

\$50.00 reinspection fee
required after 1st Followup

Retail Food Establishment Inspection Report

City of Rockwall

- First aid kit
- Allergy policy/training
- Vomit clean up
- Employee health

Date: 07/16/2021	Time in: 8:04	Time out: 11:24	License/Permit # FS 6215	Est. Type Coffee	Risk Category Low	Page <u>1</u> of <u>2</u>
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Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine	<input type="checkbox"/> 2-Follow Up	<input type="checkbox"/> 3-Complaint	<input type="checkbox"/> 4-Investigation	<input type="checkbox"/> 5-CO/Construction	<input type="checkbox"/> 6-Other	TOTAL/SCORE
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Establishment Name: TA Starbucks	Contact/Owner Name: TA	* Number of Repeat Violations: _____	13/87/B
Physical Address: I-30	Pest control : Ecolab 07/06/21	Grease trap : See BK	

Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- Watch
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

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Time and Temperature for Food Safety (F = degrees Fahrenheit)						Employee Health					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
3				<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>									
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
		<input checked="" type="checkbox"/>									
		<input checked="" type="checkbox"/>									
Approved Source									<input checked="" type="checkbox"/>		
	<input checked="" type="checkbox"/>					Chemicals					
	<input checked="" type="checkbox"/>										
Protection from Contamination						3					
	<input checked="" type="checkbox"/>					Water/ Plumbing					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
						<input checked="" type="checkbox"/>					

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Demonstration of Knowledge/ Personnel						Food Temperature Control/ Identification					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
Safe Water, Recordkeeping and Food Package Labeling						<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>					Permit Requirement, Prerequisite for Operation					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
Conformance with Approved Procedures						Utensils, Equipment, and Vending					
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
Consumer Advisory						W					
	<input checked="" type="checkbox"/>					2					

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
Prevention of Food Contamination						Food Identification					
1						<input checked="" type="checkbox"/>					
1						Physical Facilities					
	<input checked="" type="checkbox"/>					1					
		<input checked="" type="checkbox"/>				W					
		<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>					
Proper Use of Utensils						1					
	<input checked="" type="checkbox"/>					1					
	<input checked="" type="checkbox"/>										

Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Martessia Davis	Print:	Title: Person In Charge/ Owner Burger King GM
Inspected by: (signature) <i>Kelly Kirkpatrick RS</i>	Print:	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: TA	Physical Address: I-30	City/State: Rockwall	License/Permit # FS 6215	Page 2 of 2
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TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
Wic	36-38	Bar 1 cooler	36/37		
Milks	36	Whipped cream	51		
Wif	-4	Cold Bar 1	31		
2 door milk cooler		Sandwich cooler	35		
38/39					
Upright freezer	12/13				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Observation/Action
	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: all temps F
	General cleaning inside wic / floor fans / avoid storing anything under pump under fan box
	Frost into Wif around door and inside as well to address
	Watch boxes in wif
45	Clean under ice machine and around and eliminate clutter in this room
47	Eliminate floor storage of any card board etc
45	Clean drains where needed / protect with cover
47	Address clutter in back room
	Replace food containers when needed - reminder
W	Avoid over stocking back 2 door unit especially on the top shelf under the fans
W	Shelves are beginning to peel back again and expose rusty metal
33/18/	Sink flow to address as both sides appear to have clean/ or dirty and employee drink on rt side / chemicals on both drain boards
18	Fly spray on clean dish side of drain board on three compartment sink
18	This does NOT appear to be safe for use around food services therefore should be removed
	Sanitizer in three comp sink 200 ppm quats
35	Watch placement of employee drinks et.
	Allergy posting on wall and also on menu board /
45	Clear up mop sink area
	Front area - using Burger King hand sink
	Sanitizer in bucket 200 ppm / none detected in wiping cloth container for Capp machine wand - time for replacing
02	Must keep whipped cream in cooler at correct temp or use tphc wirh labels etc if using (tossed 51 F one)
	Avoid over stocking coolers
	Using ongs or gloves for pastries
	All sandwiches are precooked and rethermalized when ordered
34	Flies observed
42/45	Minor cleaning under counters and cabinets etc
W	Watch fan guards inside coolers
	Hot water 110 plus

Received by: (signature) See above	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) <i>Kelly kirkpatrick RS</i>	Print:	Samples: Y N # collected

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