Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

Date: 9/21/2023		23	Time in: 2:10	License/Permit # need current					t			Est. Type Risk Category Page 2 of 2	2_				
Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain						nt	4-Investigation					5-CO/Construction 6-Other TOTAL/SCOI	RE				
The Brass Tap							ame:						* Number of Repeat Violations: Vumber of Violations COS: Follow-up: Ves [7]	R			
Ph 20	ysic 75	al A Sur	ddre nm	ss: er L	₋ee Rockwall, TX	Or	est control : kin/need	curren	t	Ho Roja	od as/6-2	023	G: Tri	reaso mb	te trap : Follow-up: Yes 10/04/	ט	
Ma					tatus: Out = not in co	ompliance IN = in or each numbered in	compliance		not 'a ch						pplicable $COS = corrected on site R = repeat violation W-Watco ox for IN, NO, NA, COS Mark an in appropriate box for R$	h	
								olations	Requi	_	nmea Compl				tive Action not to exceed 3 days		
O U						R	O U	I	N O	N C A O		Employee Health	R				
W				S	1. Proper cooling time	-	-			Т	_			S	12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting		
					2. Proper Cold Holdin	g temperature(41	°F/ 45°F)								13. Proper use of restriction and exclusion; No discharge from	-	
3						8t(· -					~				eyes, nose, and mouth		
	1				3. Proper Hot Holding										Preventing Contamination by Hands		
		~			4. Proper cooking time						~				14. Hands cleaned and properly washed/ Gloves used properly gloves used		
		~			5. Proper reheating pro Hours)	ocedure for hot ho	olding (165°I	F in 2			~				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)		
	6. Time as a Public Health Control; procedures			ocedures & re	ecords							Highly Susceptible Populations					
					Approved Source						~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required		
					7. Food and ice obtained from approved source; Food in										eggs cooked		
	~			good condition, safe, and unadulterated; par destruction Brothers, Sysco			-							Chemicals			
	~				8. Food Received at proper temperature						_				17. Food additives; approved and properly stored; Washing Fruits & Vegetables		
					check at rece					3					Water only 18. Toxic substances properly identified, stored and used		
					9. Food Separated & p		ed during foo	od		3							
	~				preparation, storage, d			1 1			T				Water/ Plumbing		
3					10. Food contact surface Sanitized at			and			~				19. Water from approved source; Plumbing installed; proper backflow device		
	/				11. Proper disposition reconditioned	of returned, previ	iously served	d or			~				20. Approved Sewage/Wastewater Disposal System, proper disposal		
					Pr	iority Founda	ation Items	s (2 Poi	nts) ı	_	_	_		Cor	rrective Action within 10 days		
U T	I N	N O	N A	C O S	Demonstratio	n of Knowledge	/ Personnel		R	U T	N	N O	N A	C O S	Food Temperature Control/ Identification	R	
	>				21. Person in charge p and perform duties/ Co 3					2					27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature		
	~				22. Food Handler/ no u	unauthorized pers	sons/ personn	nel			~				28. Proper Date Marking and disposition		
					Safe Water, Reco	ordkeeping and l	Food Packar	ge			~				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips		
V					23. Hot and Cold Water available; adequate press										digital		
~					23. Hot and Cold Water	Labeling		e, safe							Permit Requirement, Prerequisite for Operation		
	·				23. Hot and Cold Water 24. Required records a destruction); Packaged	Labeling er available; adeq available (shellsto	quate pressure			W	<u> </u>				Permit Requirement, Prerequisite for Operation 30. Food Establishment Permit (Current/insp report sign posted)		
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Retail Food Establishment Inspection Report

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

Form EH-06 (Revised 09-2015)

	ment Name: Brass Tap	Physical A	ddress: Summer Lee Dr	City/State:	all TX	License/Permit # Page need current	2 of <u>2</u>				
1110	Біаоо Тар	2010	TEMPERATURE OBSERVAT		AII, 17X	nood odnone					
Item/Loc	cation	Temp F	Item/Location	Temp F	Item/Loca	tion	Temp F				
steam	n well/queso	139	cheese	41	wings made today		71-78				
left si	ide cold top/cheese	41	pickled onions for reference	41	3 door dairy cooler/cheese		41				
S	sour cream	41	under counter freezer ambient	6	cheese		41				
	guac	41	small cold top/wings	67	3 door veggie cooler/cut melon		41				
right s	ide cold top/cut tomatoes	43	raw chicken	52	tomatoes		41				
che	ese/tomatoes	46/46	raw fish	51	2 door freezer ambient		5				
unde	er counter freezer	5	raw shrimp	56	2 door freezer ambient		6				
grill	drawers/beef	41	3 door glass front/wings	41	2 door	cooler/raw chicken	41				
	1		SERVATIONS AND CORRECTIV								
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:										
	Back hand sink 100)+F equi	nned								
	Line hand sink 100		•								
42	Need to clean hand										
			tops, handles, floors								
32			•	ored							
2	Clean cutting boards where discolored/ or badly scored Right side cold top not cold holding/discarded TCS in for over 4 hours										
	Right side cold top not cold holding/discarded TCS in for over 4 hours										
27	All TCS discarded as cold top isn't cold holding at 41F Wings made an hour previous in deep plastic bin/placed on shallow sheet pans										
	Must aggressively cool 2 hours to 70 then 4 hours to 41F or below										
	3 comp sink 110+F										
18											
'	Dishwasher sanitizing per Temp rite strips										
	Need temperature t	<u> </u>	•								
10	•	-	S TO 400 ppm quats								
45	Some missing grou	•									
34	A few flies/fruit flies										
	Bar hand sink 100F/to be used as hand sink only										
	Bar hand sink need soap and paper towels										
	3 comp bar sink 110 F										
	Bar dishwasher sanitizing at 100 ppm chlorine										
42	To clean and organize around expo area										
	Beer WIC ambient 25F										
Received (signature)		;	Brannon	Arch	ner	Title: Person In Charge/ Owner Manager	•				
Inspecte	d by:		Print:								
(signature)	Brannon Archer d by: Chvisty Cov	tez, 1	Christy Co	ortez,	RS	Samples: Y N # collect	ed				
Form FH-0	6 (Revised 09-2015)										