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

	Date: Time in: Time out: 08/05/2020 2:07 2:38			License/Permit # Fs 8030					Coffee Risk Category Low Page 1 of 2	<u>2</u>						
Purpose of Inspection: 1-Routine 2-Follow Up 3-Compla						_	Inves	tiga	tion		5-CO/Construction 6-Other TOTAL/SCOR	RE				
Establishment Name: Contact/Owner Name: Starbucks Kroger 575 Starbucks/							er Name:	* Number of Repeat Violations: ✓ Number of Violations COS:					* Number of Repeat Violations:	_		
Physical Address: Pest control:							Hoc	Hood Grease trap :			ease		4			
Ridge road Grocery Compliance Status: Out = not in compliance IN = in compliance NO								Na			Gro		<u> </u>			
Ma	ark t	Com the ap	ıplia ı oprop	riate	points in the OUT box for	each numbered in	item Ma	$NO = not$ ark $\sqrt{in ap}$	propria	ate bo	x for	IN, I	NO,	·	n	
Co	Priority Items (3 Points) violations Compliance Status								quire Immediate Corrective Action not to exceed 3 days Compliance Status							
O U	Time and Temperature for Food Safety				R	O U	O I N N C U N O A O		C O	Employee Health	R					
Т	(F = degrees Fahrenher) 1. Proper cooling time and temperature					•		T				S	12. Management, food employees and conditional employees;			
						(4107) 4507			~				knowledge, responsibilities, and reporting			
	2. Proper Cold Holding temperature(4					temperature(41	°F/ 45°F)			/				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth		
	3. Pro				3. Proper Hot Holding temperature(135°F) 4. Proper cooking time and temperature								Policy / temps when arriving Preventing Contamination by Hands 14. Hands cleaned and properly washed/ Gloves used properly			
												15. No bare hand contact with ready to eat foods or approved				
	5. Proper reheating procedure for hot holding (165°F in 2 Hours)					(alternate method properly followed (APPROVED Y N) Gloves and tongs - 2 hrs washing utensils						
					6. Time as a Public Health Control; procedures & records No self serve creamer									Highly Susceptible Populations		
		<u> </u>												16. Pasteurized foods used; prohibited food not offered		
						proved Source					•			Pasteurized eggs used when required Cooked		
	7. Food and ice obtained from approved source; Fo good condition, safe, and unadulterated; parasite										Chemicals					
	destruction															
	/				8. Food Received at pro At receiving	oper temperature	e					/		17. Food additives; approved and properly stored; Washing Fruits & Vegetables		
						ı from Contami	ination			•/				18. Toxic substances properly identified, stored and used		
	Protection from Contamination 9. Food Separated & protected, prevented during food									Stored low						
	preparation, storage, display, and tasting										Water/ Plumbing					
	10. Food contact surfaces and Returnables; Cleaned and Sanitized at 200 ppm/temperature					/				19. Water from approved source; Plumbing installed; proper backflow device City approved						
		/			11. Proper disposition of reconditioned Disc					/	20. Approved Sewage/Wastewater Disposal System, proper disposal			20. Approved Sewage/Wastewater Disposal System, proper		
														•		
	_				Dei	ority kounds	ation Itame (2	Dointe)	ialati	ional	Dags	uina 1	Car	meeting Action within 10 days		
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Michael Obrien	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Fetablish.	ment Name:	Physical A	ddress:		ity/State:	License/Permit #	Page 2 of 2				
	ucks Kroger 575	Ridge			Rockwall	FS 8030	Page 2 01 2				
			TEMPERATUR	E OBSERVAT							
Item/Loc		Temp F	Item/Location		Temp F Item/I	ocation	Temp I				
Coole	er	36									
2	door cooler	35/36									
Wh	nipped cream	41									
Sar	ndwich cooler	37 /36									
		OB	SERVATIONS AND	CORRECTIV	TE ACTIONS		1				
Item Number	AN INSPECTION OF YOUR ES	STABLISHME	NT HAS BEEN MADE.	YOUR ATTENTI	ON IS DIRECTED TO	O THE CONDITIONS OBSE	RVED AND				
	Clean under ice mach	ine / hein	a renaired while	on site							
	Tech on site to fix drai		g repaired wrille	OH Site							
	All precooked and reti		d when ordered								
	Hot water 111 great	lemmanze	a when ordered								
	_	m									
	Sink sanitizer -200 pp						_				
	Employees wearing m		000								
45	Using table turners fo		• • • • • • • • • • • • • • • • • • • •								
45	Clean under equipment and insides cabinets										
	Opened milk is used within 24 hrs or less - restocking twice a day										
	Ingredients by request for all foods etc										
- 10	Washing pitchers bety			ng on meni	ı.						
42	Clean inside coolers v										
	All pastries prepackag		•			, ,					
	Any hot food is remove				ced back into	another package					
	And additions are add	led in star	nd - no self's serv	vices							
			<u> </u>								
Received (signature)	See abov	/e	Print:			Title: Person In Charg	e/ Owner				
Inspected	l by:		Print:								
(signature)	See abou	atríck	\mathcal{RS}			Samples: Y N	# collected				