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

	ate:			_	Time in: Time out:	License/Permit						Est. Type	Risk Category	n. 1 -	2
					12:08 1:02	FS 897						FF	Med	Page 1 of	
		se of ishme				3-Complaint act/Owner Name:		Inve	stiga	tion		5-CO/Construction * Number of Repeat Viol	6-Other	TOTAL/SCO	ORE
Sc	onic	585	57		Ange	el	ı					✓ Number of Violations	COS:	18/82	/R
		al Ad Goliad		ess:	Pest contro Presto X		Но	od				e trap : 021 1000 gals Trimble	Follow-up: Yes ✓ No ☐	10/02	ں <i>،</i> _
M		Comp				$ NO = no \\ Mark $						plicable COS = corrected or	n site R = repeat vio	olation W- Wat	tch
Mi	ark u	пе арр	orop	riate	points in the OUT box for each numbered item Priority Items (3 Points)								*	ite box for K	
О	Î		N	С	Time and Temperature for Food Safe	ety R	О		N	N	С				R
U T	N	0	A	o s	(F = degrees Fahrenheit)	cty	U T	N	0	A	o s		oloyee Health		
		/			Proper cooling time and temperature			1				12. Management, food emplo knowledge, responsibilities,	•	employees;	
					2. Proper Cold Holding temperature(41°F/ 45°F)	9	-					13. Proper use of restriction a	and exclusion; No disc	charge from	
3					Tomatoes/			•				eyes, nose, and mouth Screening at arrival			
	/				3. Proper Hot Holding temperature(135°F) See							9	ontamination by Han		
	1				4. Proper cooking time and temperature Hot holding is higher in some cases			/				14. Hands cleaned and prope	erly washed/ Gloves u	ised properly	
		\			5. Proper reheating procedure for hot holding (1 Hours)	.65°F in 2		/				15. No bare hand contact wit alternate method properly follows:			
		_			6. Time as a Public Health Control; procedures	& records						Gloves			
		•			,,,							16. Pasteurized foods used;	ceptible Populations		
					Approved Source			~				Pasteurized eggs used when			
					7. Food and ice obtained from approved source; good condition, safe, and unadulterated; parasite										
	~				destruction								Chemicals		
					8. Food Received at proper temperature							17. Food additives; approved & Vegetables	l and properly stored;	Washing Fruits	
					To always check			•				Water	'.1'C11	11	
					Protection from Contamination	C 1		'				18. Toxic substances properl Stored on own shelf	y identified, stored an	d used	
	~				9. Food Separated & protected, prevented during preparation, storage, display, and tasting	g food						Wat	er/ Plumbing		
3					10. Food contact surfaces and Returnables; Clear	aned and					+	19. Water from approved sou backflow device	urce; Plumbing installe	ed; proper	
					Sanitized at 200 ppm/temperature lce n 11. Proper disposition of returned, previously se							City approved/ no 20. Approved Sewage/Waste	eed to replac	<u>e sprayer</u>	
		~			reconditioned Discarded	erved of		/				disposal	ewater Disposar Syster	in, proper	
		<u> </u>				tems (2 Points)			Req	uire	Cori	rective Action within 10 day	ys		L
O U T	I N	N O	N A	C O S	Demonstration of Knowledge/ Person	nel R	U T	N	N O	N A	C O S	Food Temperatu	re Control/ Identific	ation	R
Ŵ				· S	21. Person in charge present, demonstration of k and perform duties/ Certified Food Manager (CI							27. Proper cooling method us	sed; Equipment Adec	quate to	
L V V					and perform duties, certified 1 ood Manager (Ci	1 141)						Maintain Product Temperatu			
IW					1 22 Food Handler/ no unauthorized persons/ per	reonnel	V \	~				28 Proper Date Marking and			
	~				1 22. Food Handler/ no unauthorized persons/ person have ALL EMPLOYEES WITHIN 60 da			V				28. Proper Date Marking and Good	l disposition	od. Chamical/	
	•				1 22. Food Handler/ no unauthorized persons/ person have ALL EMPLOYEES WITHIN 60 da Safe Water, Recordkeeping and Food Pa Labeling			\ \ \					l disposition	ed; Chemical/	
					Safe Water, Recordkeeping and Food Pa Labeling 23. Hot and Cold Water available: adequate pres	nckage		\ \ \				Good 29. Thermometers provided, Thermal test strips	l disposition		
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Cris Hernandez	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly KirkpatrickRs	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: C north	Physical Address: North Goliad		ity/State: Rockwal	I	License/Permit # Pag FS 8975	e 2 of 2			
			TEMPERATURE OBSERVAT	IONS						
Item/Loc		Temp F	Item/Location	Temp F	Item/Locat		Temp			
Sundae. Cooler		35	Hot drawers		Wic					
Sc	oft serve unit	35	Chicken	181	Corny dogs 41					
Ur	nder counter	36	Burgers	179	Half/ half					
С	old top unit		Eggs	159	Lemo	n / lime for temp	36/3			
C	ut tomatoes	45/46	Fryer Drawer unit		,	Wif (HTT	14			
Cut le	ettuce / sliced Tom's	41/40	Corny dogs	154	Completely blocked					
Be	low hot dogs	40	Nuggets	153						
	<u> </u>		Upright freezer	3/10						
		OB	SERVATIONS AND CORRECTIV		NS					
Item Number	AN INSPECTION OF YOUR ES	TABLISHME	NT HAS BEEN MADE. YOUR ATTENT	ON IS DIRE	CTED TO TH	E CONDITIONS OBSERVED A	ND			
	Clean inside dumpster area									
	•		petter watch wind issues							
	Hot water at front hand									
	Sanitizer in buckets 2	00 ppm								
37			whipped topping on conden	sation tra	ay in sun	dae cooler				
32			ae cooler / make repairs to ι		-					
	Repair slide doors to i									
10	Clean ceiling inside ic	e machin	е							
39	Address any standing	water on	ice machine							
02	One pan of tomatoes	45 - shall	ow pan allOthers are 41 or I	ess in de	eper par	s to change these to	deepe			
40	Avoid using plastic ba	gs and s	onic foil inside drawers							
32	· ·		eded - badly coated and dif							
37	Major ice build up in u	pright fre	ezer to defrost and cover fo	ods unde	er just in o	case				
	Not using upright cool									
45	Keep an eye on ceiling									
37/47	Have Wif repaired as unit is completely blocked wirh ice build up / all foods are HTT but repair ASAP									
	Using Atkins thermo									
46	Need soap in women's restroom / repair toilet tank lid in Men's and provide hot water in both									
4.5	Hot water inside facility is 120 F									
45			grout /clean air vents							
33	Repair sprayer at thre	e compai	tment sink to allow to remov	e tape a	ına piastio	2				
Received	by:		Print:			Title: Person In Charge/ Owne	r			
(signature)	See abou	/e								
Inspected	d by:		Print:							
(signature)	Kellv Kírkho	utríck	\sqrt{RS}							
orm EH-06	J - 1	•				Samples: Y N # collect	ted			