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

							se/Permit # 0003414							Food handle	Food managers 3	Page 1 of _	2		
	Purpose of Inspection: 1-Routine 2-Follow Up 3-Compla											5-CO/Cons	5-CO/Construction 6-Other TO		TOTAL/SCO	RE			
Establishment Name: Contact/Owner N Smoothie king Wasikewaki														* Number o			Ϊ		
							Pest contr			Но	od		G	rease	e trap//waste oil	n violations	Follow-up: Yes	√ 8/92/	Α
718 I-30 02-19/2023 / rockwall p								pest	Na	,ou		Na		e trap// waste on		No Pic	1		
Compliance Status: Out = not in compliance IN = in compliance NO = not o Mark the appropriate points in the OUT box for each numbered item NO = not o Mark X in appr															oplicable COS	= corrected or	n site R = repeat v Iark an X in appropri	riolation W- Wate	ch
Mark the appropriate points in the OUT box for each numbered item Mark X in appropriate box for IN, NO, NA, COS Mark an X in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																			
Co	Compliance Status									0	Compliance Status						R		
U T	U N O A O Time and Temperature for Food Safety						R	U	U N O A O		o s		Employee Health						
	1. Proper cooling time and temperature												0		oyees and conditions	al employees;			
													knowledge, responsibilities, and reporting						
	2. Proper Cold Holding temperature(41°F/45°F)												Proper use of eyes, nose, and		and exclusion; No d	ischarge from			
L	3. Proper Hot Holding temperature(135°F)						-						By hand sir	nks great					
		ı			,						14.70					Preventing Contamination by Hands			
		·	/		4. Proper cooking time	and tempera	ature				/				14. Hands clear	ned and prop	erly washed/ Gloves	used properly	
		ı	/		5. Proper reheating prod Hours)	cedure for h	ot holding (165°F in 2			15. No bare hand contact with ready to eat for alternate method properly followed (APPRO)								
		•			,						No h				No hand for	od	mowed (ATTROVE	.D 1N)	
		ı			6. Time as a Public Hea	alth Control;	procedures	& records							Highly Susceptible Populations				
					Δn	proved Sou	rce						./		16. Pasteurized : Pasteurized eggs	/ 1	prohibited food not o	offered	
								77 1:							Not used	s used when	required		
					Food and ice obtaine good condition, safe, ar									Chemicals					
					destruction											•	Chemicais		
					8. Food Received at pro	oper tempera	ature									es; approved	d and properly stored	l; Washing Fruits	
											•						for fresh nex		
					Protection	from Cont	amination				/				18. Toxic substa		ly identified, stored a	and used	
	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting														ter/ Plumbing				
					10. Food contact surfac			anad and			ı				10 Water from		urce; Plumbing insta	llad: proper	
3					Sanitized at 200	ppm/temper	rature Inside	ice machine		w	~				backflow device	•	dipper well <i>i</i>		
					11. Proper disposition of	of returned, j	previously s	erved or							20. Approved Se	ewage/Waste	ewater Disposal Syst	tem, proper	_
	1 1.				reconditioned Dicc	ardad					V				disposal				
L					reconditioned Disc				$\bot\bot$		_			_					
0		N	N	С			ndation I	tems (2 Po							rrective Action w	rithin 10 day	ys		R
O U T	IN	N O	N A	C O S		ority Fou			oints) 1	violar O U	I	Req N O	vuire N A	Cor C O S			<i>ys</i> ure Control/ Identif	ication	R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: (Printed / covid Jessi Murphy	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: Othie king	Physical A	ddress:	City/State: Rockwall		License/Permit # Page 2 of 2 Fs 0003414						
			TEMPERATURE OBSERVA									
Item/Loc		Temp F	Item/Location	Temp F	Item/Locat	ion	Temp 1					
Bev co	ooler	38	Upright freezer									
	Freezer	-12	Upright cooler	38/39								
Deep 1	freezer for condiments	-6										
С	ColdTop unit	38										
	Mangos	39										
	Bananas	39										
			SERVATIONS AND CORRECT									
Item Number	AN INSPECTION OF YOUR EST NOTED BELOW: ALL TEMPS T		NT HAS BEEN MADE. YOUR ATTEN	ITION IS DIREC	TED TO TH	IE CONDITIONS OBSER	√ED AND					
37	Time to defrost freezer	r										
31	Hand sink May not be	used for	blender lids									
	Hot water 127 F											
W	Reminder to store wip	ing cloths	s in sanitizer per code avo	id dry on co	ounter a	nd surfaces						
	Sanitizer bucket 200' ppm in wiping cloth - discussed quats. Binding with manager											
	Water temp was 94 in quats / to check at 75 f											
	Best to have hose from dipperwell over drain 1 inch off											
	Changing plastic nightly											
W	Observed dry towels stored various locations											
W	Using to wipe up water and then sanitizing											
	Discussed sanitizer test strips and use and dates											
	Thawing strawberries in cooler											
42	Minor cleaning inside cooler and freezer- spills											
10			nine is showing pink slime	on edge - 1	to clean							
45	Minor cleaning under											
W	Do your part in the dumpster area											
	Restroom equipped											
	Avoid having soooo many dry towels on surfaces											
							-					
Received (signature)		o Stur	gis Print:			Title: Person In Charge/	Owner					
Inspected (signature)		ıtríck	Print:			Samples: Y N #	collected					