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

Dat		a/2	۰O	22	Time in: 8:59	Time ou <b>11:1</b>		FS 9							Food handlers Food managers Page 1 of	2
					tion: 1-Routine		low Up	3-Compla		_	Inves	tios	otion	, I	5-CO/Construction 6-Other TOTAL/SCO	)RE
Esta	abli	shme	nt l	Nam	ne:		Con	ntact/Owner	Name:		227 ( 0.0	8-			* Number of Repeat Violations:	7112
_	_	gniii al Ado			s breakfast kitcher	<u> </u>	Pest cont	win Good	iwin	Но	od		Gı	rease	Number of Violations COS: e trap: Follow-up: Yes 5/95/2	Α
		nt trai				13	Ecolab			Na				mble		
Mar					Status: Out = not in co points in the OUT box for	mpliance If each numb	N = in compli- pered item	ance N Mark	$\mathbf{O} = \text{not}$						plicable COS = corrected on site R = repeat violation W-Wat NA, COS Mark an In appropriate box for R	tch
										re In	nmedi	ate	Cor	recti	ive Action not to exceed 3 days	
О	Î		N	С	Time and Ten	nperature	for Food Sa	ıfetv	R	О		N	N	С		R
U T	N	0	A	o S	(F = d)	egrees Fah	renheit)			U T		0	A	o S	Employee Health	
					1. Proper cooling time a	and temper	rature								12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
		+			2. Proper Cold Holding	temperatu	re(41°F/ 45°	°F)		-					13. Proper use of restriction and exclusion; No discharge from	+
					See	. 1	`	,			~				eyes, nose, and mouth To post at hand sink	
					3. Proper Hot Holding t See	temperatur	e(135°F)								Preventing Contamination by Hands	
		/			4. Proper cooking time	and temper	rature				1				14. Hands cleaned and properly washed/ Gloves used properly	+
					5. Proper reheating prod	cedure for	hot holding (	(165°F in 2							Gloves  15. No bare hand contact with ready to eat foods or approved	+
		<b>/</b>			Hours)										alternate method properly followed (APPROVED Y. N. )	
					6. Time as a Public Hea All Tcs are 4?hrs or less	alth Contro on buffet	l; procedures	s & records							Highly Susceptible Populations	
															16. Pasteurized foods used; prohibited food not offered	
						proved So									Pasteurized eggs used when required	
					<ol><li>Food and ice obtaine good condition, safe, ar</li></ol>	nd unadulte									Ol-mitals	
					destruction Ben e K	<b>Ceith</b>	•								Chemicals	
					8. Food Received at pro	oper tempe	rature								17. Food additives; approved and properly stored; Washing Fruits	Т
∐'					To check						~				& Vegetables Veggie wash	
					Protection	from Cor	ntamination	l			<b>/</b>				18. Toxic substances properly identified, stored and used	
					<ol><li>Food Separated &amp; pr preparation, storage, dis</li></ol>			ng food							Water/ Plumbing	
					10. Food contact surfact Sanitized at _200_	es and Ret ppm/tempe	urnables ; Cl	leaned and )-100			/			-	19. Water from approved source; Plumbing installed; proper backflow device	
					11. Proper disposition of									1	City approved 20. Approved Sewage/Wastewater Disposal System, proper	+
			- 1		reconditioned										disposal	
0	ī	N	N	С	Pri	ority Fo	undation l	Items (2 Po				_			rective Action within 10 days	l p
O U T	I N	N O	N A	C O S	Pri Demonstration	·			oints) v	o U	I N	Req	uire N A	Cor C O S	•	R
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## **Retail Food Establishment Inspection Report**

## City of Rockwall

Received by: Latoya Daniel	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: g Hill suite kitchen	Physical A Lakefr	ddress: ront trail	City/State: Rockwall	License/Permit # FS 9378	Page <u>2</u> of <u>2</u>						
			TEMPERATURE OBSERVA	TIONS								
Item/Loca		Temp F	<u>Item/Location</u>	Temp F	Item/Location	Temp						
Hot ho	lding		Freezer unit	16/18								
,	Sandwich	161	Cooler 1	40.6								
;	Sandwich	139	Butter	41								
Butte	r / cream cheese	Tphc	Cooler 2	38								
Co	old well Tphc	_	Milk	41								
	Oat milk	45										
	Yogurt	37										
N	Milk carton	39										
-			SERVATIONS AND CORRECT	IVE ACTIONS								
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW: All temps F	TABLISHME	NT HAS BEEN MADE. YOUR ATTEN	TION IS DIRECT	TED TO THE CONDITIONS OBSE	ERVED AND						
		to propo	acked ata									
	Plans to change menu Hot water 134 watch	i to prepa	icked etc									
		wannad f	ior individual comica									
	Currently breads are w			haldina aaa	d tamana							
			n Chaffer dishes and are	nolaing goo	a temps							
	Ingredients are availab		•									
	•		is discarded less than 4 h	rs								
05./	Sanitizer in red bucket		•									
35 /cos			ems on table with fruit etc									
	Using gloves to touch											
20.1	Watch shelving inside											
	Dishmachine sanitizer		<u> </u>									
			d also in pipes from ice ma	achine and t	nree comp sink							
37	Best to eliminate stora	ge of car	dboard on floor									
	Using digital thermo											
	Three comp sink is available, equipped and may be used to wash dishes											
33/cos	Replaced chemical at Dishmachine and primed unit and Dishmachine found to be dispensing at 50-100 ppm											
_	Mop heads are replaced every three days											
37	Advised to eliminate floor storage of cardboard in back room											
	Anything stored in storage room is washed prior to using											
Received (signature)	by:		Print:		Title: Person In Charg	ge/ Owner						
	See abou	<u>'</u>										
Inspected (signature)	by:		Print:									
	Kelly kirkþa	vtrick	/ <b>K</b> S		Samples: Y N	# collected						