	Retail Food Establishment Inspection Report First aid kit Allergy policy 																	
	Vomit clean up Employee health																	
Date: Time in: Time out: License/Permit # 7/12/2024 2:20 3:18 FOOD505													Est. Type Risk Category Page <u>1</u> of <u>2</u>					
Purpose of Inspection: 1-Routine 2-Follow Up 3-Complaint									Inve	stiga	atio	n	5-CO/Construction 6-Other TOTAL/SCOR					
Establishment Name: Contact/Owner Name: Contact/Owner Name:													* Number of Repeat Violations:					
Physical Address: Pest control : 1001 S Goliad Rockwall, TX Ecolab/6-5-2024									od ex/1-2	2024			trap : Follow-up: Yes / 10/90//					
Compliance Status: Out = not in compliance IN = in compliance NO = not									/ed	pplicable $COS = corrected on site R = repeat violation W-Watch$								
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 X in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																		
Co O U	I N O A O I Inne and Temperature for Food Safety							Compliance StatusOINNCUNOAO		С	Employee Health							
Т	A O A S S (F = degrees Fahrenheit) I Proper cooling time and temperature							Т	~			S	12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
	-	2. Proper Cold Holding temperature(41°F/ 45°F)					-		- -			\vdash	13. Proper use of restriction and exclusion; No discharge from					
	~						_		eyes, nose, and mouth									
3	~				4. Proper cooking time and temperature		-						Preventing Contamination by Hands 14. Hands cleaned and properly washed/ Gloves used properly					
_					5. Proper reheating procedure for hot holding (165°F in 2 Hours)		F		י י				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)					
╞	ע ע	-			6. Time as a Public Health Control; procedures & records	+	ŀ		-				Highly Susceptible Populations					
_						\vdash							16. Pasteurized foods used; prohibited food not offered					
	Approved Source								~				Pasteurized eggs used when required pasteurized eggs only					
	~	7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Gordon's											Chemicals					
	1	8. Food Received at proper temperature							۲				17. Food additives; approved and properly stored; Washing Fruits & Vegetables					
					check at receipt Protection from Contamination		Ī	W				~	18. Toxic substances properly identified, stored and used					
	~		9. Food Separated & protected, prevented during food preparation, storage, display, and tasting						<u> </u>			Water/ Plumbing						
					10. Food contact surfaces and Returnables ; Cleaned and								19. Water from approved source; Plumbing installed; proper					
	~				Sanitized at <u>200</u> ppm/temperature 11. Proper disposition of returned, previously served or		-		~				backflow device 20. Approved Sewage/Wastewater Disposal System, proper					
	~				reconditioned				~				disposal					
O U	I	N O	N A	C	Priority Foundation Items (2 Po	oints) R) vio	0	ions I N	Req N O	Ν	С						
T	N	0	A	O S	Demonstration of Knowledge/ Personnel 21. Person in charge present, demonstration of knowledge,			U T		0	A	O S	Food Temperature Control/ Identification					
	~			and perform duties/ Certified Food Manager/ Posted					~				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature					
	•	22. Food Handler/ no unauthorized persons/ personnel			22. Food Handler/ no unauthorized persons/ personnel		-		~				28. Proper Date Marking and disposition29. Thermometers provided, accurate, and calibrated; Chemical/					
					Safe Water, Recordkeeping and Food Package Labeling				~				Thermal test strips digital					
~			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					
					Conformance with Approved Procedures								Utensils, Equipment, and Vending					
	~				25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions			2					31. Adequate handwashing facilities: Accessible and properly 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	J	N	N	С	Core Items (1 Point) Violations Require Corrective	R Acti	on I	Not O	D I N		ed 90 N) Da C	ys or Next Inspection , Whichever Comes First					
U T	N	0	A	o s	Prevention of Food Contamination			U T	N	0	A	o s	Food Identification					
1					34. No Evidence of Insect contamination, rodent/other animals35. Personal Cleanliness/eating, drinking or tobacco use				~				41.Original container labeling (Bulk Food)					
W					36. Wiping Cloths; properly used and stored								Physical Facilities 42. Non-Food Contact surfaces clean					
<u> </u>	くく				37. Environmental contamination			1	~				43. Adequate ventilation and lighting; designated areas used					
	۲ ۲	-			38. Approved thawing method				v v				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			·	~				46. Toilet Facilities; properly constructed, supplied, and clean					
╞					40. Single-service & single-use articles; properly stored								47. Other Violations					
	~				and used				~									

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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)

	nent Name: Drive In #2805 (S 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					
	rt cooler/creamer	41	corn dogs	156	Tichi Locut							
hot d	og roller/hot dogs	158-167	chicken breast on counte	r 102								
ste	am well/chile	178	reach in freezer ambient	8								
	queso	156	reach in cooler/corn dogs									
	top/cut lettuce	41	hot dogs	41								
CU	it tomatoes	41	WIF ambient	7								
hot ho	olding slider/chicken	156	WIC/hot dogs	41								
	chicken	158	tomatoes	10								
Item	OBSERVATIONS AND CORRECTIVE ACTIONS											
Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:											
31	Front hand sink needs to be 100F /need hand soap											
W	To store chemicals low and separate/ not on prep counters/COS											
45	Some missing grout/to repair											
	Line cold top/still not working but packing ice around pans of TCS foods/only small amounts and no extra underneath											
	Ice cream machine/not working/not being used											
3	Discarded chicken on counter/ didn't want to re-heat to 165+F/manager discarded											
	Hamburger freezer not working/being stored in WIF											
32	Rust and some mold around WIC doors											
45	To seal gaps/broken tiles around baseboards											
W	Avoid storing employee drinks over prep table in back											
32	Replace shelves above prep table/not cleanable with exposed wood that could contaminate food below											
	3 comp sink 110F Sani buckets at 200		late									
45			where gapping/to repa	ir								
45		-	helves and equipment/		od debr	is						
34	Dead roach in back			001110 10								
42	Some cleaning to equipment, in, around, and on											
	0		· · ·									
Received	by:		Print:			Title: Person In Charge/	Owner					
			Alex Ga	arcia		Manager						
Inspected (signature)	Alex Garcia ^{Thy:} Chrísty Cov	tez, 1	RS Christy C	ortez,	RS	Samples: Y N #	collected					
	6 (Revised 09-2015)	~	I				- Shoettu					