

Additional followups  
\$50.00 fee

Retail Food Establishment Inspection Report  
City of Rockwall

- First aid kit
- Allergy policy/training
- Vomit clean up
- Employee health

Date: 05/008/2023	Time in: 9:49	Time out: 11:15	License/Permit # Fs 0003266	Food handlers All new	Food managers 3	Page <u>1</u> of <u>2</u>
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Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine	<input type="checkbox"/> 2-Follow Up	<input type="checkbox"/> 3-Complaint	<input type="checkbox"/> 4-Investigation	<input type="checkbox"/> 5-CO/Construction	<input type="checkbox"/> 6-Other	TOTAL/SCORE
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Establishment Name: Sonic #6072 hwy 276	Contact/Owner Name: Mike and Amy	* Number of Repeat Violations: _____	<b>18/82/B</b>
Physical Address: Hwy 276		Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- Watch  
Mark the appropriate points in the OUT box for each numbered item Mark  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						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Time and Temperature for Food Safety</b> (F = degrees Fahrenheit)						<b>Employee Health</b>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
3				<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>										
	<input checked="" type="checkbox"/>										
		<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>				
		<input checked="" type="checkbox"/>									
<b>Approved Source</b>						<b>Preventing Contamination by Hands</b>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>										
<b>Protection from Contamination</b>						<b>Highly Susceptible Populations</b>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
W	<input checked="" type="checkbox"/>										
		<input checked="" type="checkbox"/>									
	<input checked="" type="checkbox"/>										
						3					
						<input checked="" type="checkbox"/>					

**Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Demonstration of Knowledge/ Personnel</b>						<b>Food Temperature Control/ Identification</b>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
W	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
<b>Safe Water, Recordkeeping and Food Package Labeling</b>						<b>Permit Requirement, Prerequisite for Operation</b>					
	<input checked="" type="checkbox"/>					2					
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>					
<b>Conformance with Approved Procedures</b>						<b>Utensils, Equipment, and Vending</b>					
W	<input checked="" type="checkbox"/>					W					
						2					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					

**Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Prevention of Food Contamination</b>						<b>Food Identification</b>					
1						<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					<b>Physical Facilities</b>					
	<input checked="" type="checkbox"/>					1					
1						<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					1					
<b>Proper Use of Utensils</b>						<b>Other Violations</b>					
1						W					
1						1					

# Retail Food Establishment Inspection Report

## City of Rockwall

Received by: <b>Gilberto Acosta</b>	Print:	Title: Person In Charge/ Owner
Inspected by: <i>Kelly kirkpatrick RS</i> <small>(signature)</small>	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: <b>Sonic 6072</b>	Physical Address: <b>Hwy 276</b>	City/State: <b>Rockwall</b>	License/Permit # <b>Fs 0003266</b>	Page 2 of 2
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### TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
Fountainette cooler	36	Wic	29	Hot drawer	135
Water inside	38	Lemon	37	Upright freezer	16
Shake machine (turned off)	57	Cut tomatoes / corny dogs	36/37	Hamburger freezer	12
Product ( to discard)	49/50	Wif	4.7	Upright cooler	
Soft serve	50	Rollers surface	222	Hot dogs / hot dogs	38/38
Product	50	Drawers chicken / beef	167/157		
Steam table		Cold top tomatoes / lettuce	41/42		
Chili / gravy	165/191	Diced tom / grated cheese	45/46		

### 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 TEMPS TAKEN in F
34/44	Need to clean dumpster enclosure area
	Front area walk way to clean
	Need to post permit
	Hot water 126 F
45	Need to clean air vents where needed
w	Avoid using hand sink for utensils storage for dirty
42	Clean inside fountain cooler
37	To address condensation- catching with pan
42/02	Need to clean inside both soft serve / shake units and discard product in each as is 50 F
34	To address back door to close tightly make repairs also to drain
37	Watch condensation from pipes in wic behind condenser box / dripping onto plastic cover on onion rings
32	To address rusty shelving and back door
	Best to hang mops to allow to air dry
37	To address frost and rain drop and leak condensation in wif - damage to exterior of boxes to protect and Also bags inside
47/37	To address broken shelving in wif and floor storage
19	Air gap under ice machine appears to be too high and pipe fall and draining has been compromised to
19	Address to have air gap and proper fall at same time / removed wooden block and improved flow slightly
02	Temps inside cold top are 45/46 and on top rt side same ... to avoid storage of Tcs inside and limit items on rt upper to less than 4 hrs
42/45	General detailed cleaning inside coolers and inside drawer unit / under around and above all
39	Spatulas should be stored clean to avoid food from drying on them
37	Upright freezer heavy condensation to protect food under and repair door that is not closing tightly
37	To address heavy condensation in hamburger freezer
47	Avoid over filling hamburger unit as clean portion inside lid is rubbing on product - to clean lid every 4 hrs
	Sanitizer in buckets 200 ppm - good
19	Leak at three comp sink cold faucet
42	Need to clean shelving over rollers where thermo is stored and clean thermo box too

Received by: <b>See above</b> <small>(signature)</small>	Print:	Title: Person In Charge/ Owner
Inspected by: <i>Kelly kirkpatrick RS</i> <small>(signature)</small>	Print:	Samples: Y N # collected

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