Retail Food Establishment Inspection Report First aid kit Allergy policy Vomit clean up Employee health																	
Date: Time in: Time out: License/Permit # Est. Type Risk Category											2						
Purpose of Inspection: 1-Routine 2-Follow Up 3-Complaint								_	Inve:	stiga	atio	n	5-CO/Construction 6-Other TOTAL/SCOF	۶E			
	Establishment Name: Contact/Owner N Sonic Goliad							Name:					* Number of Repeat Violations: ✓ Number of Violations COS: 10/00				
	ysic 01				Rockwall, TX Pest control : Ecolab/1-24-2024	4		Hoc xpre		2023			e trap : ble/10-11-2023 Follow-up: Yes ☑ No □	A			
Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W - Watch											h						
Mark the appropriate points in the OUT box for each numbered item Mark ** a checkmark 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 Time and Temperature for Food Safety 0 I N N C U N 0 A 0						R	U N O A O Employee Health					Employee Health	R				
Т				S					T S 12. Management, food employees and conditional entropy in the second								
	~				2 Proper Cold Holding temperature(/1°E//45°E)				~		knowledge, responsibilities, and reporting 13. Proper use of restriction and exclusion; No discharge from						
3					2. Proper Cold Holding temperature(41°F/45°F)				~				eyes, nose, and mouth				
	~	3. Proper Hot Holding temperature(135°F)				Preventing Contamination by Han						Preventing Contamination by Hands					
		Image: White the second sec						~			14. Hands cleaned and properly washed/ Gloves used properly						
		5. Proper reheating procedure for hot holding (165°F in 2 Hours)							~				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)				
-	~				6. Time as a Public Health Control; procedures & records		Highly Susceptible Populat						Highly Susceptible Populations				
	Approved Source			Approved Source		16. Pasteurized foods u						16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required					
-	~				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction								Chemicals				
					8. Food Received at proper temperature								17. Food additives; approved and properly stored; Washing Fruits				
	~				check at receipt				~				& Vegetables water only				
					Protection from Contamination				~				18. Toxic substances properly identified, stored and used				
	~				9. Food Separated & protected, prevented during food preparation, storage, display, and tasting								Water/ Plumbing				
	~				10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature			W					19. Water from approved source; Plumbing installed; proper backflow device				
	~		11. Proper disposition of returned, previously served or reconditioned discarded						~				20. Approved Sewage/Wastewater Disposal System, proper disposal				
Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days 0 I N N C								rective Action within 10 days	R								
U T	N	0	A	0 S	O Demonstration of Knowledge/ Personnel S				N	0	A	O S	Food Temperature Control/ Identification				
	~				21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager/ Posted 3				~				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature				
	~	22 Food Handler/ no unauthorized persons/ personnel			ľ		~				28. Proper Date Marking and disposition						
	Safe Water, Recordkeeping and Food Package Labeling							~				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips probe					
_	23. Hot and Cold Water available; adequate pressure, safe										Permit Requirement, Prerequisite for Operation						
	~	24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled					~	~			30. Food Establishment Permit (Current/insp report sign posted) 12/31/2024						
	I	Conformance with Approved Procedures 25. Compliance with Variance, Specialized Process, and			ĺ						Utensils, Equipment, and Vending 31. Adequate handwashing facilities: Accessible and properly						
	•				HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions			2					supplied, used				
	Consumer Advisory					2					32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used						
	~				26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffet Plate)/ Allergen Label				~				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided				
0	T	N	N	С	Core Items (1 Point) Violations Require Corrective	e Actio	on l	Not	to E	xcee N	ed 9 N	0 Da C	ys or Next Inspection , Whichever Comes First	R			
U T	I N	0	A	o s	Prevention of Food Contamination	K		U T	I N	0	A	o s	Food Identification	A			
	~				34. No Evidence of Insect contamination, rodent/other animals				~				41.Original container labeling (Bulk Food)				
┡	~				35. Personal Cleanliness/eating, drinking or tobacco use36. Wiping Cloths; properly used and stored	+		_			_		Physical Facilities 42. Non-Food Contact surfaces clean				
┝	 				37. Environmental contamination	+	ŀ	1			_		43. Adequate ventilation and lighting; designated areas used				
┝	く く	_			38. Approved thawing method	+	ŀ	_	~ ~				44. Garbage and Refuse properly disposed; facilities maintained				
	•				Proper Use of Utensils			1	~				45. Physical facilities installed, maintained, and clean				
					39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used		-	' 1					46. Toilet Facilities; properly constructed, supplied, and clean	 			
W					dried, & handled/ In use utensils; properly used 40. Single-service & single-use articles; properly stored	+		I					47. Other Violations				
	~				and used				~								

Received by: (signature) Alex Garcia	Print: Alex Garcia	Title: Person In Charge/ Owner Manager
Inspected by: (signature) Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: c Goliad	Physical A 1001	S Goliad	City/State: Rockwa	III, TX	License/Permit # FOOD5055	Page <u>2</u> of <u>2</u>			
Item/Loc	ation	Temp F	TEMPERATURE OBSERVA Item/Location	TIONS Temp F	Item/Locat	ion	Temp F			
	r/whipped topping	41	cut lettuce on ice	-						
	Shake mix	40	sliced cheese	48-51						
stea	am wells/ chili	165	WIC/hot dogs	38						
	hot dogs	137-141	cheese	37						
che	ese in ice well	41	WIF ambient	-9						
hot ho	olding sliders/corndogs	172	reach in cooler/hot dogs	41						
	chicken	142	cheese	41						
cold w	vell/cut tomatoes on ice	38	reach in freezer							
Item			SERVATIONS AND CORRECT							
Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:									
31 W	Front hand sink equipped. Hot water at 96F. needs to have hot water available and at least 100F. to repair/will use back hand sink									
2	Need to clean shake machine nozzle/store clean/at least every 4 hours									
2	Sliced cheese in cold top/to cold hold at 41F or below/small amounts only to be used for less than 4 hours only Back hand sink 103F equipped									
	3 comp sink 112 F									
	Sani buckets at 200) ppm ai	lats							
W			r leaking under/to repa	r						
32	Probe thermo and test strips on site Door to RR to be replaced/ not cleanable/exposed wood									
46	Need door to RR to self close									
42	To clean shelves in WIC									
45										
45										
45	Some broken tiles,	basebo	ards, some missing gro	out						
	Hamburger freezer	not wor	king/not being used/Ha	mburger	s from V	VIF to grill				
	Gloves used for all	prep an	d ready to eat							
	Discussed needing line thermos									
Received (signature)			Print:			Title: Person In Charge/	Owner			
	Alex Garcia		Alex Ga	arcia		Manager				
Inspected (signature)	Alex Garcia I by: Chrísty Cov	tez, 1	RS Christy C	ortez,	RS	Samples: Y N #	collected			
Form EH-0	6 (Revised 09-2015)									