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 11/		7/20	20	Time in: 1:05	Time out: 1:57		S 88						Coffee Risk Category Low Page 1 of 2	2_
Pur	pose	e of In	spec	tion: 1-Routine	2-Follow U	Up 3-0	Complaint		4-In	ıvesti	gatio	n	5-CO/Construction 6-Other TOTAL/SCOR	RE
		hment cks 1		^{ne:} 28 Laguna		Contact/9	Owner Nan C ks	ne:					* Number of Repeat Violations: Viumber of Violations COS:	<u> </u>
Phys Lagu	ına	Addr			Ec	est control : colab 11/11/2	020	Na	-		Le	es 07	/2020 500 gals No	<u> </u>
Mark		omplia approp		points in the OUT box for		item	Mark 🗸 i		opriat	te box	for IN	I, NO	plicable $COS = corrected on site NA, COS $	h
Com	ıplia	nce Sta	itus	1110	Tity Items (3	o i omis) vi	ounons Ke	quire		neutu npliar			we Action not to exceed 5 days	
O U T	U N O A O S (F = degrees Fahrenheit)			F			I N	N A	o S	Employee Health	R			
	ı			1. Proper cooling time	and temperature	e			•	/			12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
3			/	2. Proper Cold Holding See / disacarded	g temperature(41 d and will co	1°F/ 45°F) orrect pro	ocess			/			13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
				3. Proper Hot Holding	temperature(135	5°F)		1					Screening employees at arrival Preventing Contamination by Hands	
	·	/		4. Proper cooking time	and temperature	e				/		П	14. Hands cleaned and properly washed/ Gloves used properly	
	·	/		5. Proper reheating pro Hours)	ocedure for hot h	olding (165°)	F in 2			v			15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)	
				6. Time as a Public He	alth Control; pro	ocedures & r	records	1					Tongs and tissues Highly Susceptible Populations	
				Ap	proved Source			l l					16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
				7. Food and ice obtaine			od in	┨┟					All precooked	
·				good condition, safe, a destruction	nd unadulterated	1; parasite							Chemicals	
·				8. Food Received at pr	oper temperature	e					/		17. Food additives; approved and properly stored; Washing Fruits & Vegetables Not prepping any produce	
				Protection	n from Contami	ination			•	/			18. Toxic substances properly identified, stored and used All stored low	
·	/			9. Food Separated & preparation, storage, di			od						Water/ Plumbing	
·	/			10. Food contact surfact Sanitized at 200	ces and Returnate ppm/temperature	bles ; Cleaned re 180	d and	1	•				19. Water from approved source; Plumbing installed; proper backflow device Watch air gap	
	·	/		11. Proper disposition reconditioned Disc	of returned, prev	viously served	d or			/			20. Approved Sewage/Wastewater Disposal System, proper disposal	
								s) viol	latio	ons Re	quir	e Coi	rective Action within 10 days	
		N N A	C O S	Demonstration	n of Knowledge	e/ Personnel	F			I N	N A		Food Temperature Control/ Identification	R
·				21. Person in charge prand perform duties/ Ce 4 plus					•	/			27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
·	/			22. Food Handler/ no u All employees	inauthorized per	rsons/ personi	nel		•	/			28. Proper Date Marking and disposition Good	
				Safe Water, Reco	ordkeeping and Labeling	Food Packa	ige		•	/			29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Good	
·	/			23. Hot and Cold Water Watch as is rea	ally hot	quate pressur	e, safe							
·									- 1				Permit Requirement, Prerequisite for Operation	
				destruction); Packaged	vailable (shellsto Food labeled	ock tags; para	asite			/			30. Food Establishment Permit (Current/ insp sign posted) Posted	
				destruction); Packaged	Food labeled with Approved	Procedures			·	/			30. Food Establishment Permit (Current/ insp sign posted) Posted Utensils, Equipment, and Vending	
				destruction); Packaged	with Approved Variance, Special e obtained for sp	Procedures lized Process, pecialized							30. Food Establishment Permit (Current/ insp sign posted) Posted	
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Retail Food Establishment Inspection Report

City of Rockwall

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

Form EH-06 (Revised 09-2015)

	ment Name: Ducks 13728	Physical // Lagur		City/State: Rockwa		ge <u>2</u> of <u>2</u>					
	pation	Temp F	TEMPERATURE OBSERVATION	Temp F	Item/Location	Temp					
	display and customer ss	тетрт		34	Upright fridge / freeze						
			Cafe fridge 2								
Sar	ndwich cooler		Whipped cream	41	2,door freezer	2					
Cr	eam cheese	40	Cold bar fridge	28	Upright cooler sandwiches	36/37					
Crea	amer on counter	54	Cold brew	40	Milk fridge	35/40					
Dri	ve thru fridge	32	Canister cold coffee	9 44							
	Cafe fridge	34	Drive thru juice	30							
	nipped cream	41	,								
		OI	 SERVATIONS AND CORRECTI	VE ACTIO	NS						
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:										
		iter in re	strooms 136F / same in nre								
		Be careful with hot water in restrooms 136F / same in prep Illergy posting on menu board now									
	Rinsing pitchers between										
42/45	 		and around equipment and	d cabinet	ts						
45	Clean debris under cal		and discarra equipment and								
	Sandwiches etc are rte and tether mixed only for immediate service										
	Avoid. Over stocking of										
			at and left out of refrigerator	at 54 F c	discarded						
	Test strips and using d										
	· · · · · · · · · · · · · · · · · · ·			el and qu	ats in prep area- both with Sars	s listing					
37	 		•		s addressed - major ice on ceiling						
42	Dust fan guards in coolers where needed										
	Checked Dishmachine										
	Watch air gap at ice machine - cos										
	3-1										
!!	Will correct practice of placing whipped cream out at room temps causing it to rise into the danger zone!										
Carte	Starbucks will be closing dining rooms starting tomorrow /										
Covid	Starbucks will be closi										
Received	l by:		Print:		Title: Person In Charge/ Owner	er					
(signature)	See abou	'e									
Inspected	d by:		Print:								
(signature)	Kelly Kirkpa	ıtrick	\mathcal{RS}		0 1 77 77 " "	-4- J					
	6 (Revised 09-2015)				Samples: Y N # collect	пеа					