|   | 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 Page 1 of 2  |  |  |   |  |                     |  |          |           |   |   | _  |  |   |
|   |  |  |  |   | tion: 1-Routine 2-Follow Up 3-Compl  |                     |  | _        | Inve      | stiga   | atio  | n  | 5-CO/Construction 6-Other TOTAL/SCORE  | C |
|   |  | shm  |  |   | e: Contact/Owner   | Name                | :  |          |           |   |   |  | * Number of Repeat Violations:      ✓ Number of Violations COS:  |   |
| Physical Address: Pest control Hood Grease trap Follow-up: Yes 4/90/P |  |  |  |   |  |                     |  |          |           |   | e trap : Follow-up: Yes 4/96/A  |  |  |   |
|   |  |  |  |   |  |                     |  |          |           | pplicable $COS = corrected on site R = repeat violation W- Watch$ |   |  |  |   |
| Ma  | 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 |  |  |   |  |                     |  |          |           |   |   |  | _  |   |
| 0   | Compliance Status         Compliance Status           0         I         N         N         C         Time and Temperature for Food Safety         R         O         I         N         N         C   |  |  |   |  |                     |  |          |           |   |   | R  |  |   |
| U<br>T  | N  | 0  | A  | 0<br>S  | (F = degrees Fahrenheit)<br>1. Proper cooling time and temperature   |                     | T  |          |           |   |   | O<br>S   | Employee Health 12. Management, food employees and conditional employees;  |   |
|   | ~  |  |  |   |  |                     | knowledge, responsibilities, and reporting |          |           |   |   |  |  |   |
|   | ~  |  |  |   | 2. Proper Cold Holding temperature( $41^{\circ}F/45^{\circ}F$ )  |                     |  |          | ~         |   |   |  | 13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth                             |   |
|   |  | ~  |  |   | 3. Proper Hot Holding temperature(135°F)   |                     | ľ  |          |           |   |   |  | Preventing Contamination by Hands  |   |
|   | 4. Proper cooking time and temperature   |  |  | +   |  |                     | ~  |          |           |   | 14. Hands cleaned and properly washed/ Gloves used properly                           |  |  |   |
|   |  | ~  |  |   | 5. Proper reheating procedure for hot holding ( $165^{\circ}$ F in 2 Hours)  |                     | ľ  |          | ~         |   |   |  | 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 Populations   |   |
|   | •  |  |  |   | Ammond Samo  |                     |  |          |           |   |   | 16. Pasteurized foods used; prohibited food not offered            |  |   |
|   |  |  |  |   | Approved Source<br>7 Food and ice obtained from approved source: Food in   |                     | ī  |          |           |   |   |  | Pasteurized eggs used when required<br><b>NO raw eggs</b>  |   |
|   | ~  | destruction corporate  |  |   |  |                     |  |          |           |   |   | Chemicals  |  |   |
|   | ~  |  |  |   | 8. Food Received at proper temperature<br>check at receipt   |                     |  |          | ~         |   |   |  | 17. Food additives; approved and properly stored; Washing Fruits<br>& Vegetables                                 |   |
|   |  |  |  |   | Protection from Contamination  |                     |  |          | ~         |   |   |  | Water           18. Toxic substances properly identified, stored and used  |   |
|   | ~  |  |  |   | 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting  | П                   | Water/ Plumbing                            |          |           |   |   | Water/ Plumbing  |  |   |
|   | ~  |  |  |   | 10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature  |                     |  |          | ~         |   |   |  | 19. Water from approved source; Plumbing installed; proper<br>backflow device                                    |   |
|   | ~  | 11. Proper disposition of returned, previously served or reconditioned discarded |  |   |  |                     |  | ~        |           |   |   | 20. Approved Sewage/Wastewater Disposal System, proper<br>disposal |  |   |
| 0   | Priority Foundation Items (2 Po  |  |  | oints)  | ) vio  | olati<br>0          | ons<br>I                                   | Req<br>N | uire<br>N | Cor   |   | R  |  |   |
| U<br>T  | N  | N<br>O   | N<br>A   | C<br>O<br>S   | Demonstration of Knowledge/ Personnel  |                     |  | U<br>T   | N         | 0   | A   | o<br>s   | Food Temperature Control/ Identification   |   |
|   | ~  |  |  |   | 21. Person in charge present, demonstration of knowledge<br>and perform duties/ Certified Food Manager/ Posted<br>6                                      | ,                   |  |          | ~         |   |   |  | 27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature                               |   |
|   | ~  | 22 Food Handler/ no unauthorized persons/ personnel                              |  |   |  |                     | ~  |          |           |   | 28. Proper Date Marking and disposition   |  |  |   |
|   |  |  | Safe Water, Recordkeeping and Food Package<br>Labeling |   |  |                     | ~  |          |           |   | 29. Thermometers provided, accurate, and calibrated; Chemical/<br>Thermal test strips |  |  |   |
|   | ✓ 23. Hot and Cold Water ava   |  |  | 23. Hot and Cold Water available; adequate pressure, safe |  |                     |  |          |           |   |   | digital<br>Permit Requirement, Prerequisite for Operation          | Prerequisite for Operation   |   |
|   | ~  |  |  | -   | 24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled  | $\uparrow \uparrow$ |  |          | ~         |   |   |  | 30. Food Establishment Permit (Current/insp report sign posted)  |   |
|   | -  | Conformance with Approved Procedures   |  |   | ·  |                     | -  |          |           |   | 12/31/2024<br>Utensils, Equipment, and Vending  | _  |  |   |
|   | ~  |  |  |   | 25. Compliance with Variance, Specialized Process, and<br>HACCP plan; Variance obtained for specialized<br>processing methods; manufacturer instructions |                     |  |          | ~         |   |   |  | 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/<br>Service sink or curb cleaning facility provided      |   |
| 0   | Ι  | N  | N  | С   | Core Items (1 Point) Violations Require Correctiv  | e Actio<br>R        | on l                                       | 0        | Ι         | Ν   | Ν   | С  |  | R |
| U<br>T  | N  | 0  | A  | 0<br>S  | Prevention of Food Contamination 34. No Evidence of Insect contamination, rodent/other   |                     |  | U<br>T   | N         | 0   | A   | O<br>S   | Food Identification 41.Original container labeling (Bulk Food)   |   |
|   | ~  |  |  |   | animals<br>35. Personal Cleanliness/eating, drinking or tobacco use  | +                   |  |          | ~         |   |   |  |  |   |
| ⊢   | マ<br>マ   |  |  |   | 36. Wiping Cloths; properly used and stored  | +                   |  | 1        |           |   |   |  | Physical Facilities           42. Non-Food Contact surfaces clean  |   |
| $\vdash$  | v<br>v   |  |  |   | 37. Environmental contamination  | +                   | ŀ  | 1        | ~         |   |   |  | 43. Adequate ventilation and lighting; designated areas used   |   |
| ⊢   | ~  | 38 Approved thawing method   |  | +   | ŀ  | $\dashv$            | ~  |          |           |   | 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,                        |  | $\square$   |  | ╡                   | ~  |          |           |   | 46. Toilet Facilities; properly constructed, supplied, and clean                      |  |  |   |
| $\vdash$  | *  |  |  |   | 40. Single-service & single-use articles; properly stored  | ++                  |  | -        | -         |   |   |  | 47. Other Violations   |   |
| 1   | ~  |  |  |   | and used   |                     |  |          | •         |   |   |  |  |   |

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| Received by:<br>(signature) Kalee Farrell       | Print: Kalee Farrell      | Title: Person In Charge/ Owner<br>Manager |
|---|---------------------------|---|
| Inspected by:<br>(signature) Christy Cortez, RS | Print: Christy Cortez, RS | Business Email:                           |

Form EH-06 (Revised 09-2015)

|                          | nent Name:<br>cks Coffee #6259 (Ridge)   | Physical A<br>2779  | <sup>ddress:</sup><br>Ridge Rd | City/State:<br>Rockwall | , TX      | License/Permit #<br>FOOD5073 | Page <u>2</u> of <u>2</u> |  |  |  |
|--------------------------|--|---------------------|--------------------------------|-------------------------|-----------|------------------------------|---------------------------|--|--|--|
|                          |  |                     | TEMPERATURE OBSER              |                         |           |                              | 1                         |  |  |  |
| Item/Loc                 | ation  | Temp F              | Item/Location                  | Temp F 1                | tem/Locat | ion                          | Temp F                    |  |  |  |
| under                    | counter cooler/milk  | 41                  |                                |                         |           |                              |                           |  |  |  |
| under                    | counter cooler/milk  | 41                  |                                |                         |           |                              |                           |  |  |  |
| under                    | counter cooler/milk  | 40                  |                                |                         |           |                              |                           |  |  |  |
| under                    | counter thawing cooler   | 34                  |                                |                         |           |                              |                           |  |  |  |
| undei                    | counter RTE cooler   | 35                  |                                |                         |           |                              |                           |  |  |  |
| fror                     | nt RTD case  | 34                  |                                |                         |           |                              |                           |  |  |  |
| rea                      | ich in cooler  | 36                  |                                |                         |           |                              |                           |  |  |  |
| rea                      | ch in freezer  | 3                   |                                |                         |           |                              |                           |  |  |  |
|                          |  | OB                  | SERVATIONS AND CORRE           | CTIVE ACTIONS           |           |                              |                           |  |  |  |
| Item<br>Number           | AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND |                     |                                |                         |           |                              |                           |  |  |  |
|                          | Line hand sink 107F  | <sup>=</sup> equipp | bed                            |                         |           |                              |                           |  |  |  |
|                          | Sani bucket at 200p  | pm qua              | ts                             |                         |           |                              |                           |  |  |  |
| 42                       | Need to clean coun   | ters, pre           | ep areas, clean espre          | esso machine            | es        |                              |                           |  |  |  |
|                          |  |                     | longer/only used for nor       |                         |           | •                            |                           |  |  |  |
|                          |  |                     | nd shakers are cleane          |                         | r then    | WRS every 4 ho               | urs                       |  |  |  |
|                          | If allergen alert, usi   | ng all cl           | ean and sanitized bl           | enders, etc             |           |                              |                           |  |  |  |
|                          | Weekly cleaning of   | cold bre            | ew machine, sanitizir          | ng taps daily           |           |                              |                           |  |  |  |
| 32                       | Some exposed woo   | d on fro            | nt counter to be seal          | ed/to be ma             | de clea   | anable                       |                           |  |  |  |
| 45                       | To clean floor drains  | S                   |                                |                         |           |                              |                           |  |  |  |
|                          |  |                     | non TCS/all TCS in c           |                         |           |                              |                           |  |  |  |
|                          | Tongs used to handle   | sandwid             | ch or items to be heate        | d onto deli pa          | per the   | n handed to cust             | omer                      |  |  |  |
|                          | Sani used on milk frothers after every drink at 200ppm quats   |                     |                                |                         |           |                              |                           |  |  |  |
|                          | Back hand sink at 1  | 08F equipped        |                                |                         |           |                              |                           |  |  |  |
|                          | 3 comp sink 110+F  |                     |                                |                         |           |                              |                           |  |  |  |
|                          | Sani sink setup to 4   | 00ppm               | quats                          |                         |           |                              |                           |  |  |  |
|                          | Dishwasher sanitizing per Temp strips  |                     |                                |                         |           |                              |                           |  |  |  |
| 45                       | To clean floors and walls in back particularly near dishwasher   |                     |                                |                         |           |                              |                           |  |  |  |
| 42                       | To clean inside coolers, some food debris  |                     |                                |                         |           |                              |                           |  |  |  |
|                          |  |                     |                                |                         |           |                              |                           |  |  |  |
|                          |  |                     |                                |                         |           |                              |                           |  |  |  |
|                          |  |                     |                                |                         |           |                              |                           |  |  |  |
|                          |  |                     |                                |                         |           |                              |                           |  |  |  |
|                          |  |                     |                                |                         |           |                              |                           |  |  |  |
|                          |  |                     |                                |                         |           |                              |                           |  |  |  |
|                          |  |                     |                                |                         |           |                              |                           |  |  |  |
|                          |  |                     |                                |                         |           |                              |                           |  |  |  |
|                          |  |                     |                                |                         |           |                              |                           |  |  |  |
| Received                 | hu.  |                     | Drint.                         |                         |           | Title: Person In Charge/     | Ownor                     |  |  |  |
| (signature)              | 2  |                     | Kalee                          | Farrell                 |           | Manager                      | G WIIGI                   |  |  |  |
| Inspected<br>(signature) | Kalee Farrell<br><sup>Thy:</sup><br>Christy Cor  | to - A              | Print:<br>Christy              | Cortoz [                |           |                              |                           |  |  |  |
|                          |  | iez, f              | Chinsty                        | Cortez, F               | 13        | Samples: Y N #               | collected                 |  |  |  |