

**\$50.00 fee for 2nd Followup if needed**

**Retail Food Establishment Inspection Report**  
**City of Rockwall**

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

Date: <b>07/22/2022</b>	Time in: <b>7:08</b>	Time out: <b>10:48</b>	License/Permit # <b>FS 6215</b>	Food handlers <b>?</b>	Food managers <b>0</b>	Page <u>1</u> of <u>2</u>
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<b>Purpose of Inspection:</b> <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							<b>TOTAL/SCORE</b>
Establishment Name: <b>TA STARBUCKS</b>			Contact/Owner Name: <b>Starbucks / TA</b>		* Number of Repeat Violations: _____		<b>20/80/B</b>
Physical Address: <b>I-30</b>			Pest control : Need info		Grease trap/ waste oil Need		
Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>							

**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
<b>Time and Temperature for Food Safety</b> (F = degrees Fahrenheit)						<b>Employee Health</b>					
		<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"/>				
	<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"/>					
<b>3</b>						<b>3</b>					
						<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
<b>Demonstration of Knowledge/ Personnel</b>						<b>Food Temperature Control/ Identification</b>					
<b>2</b>						<input checked="" type="checkbox"/>					
<input checked="" type="checkbox"/>											
						<input checked="" type="checkbox"/>					
	<input checked="" type="checkbox"/>										
	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>					
						<b>2</b>				<input checked="" type="checkbox"/>	
	<input checked="" type="checkbox"/>					<b>2</b>					
						<input checked="" type="checkbox"/>					

**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
<b>Prevention of Food Contamination</b>						<b>Food Identification</b>					
<b>1</b>						<input checked="" type="checkbox"/>					
<b>1</b>											
<b>1</b>						<input checked="" type="checkbox"/>					
						<input checked="" type="checkbox"/>					
						<b>1</b>					
<b>1</b>						<b>1</b>					
	<input checked="" type="checkbox"/>										

# Retail Food Establishment Inspection Report

## City of Rockwall

Received by: (signature) <b>Aric Hopkins</b>	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) <i>Kelly Kirkpatrick RS</i>	Print:	Business Email:

Form EH-06 (Revised 09-2015)

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

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
Wic		2 door cooler	36/37		
38/39/40		Whipped cream	39		
Wif	4.9	Cold station	40		
Upright freezer	11	Whipped cream	40		
2 door cooler	40.9				
Butter chip	42				
Sandwich unit	36/37				

### 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:
	Hot water at shared hand sink 100 -
39	When dropping anything on the floor that is used for prep to always take to sink w/ wash
10	Need to clean inside ice machine - slime on deflector panel and also clean drain pipe
19	To provide air gap at ice machine drain
42/45	General detailed cleaning needed under shelving and on shelving in dry storage
	Wic Watch placing of milk under fan box and pipes etc — watch for condensation
42/45	Minor cleaning needed under milk crates and fan guards and ceiling etc in wic
37	Avoid stacking food boxes too high in wif and also address ice / leak that has frozen on boxes under pipes in wif
	Need to clean floor in wif as well
31/cos	Hot water at three comp 110 BUT hand sink only 85 sooo must use hand sink less than 10 feet away instead
36	Sink sanitizer - 200ppm / sanitizer in container for espresso Wands 200 ppm / red bucket has more towels than sanitizer - reading is off
31/18	Slow draining hand sink / and need hot water addressed
32	Need to replace scrub brushes etc those w/ badly worn etc / watch and address shelving inside cooler too
39	Best to hang mop to allow to dry
37	Avoid floor storage of baskets and boxes that impede cleaning floor
	Watch boxes in freezer that prevent gaskets from sealing
W	Upright cooler in back room holding borderline temps see above
42/35?	Need to clean inside this unit and organize to store employee food below facility food
	All sandwiches are precooked and rethermalized before serving
W	Watch use of peroxide product as not approved for food contact
	All creamers etc are added by staff - no self service
32/45	Maint to cabinets and counters and cabinets interiors etc
42/45	Need to clean under behind and around equipment etc
W	Reminder to keep labels on creamers etc - these are stored in coolers
35	Avoid storing personal aprons on oven etc
32/45?	Need to make repairs to broken doors on cabinets etc
45/34	Much debris under cabinets on floor to address / fruit flies around drains

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

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