | A  | o<br>s           | 41.0  |   | lentification   |                                |   |
| W   | /   |          |   |                        | 34. No Evidence of Inseanimals Watch   | ect contamination   |                                 |             |             |   |   | ~               |  |                  | 41.Original conta   | uner labeling   | (Bulk Food)   |                                |   |
|   | •   |          |   |                        |  | / .: 1:1:   | . 1                             |             |             |   |   |                 |  |                  |   |   |   |                                |   |
|   | <b>'</b>  |          |   |                        |  | s/eating, drinking  |                                 | se          | _           |   | 1   |                 |  |                  | 12 Non Ford C   |   | al Facilities   |                                |   |
|   | <u> </u>  |          |   |                        | 36. Wiping Cloths; prop  | perly used and sto  |                                 | se          |             | 1   |   |                 |  |                  | 42. Non-Food Co<br>See attached   | ontact surfaces   | clean   | nreas used                     |   |
| 1   | \<br>\<br>\   |          |   |                        | 36. Wiping Cloths; prop<br>Spray bottles<br>37. Environmental cont<br>See attached                             | perly used and sto  |                                 | se          |             | 1   | ✓   |                 |  |                  | See attached<br>43. Adequate ven<br>Watch   | ontact surfaces<br>ntilation and <u>li</u>  | ghting; designated a  |                                |   |
| 1   | <u> </u>  | <u>~</u> |   |                        | 36. Wiping Cloths; prop Spray bottles 37. Environmental cont See attached 38. Approved thawing r               | perly used and sto<br>amination   | red                             | se          |             | 1   | ✓<br>✓  |                 |  |                  | See attached 43. Adequate ven Watch 44. Garbage and Match   | ontact surfaces  Itilation and <u>li</u> Refuse proper  | s clean ghting; designated a  | es maintained                  |   |
| 1   | <u> </u>  | <u>~</u> |   |                        | 36. Wiping Cloths; property bottles 37. Environmental continues attached 38. Approved thawing representations. | perly used and sto<br>amination<br>method   | red                             |             |             | 1   | <u>~</u>  |                 |  |                  | See attached 43. Adequate ven Watch 44. Garbage and Watch 45. Physical facil See attached                         | ontact surfaces  atilation and li  Refuse proper  lities installed,                             | ghting; designated a<br>ly disposed; facilitie<br>maintained, and cle | es maintained                  |   |
| 1   | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \   | <u>v</u> |   |                        | 36. Wiping Cloths; prop Spray bottles 37. Environmental cont See attached 38. Approved thawing r               | perly used and sto<br>amination<br>method<br>er Use of Utensils<br>i, & linens; proper<br>ie utensils; proper                 | red  ly used, storedly used     | d,          |             | 1   |   |                 |  |                  | See attached 43. Adequate ven Watch 44. Garbage and Watch 45. Physical facil See attached 46. Toilet Faciliti     | ontact surfaces  atilation and li  Refuse proper  lities installed,  les; properly c  ss faucet | s clean ghting; designated a  | es maintained ean 1, and clean |   |

## Retail Food Establishment Inspection Report

## City of Rockwall

| Received by: (signature) Andrew Huffman | Print: | Title: Person In Charge/ Owner |
|---|--------|--------------------------------|
| Inspected by: Kelly Kirkpatrick RS      | Print: | Business Email:                |

Form EH-06 (Revised 09-2015)

|                          | ment Name:<br>aniganz Z lounge   | Physical A     | Address:            |               | City/State:<br>Rockwall | License/Permit # FS 8897 | Page 2 of 2    |  |  |  |  |  |
|--------------------------|--|----------------|---------------------|---------------|-------------------------|--------------------------|----------------|--|--|--|--|--|
|                          |  | l              | TEMPERATUI          | RE OBSERVAT   | IONS                    | •                        |                |  |  |  |  |  |
| Item/Loc                 | ation  | Temp F         | Item/Location       |               | Temp F Item/I           | Location                 | Temp I         |  |  |  |  |  |
| Bar co                   | olers non Tcs  |                |                     |               |                         |                          |                |  |  |  |  |  |
| 1                        | 6/20/27/20   |                |                     |               |                         |                          |                |  |  |  |  |  |
| 4                        | 6/39/37/39   |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Z lounge   |                |                     |               |                         |                          |                |  |  |  |  |  |
| 3                        | 0's non Tcs  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | 0 3 11011 103  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         |                          |                |  |  |  |  |  |
| T.                       | I  |                | BSERVATIONS ANI     |               |                         |                          |                |  |  |  |  |  |
| Item<br>Number           | AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:                                  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Main restrooms - hot wat   | ter at 100-    | ·110 - several faud | cets in women | 's restroom are         | not running for 15 sec   | s continuously |  |  |  |  |  |
|                          | Main restrooms - hot water at 100-110 - several faucets in women's restroom are not running for 15 secs continuously.  Tic in mop room -clean and organize |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Hot water at 112 F main bar  |                |                     |               |                         |                          |                |  |  |  |  |  |
| 42/45                    |  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Watch for rusty shelving main bar  |                |                     |               |                         |                          |                |  |  |  |  |  |
| 45                       | Watch for rusty shelving main bail  Watch grout throughout   |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Shields at POS for covid   |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Using quats sanitizer for sanitizing all touches surfaces  |                |                     |               |                         |                          |                |  |  |  |  |  |
| 18                       | To label all spray bottles   |                |                     |               |                         |                          |                |  |  |  |  |  |
| 37                       | Time to defrost freezers - mug chiller   |                |                     |               |                         |                          |                |  |  |  |  |  |
| 45                       | Watch for grout issues   |                |                     |               |                         |                          |                |  |  |  |  |  |
| 18                       | Label all spray bottles  |                |                     |               |                         |                          |                |  |  |  |  |  |
| 32                       | Time to replace rusty pour spouts  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Keep an eye on pipe wrapping over ice bins   |                |                     |               |                         |                          |                |  |  |  |  |  |
| 45                       | Time to address door cover to three door cooler that is peeling and rusty  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Using sleeves straws most of time now  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Using plugs for beer taps at night   |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | To Follow all labels for chemicals   |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Food truck - cooler 38/35 - beer cooler / cold top unit  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Best to cover forks etc on cart in corn hole area  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Using hand sanitizer in both axe and escapolgy area for handing over bottles   |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          | Bottle coolers in above are for non Tcs only   |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         |                          |                |  |  |  |  |  |
|                          |  |                |                     |               |                         | T                        |                |  |  |  |  |  |
| Received<br>(signature)  | by:  | 10             | Print:              |               |                         | Title: Person In Charg   | e/ Owner       |  |  |  |  |  |
|                          | <u> </u>   | / <del>U</del> |                     |               |                         |                          |                |  |  |  |  |  |
| Inspected<br>(signature) | See abou   | <br>           | Print:              |               |                         |                          |                |  |  |  |  |  |
|                          | Keuy Kurkpa  | urick          | KS                  |               |                         | Samples: Y N             | # collected    |  |  |  |  |  |