required after 1st Retail Food Establishment Inspection Report Followup City of Rockwall Image: City of Rockwall Image: City of Rockwall								First aid k Allergy po Vomit clea Employee	olicy/traini n up	ng								
Dat 1		14	1/2	21	Time in: 9:55	Time out: 11:22	License/Pe			ed	to	p	005	st Lim		Med	Page $\underline{1}$ of	2
Pu	pos	se of	f Ins	spec	tion: 🖌 1-Routine	2-Follow Up	3-Complai	int	_	Inve				5-CO/Construction	n	6-Other	TOTAL/SCO	RE
				Nan OW8		Con Ash	tact/Owner N	Name:						★ Number of Repeat✓ Number of Violat	t Viola ions C	tions: OS:	10/01	/D
Phy I-30		ıl A	ddre	ess:		Pest cont Ecolab - te			Ho Na	od			reas	e trap :		Follow-up: Yes 🖌 No 🗌	19/81/	D
					Status: Out = not in con	mpliance IN = in complia	ance NO	$\mathbf{O} = \mathrm{not}$						plicable COS = correct			lation W-Wat	ch
Mai	Mark the appropriate points in the OUT box for each numbered item Mark √ in appropriate box for IN, NO, NA, COS Mark an √ in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																	
O U	I N N C N O A O Time and Temperature for Food Safety					R	O U	Ν	lianco N O	Ν	C O	Employee Health						
Т		~	Image: Solution of the second system (F = degrees Fahrenheit) Image: Solution of the second system 1. Proper cooling time and temperature Discuss cooling down					т М				S	12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
3		2. Proper Cold Holding temperature(41°F/ 45°F)										Need policy / poster at hand sink now 13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth						
	_	3 Proper Hot Holding temperature(135°F)					_	•				See above / emailed poster / remodel lost fo						
3		3. Proper Hot Holding temperature(135°F) See 4. Proper cooking time and temperature					Preventing Contamination by Hands											
\vdash		ν			5. Proper reheating proc	cedure for hot holding (165°F in 2			~				Gloves 15. No bare hand contact		-		-
					Hours) Unknowr	n temp				~				alternate method properly followed (APPROVED Y_ N_				
w		~			6. Time as a Public Health Control; procedures & records To use today for cold top unit for meat					Highly Susceptible Popula					ptible Populations			
					Apj	proved Source				~				16. Pasteurized foods us Pasteurized eggs used w Precooked			fered	
		7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction																
					8. Food Received at pro Checking	oper temperature				~				17. Food additives; app & Vegetables Water only	roved a	and properly stored;	Washing Fruits	
					Protection	from Contamination			W	~			~	18. Toxic substances pro Watch	operly	identified, stored an	d used	
					9. Food Separated & propreparation, storage, dis		ng food				<u> </u>	<u></u>			Wate	r/ Plumbing		
3					10. Food contact surface Sanitized at <u>150</u>	ppm/temperature See	knife unit		3					19. Water from approve backflow device See front soda	a sta	ation		
		~			11. Proper disposition or reconditioned Disc	of returned, previously s arded	served or			~				20. Approved Sewage/V disposal	Wastev	vater Disposal System	n, proper	
0	I	N	N	С	Prie	ority Foundation l	tems (2 Po	ints) v R	<i>iolat</i> 0	I	Req N O		c Cor	rrective Action within 10	0 days			R
O U T	N	0	A	O S	Demonstration 21. Person in charge pro	1 of Knowledge/ Perso			U T		0	A	O S	Food Tempe	eratur	e Control/ Identific	ation	
					and perform duties/ Cer 1 on duty	rtified Food Manager (C	CFM)			~				27. Proper cooling meth Maintain Product Temp	erature	See meat cold	quate to dTop	
					22. Food Handler/ no un Working on all new	nauthorized persons/ pe	ersonnel			1				28. Proper Date Markin	0			
					Safe Water, Recon	rdkeeping and Food P Labeling	ackage			~				29. Thermometers provi Thermal test strips Digital	ided, a	ccurate, and calibrat	ed; Chemical/	
					23. Hot and Cold Water Good									•	<i>,</i>	Prerequisite for O	-	
					24. Required records av destruction); Packaged Per order		; parasite		w	~				30. Food Establishmen Need	nt Peri	nit (Current/ insp si	ign posted)	
					Conformance v 25. Compliance with Va	with Approved Proced							1	Utensils 31. Adequate handwash		pment, and Vendin		
w					HACCP plan; Variance processing methods; ma	e obtained for specialize	d			~				supplied, used Equipped	C			
					Cons	sumer Advisory			2					32. Food and Non-food designed, constructed, a See cutting bo	and use	d	, properly	
					26. Posting of Consume foods (Disclosure/Remi By request					~		<u> </u>		33. Warewashing Facili Service sink or curb clear Set up sanl	ties; in	stalled, maintained,	used/	
	T T	λ ^τ	Ъ.T.	C	Core Items (1 Poin	nt) Violations Requir	e Corrective	Action R	Not					ys or Next Inspection,	Whicl	never Comes First		R
O U T	I N	N O	N A	C O S	Prevention of 34. No Evidence of Inse	of Food Contaminatio		K	U U T	N	N O	N A	C O S	I 41.Original container la		dentification (Bulk Food)		ĸ
					animals Watch 35. Personal Cleanlines	,		$\left - \right $			~			-	-			
W					<u>Watch place</u> <u>36. Wiping Cloths; prop</u>	ment	450	$\left - \right $	-	_				42. Non-Food Contact s	•	s clean		
H					37. Environmental cont	t		$\left - \right $	1					43. Adequate ventilation			ureas used	
1					See			$\left - \right $						Watch in wic 44. Garbage and Refuse				_
					38. Approved thawing r Cooler					~				45. Physical facilities in				
	-				Prope 39. Utensils, equipment	er Use of Utensils t, & linens; properly use	ed, stored.		1	<u> </u>	<u> </u>		$\left - \right $	46. Toilet Facilities; pro		, ,		-
1					dried, & handled/ In us See	se utensils; properly use	d			~				47. Other Violations	r y '		,	
1					and used See	-ore use underes, proper					~							

Retail Food Establishment Inspection Report

City of Rockwall

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

Form EH-06 (Revised 09-2015)

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	nent Name: ay walmart	Physical A	ddress:	City/State: Rockwal	I	License/Permit #	Page	<u>2</u> of <u>2</u>			
	<u></u>	1.00	TEMPERATURE OBSERVA		·						
Item/Loc	ation	Temp F	Item/Location	Temp F	Item/Location			Temp F			
Sandw	vich back up on line		Meat cold top		Wic			34/42			
	Eggs	39	Turkey	45-48	C	Cold cuts		38			
Co	ld top veggie		Tuna	45	5 Tomatoes wh			38			
Tomate	pes (off and on trays)	40-48	Mozz cheese	45	Slice	ed tomatoe	S	40			
(Cut lettuce	41	Beef	45		Wif		5/6			
1	Milk cooler	38	Cold cut	45							
			Hot holding	98-101							
OBSERVATIONS AND CORRECTIVE ACTIONS											
Item Number	AN INSPECTION OF TOOR ESTABLISHMENT THAS BEEN MADE. TOOR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND										
	Hot water at 132 F at hand sink										
40	Watch items on microwave under soap										
	Avoid using paper under bowls and lids unless you are disposing daily										
W	Avoid placing anything into hand sink - no dirty utensils										
40	Need to move storage of condiments etc from under front hand sink										
07	Store peroxide cleaner (not listed for food contact) away from food contact										
37	SmallAmount of condensation beginning to accumulate under oven in back up cooler										
32	Nightly washing tongs or when contaminated for cookies / drawers too / ingredients by request										
02	TimeTo sand cutting boards Tomatoes are borderline on plastic tray in cold top unit for veggies										
02	Temps on meat side are consistently 445 F - to use tphc until unit is repaired										
03				s ove	er 2 hrs						
!!											
	Turned steam table or	n at insp t	to heat up								
10	Need to set up sanitizer for front prep area										
19	Need to repair leak at soda station plumbing - sent pic to plumbing insp										
	Watch bug light near t	ea conta	iners								
	Date marking looks go	od with r	new stickers								
			r air flow in the wic with the	e large me	tal cabine	et					
32	Address rusty shelving	·									
39	Reminder that shelving	•									
42/45		<u> </u>	r behind and around equip								
27/20	Sanitizer at three compartment sink - 150-200 ppm quats										
45/39/	Eliminate floor storage and hang mop to dry										
45/39/											
45 10/COS	5 5										
	W Need to add health policy to paperwork upon conditional offer of employment										
Received (signature)	by:	2 1	Print:			Fitle: Person In Charge/	Owner				
Inspected (signature)	See abov Kelly Kirkpo	ıtríck	RS Print:			Samples: Y N #	collecte	ed			
							_				