	Retail Food Establishment Inspection Report ビ First aid kit ビ Allergy policy レ Vomit clean up Employee health															
Date: Time in: Time out: License/Pe 4/12/2022 3:00 4:00 FS-7							Est. Type Risk Category Page <u>1</u> of <u>2</u>									
4/12/2022 3.00 4.00 FS-7 Purpose of Inspection: ✓ 1-Routine 2-Follow Up 3-Complai						_		4-I	nves	stiga	tior	1	5-CO/Construction 6-Other TOTAL/SCORE			
Establishment Name: Contact/Owner N Steak N Shake											8			★ Number of Repeat Violations: ✓ Number of Violations COS:		
Physical Address: Pest control :								Hood Grease trap :				reas	Follow-up: Yes			
I-30 Rockwall, TX Ecolab/monthly Compliance Status: Out = not in compliance IN = in compliance NC						$\mathbf{O} = \mathbf{n}$	Aver US/3mo Southwaste/3mo No									
Compliance Status: Out = not in compliance In Compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation Watcl Mark the appropriate points in the OUT box for each numbered item Mark '*' a checkmark in appropriate box for IN, NO, NA, COS Mark and in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																
Compliance Status								R	uire	Co	mea mpli	ance	Sta	tus		
U T	I N	N O	N A	C O S	Time and Temperature for Food Safety (F = degrees Fahrenheit)						O U T	N N	N O	N A	C O S	Employee Health
	~				1. Proper cooling time and temperature							~				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting
					2. Proper Cold Holding temperature(41°F/ 45°F)					F						13. Proper use of restriction and exclusion; No discharge from
	~											~				eyes, nose, and mouth
	~				3. Proper Hot Holding temperature(135°F)					_		Preventing Contamination by Hands				
	~		4. Proper cooking time and temperature					(50E in 0		_						14. Hands cleaned and properly washed/ Gloves used properly
		~			5. Proper reheating proc Hours)	65°F in 2				alternate method properly follow				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)		
⊢	Image: Constraint of the state of						$\left \right $	F						Highly Susceptible Populations		
			i	1	A	nroved Source				ŀ		~	16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required			
	Approved Source								eggs cooked							
	~				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Sygma								Chemicals			
-		8. Food Received at proper temperature													17. Food additives; approved and properly stored; Washing Fruits	
	~									ŀ		~				& Vegetables water only 18. Toxic substances properly identified, stored and used
	Protection from Contamination 9. Food Separated & protected, prevented during food								3							
	~				preparation, storage, display, and tasting								Water/ Plumbing			
W					10. Food contact surfaces and Returnables ; Cleaned and Sanitized at ppm/temperature							~				19. Water from approved source; Plumbing installed; proper backflow device
	~				11. Proper disposition of returned, previously served or reconditioned discarded							~				20. Approved Sewage/Wastewater Disposal System, proper disposal
0	Ι	N	N	С	Priority Foundation Items (2 Po				ints) R) vio	lati 0	ons I	Req1	uire N	Cor	rrective Action within 10 days
U T	N	0	A	O S	Demonstration of Knowledge/Personnel						U T	N	0	A	O S	Food Temperature Control/ Identification
	~				21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager/ Posted 2							~				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 Labeling									~				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips digital		
	~	23. Hot and Cold Water available; adequate pressure, safe						Permit Requirement, Prerequisite for Opera								
	~				24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled							~				30. Food Establishment Permit (Current/insp report sign posted)
					Conformance with Approved Procedures											12/31/2022 Utensils, Equipment, and Vending
	~				25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions							~				31. Adequate handwashing facilities: Accessible and properly supplied, used
					Cons	sumer Advisory						~				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used
	~				26. Posting of Consume foods (Disclosure/Remi meats to require	inder/Buffet Plate					2					33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided
Core Items (1 Point) Violations Require Corrective								ion Not to Exceed 90 Days or Next Inspection , Whichever Comes Firs								
O U T	I N	N O	N A	C O S	Prevention of	of Food Contam	ination		R		O U T	I N	N O	N A	C O S	Food Identification R
	~				34. No Evidence of Inse animals		,					~				41.Original container labeling (Bulk Food)
1					35. Personal Cleanlines		-	acco use								Physical Facilities
	~				36. Wiping Cloths; prop		ored				1					42. Non-Food Contact surfaces clean
W					37. Environmental conta					[1					43. Adequate ventilation and lighting; designated areas used
38. Approved thawing method									~				44. Garbage and Refuse properly disposed; facilities maintained			
Proper Use of Utensils							1					45. Physical facilities installed, maintained, and clean				
1					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 & sin and used	ngle-use articles;	properl	y stored				~				47. Other Violations

Retail Food Establishment Inspection Report

1st followup is free. Any additional followups will result in \$50 fee.

Received by: (signature) Ashmond Jackson	Ashmond Jackson	Title: Person In Charge/ Owner Manager
Inspected by: (signature) Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: Steak N Shake	Physical A	ddress:	City/State:		License/Permit # Page		2							
	100	TEMPERATURE OBSERVA		,	101011									
Item/Location	Temp F	Item/Location	Temp F	Item/Locat	ion	Ten	np F							
Hamburger cooler/cheese	41	cheese dispenser/ambien	144	cooked onions		s 3	57							
hamburger	41	reach in freezer ambien	t 4		hot dogs									
under/hamburger	41	reach in freezer ambien	t -6		pasta		9							
cold top/cut tomatoes	39	cooked hamburge	r 181	181WIF ambient			7							
pasta	40	whipped topping mi	× 38 g		rill ambient		30							
hot wells/chili/onions	178/169	under counter cooler/ambien	^t 39	39 to go hot holding reach in/ambie		ent 15	55							
under counter cooler/creamer	41	ice cream machine miz	× 39											
drawers/chili	41	WIC/raw hamburger	35											
OBSERVATIONS AND CORRECTIVE ACTIONS														
Item AN INSPECTION OF YOUR ES' Number NOTED BELOW:	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:													
Front hand sink 100	Front hand sink 100+F													
Back hand sink 100	Back hand sink 100+F. Post employee health poster at employee hand sink													
Cooling chili in ice s	Cooling chili in ice slurry baths in metal pans. Good method													
18 Sani bucket well ov	er 200 p	opm quats. COS												
45 Clean floors/some f	ood deb	oris/missing grout												
45/42 Clean in/around/on	equipm	ent												
		storage room to see to	clean											
	Condensation in WIF. Protect foods under Dishwasher hand sink 100 F													
3 comp sink 122 F		•												
	3 3 comp sani sink setup to 1500 ppm quats. COS. Need to have calibrated at 3 comp sink to dispense at 150 to 400 ppm quats.													
	ng used as is not working.													
		les at least every 4 hou	ire											
All meats to require			113											
35 Store employee drir														
		ow and separate												
						~								
Received by: (signature) Ashmond Jackson	И	Ashmonc	Jacks	son	Title: Person In Charge/	-								
Inspected by:	•	Print:			managor									
(signature) Ashmond Jackson (signature) (signature) Christy Cor	tez, î	RS Christy C	ortez,	RS	Samples: Y N #	collected								