\$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
Employee health

D:		)1/	20	21	Time in: 11:13	Time out: 12:02		icense/Per		58	}				Est. Type	Risk Category  Med	Page 1 of	
					tion: 1-Routine	2-Follow U		Complain		_		stiga	tion		5-CO/Construction	6-Other	TOTAL/SCO	ORE
Es	stabl	ishn	nent i	Nan	ne:			Owner Na							* Number of Repeat Viola ✓ Number of Violations C	tions:		
	nysic			ess:			est control : olgb 05/12/2			Hoo Due		021	Gre	ease		Follow-up: Yes 🗸	12/88	/B
		Con	ıpliaı	nce S	Status: Out = not in co	ompliance IN = in	compliance	NO	= not o						plicable COS = corrected on s	site <b>R</b> = repeat violation	lation W-War	tch
									_	re Im	med	iate	Corr	ecti	ive Action not to exceed 3 day	- 11 1	ate box for K	
O U	U N O A O Time and Temperature for Food Safety			R	O U	ompli I N			C O	Employee Health			R					
Т				S	1. Proper cooling time		*			T				S	12. Management, food employ	yees and conditional	employees;	
		•				(41)	00/4500				~				knowledge, responsibilities, ar			
3				~	2. Proper Cold Holding Sourcream 4	4/46 - mo	ved to	wic			~				13. Proper use of restriction ar eyes, nose, and mouth At arrival / screening	nd exclusion; No disc	charge from	
	~				3. Proper Hot Holding See attached	temperature(135	5°F)								-	ntamination by Han	ıds	
		<b>/</b>			4. Proper cooking time	and temperature	e				~				14. Hands cleaned and proper	rly washed/ Gloves u	sed properly	
		/			5. Proper reheating pro Hours)	cedure for hot ho	olding (165°	F in 2			/				15. No bare hand contact with alternate method properly follows:			
		<b>✓</b>			6. Time as a Public Heal Nothing official	alth Control; pro	ocedures & r	records							Gloves Highly Susce	eptible Populations		
					5	proved Source							T		16. Pasteurized foods used; pr Pasteurized eggs used when re	rohibited food not off	fered	
	I				7. Food and ice obtaine	•	d source: Foo	od in							r asieurized eggs used when re	equireu		_
	•				good condition, safe, and destruction Mclane	nd unadulterated	; parasite									hemicals		
	~				8. Food Received at pro Checking	oper temperature	2				/				17. Food additives; approved a & Vegetables	and properly stored;	Washing Fruits	
	J				Protection	n from Contami	ination			W	/				Precut  18. Toxic substances properly Watch	identified, stored and	d used	
	~				9. Food Separated & preparation, storage, di			ood								r/ Plumbing		
W	/				10. Food contact surfact Sanitized at 200	ces and Returnab ppm/temperatur	oles; Cleaned Te Watch cle	d and eaning		3				1	19. Water from approved sour backflow device Air gap under bev	erage statio	n	
		/			11. Proper disposition of reconditioned Disc			d or			~				20. Approved Sewage/Wastew disposal Watch	vater Disposal Syster	m, proper	
L				_					_									
0	I	N	N A	C				s (2 Poir	nts) vi	0	I	N	N	C	rective Action within 10 days		ation	R
O U T	N	N O	N A	C O S	Demonstration 21. Person in charge pr	n of Knowledge/ resent, demonstra	/ Personnel	wledge,	_			_	N A		Food Temperatur  27. Proper cooling method use	ee Control/ Identificated; Equipment Adec		R
	N			0	Demonstration 21. Person in charge pr and perform duties/ Ce 3 22. Food Handler/ no u	n of Knowledge/ resent, demonstra rtified Food Man	/ Personnel ation of knownager (CFM)	wledge,	_	O U	I	N	N A	C O	Food Temperatur	re Control/ Identificated; Equipment Adec		R
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## Retail Food Establishment Inspection Report

## City of Rockwall

Received by: (signature) Jayneisha Lopez	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: Bell 18722	Physical A Ridge	I _	ity/State: Rockwal		e <u>2</u> of <u>2</u>				
T			TEMPERATURE OBSERVAT	1	7. 7. 4					
Item/Loca	room cold top	Temp F	Item/Location	Temp F	Item/Location	Temp 1				
-	•	39	Drive thru		Hot holding unit					
Tomatoes			Cold top		Beans	156				
	Lettuce	39	Tomatoes	34	Chicken	165				
	Below	41	Lettuce	41	Wic	33/34				
S	Steam table		Below sourcream	44	Sauces	39/39				
	Meat	174	Ambient temp	44-48	Wif	10				
	Beans	152	Steam table		Upright freezer	-2				
	Rice	165	Meat / rice	163/154						
		OF	SERVATIONS AND CORRECTIV	E ACTION	IS					
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW: all temps F	TABLISHME	ENT HAS BEEN MADE. YOUR ATTENTI	ON IS DIREC	CTED TO THE CONDITIONS OBSERVED A	.ND				
	Hot water in restrooms	110 / ho	ot water at hand sink near di	ning roon	n 145 F watch (need soap in m	nen's)				
45/42	Clean under soda stat	ion in dir	ning room							
45	Clean drains under so	da statio	n							
19	All drain pipes from so	da static	on should be equipped with a	an air ga <sub>l</sub>	р					
45	•		sink - cabinet and Formica et	c are in o	disrepair					
31	To provide soap to from									
	Hot water at back han		10 as well							
40/45	Sanitizer in buckets2	- ' '	I.P P I							
42/45 02			inside cold top on drive thru	lino						
42/45			ment over and around and o							
W			starting to develop on ceiling							
W			back evidence on floor	<u> </u>	,					
W				next to sl	leeve of cup lids ( moved below	w)				
45	Grease accumulation	oehind fr	yers and under as well			-				
	Will need to get soan t	oday for	mon's rooms and front han	d eink AS	2AD					
	Will need to get soap today for men's rooms and front hand sink ASAP									
	Still using peroxide product for non food contact and QUATS in kitchen for food contact									
	Plans for a remodel in October per manager on duty									
Received (signature)	See abov	'e	Print:		Title: Person In Charge/ Owner	r				
Inspected (signature)			Print:							
( 5	Kelly Kirkpa	trick	/KS		Samples: Y N # collect	tad				