## \$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

Date: 09/03/2021	Time in: Time out: License/Permit # Est. Type Risk Category Conv Low Page 1						1	f_2_				
	ction: 1-Routine	2-Follow Up			4-I	Invest	tigat	tion		5-CO/Construction 6-Other TOTAL/SO	ORE	
Establishment Nar			Contact/Owner Tom Thumb	Name:						* Number of Repeat Violations: ✓ Number of Violations COS:		
Physical Address:	704 Tuel Centel		control :		Hoc	od		Gre	ease	e trap : Follow-up: Yes 0/100	)/A	
Goliad Compliance	Status: Out - not in an	Store ompliance IN = in co		$\mathbf{O} = \text{not ol}$	Va boom	zod.	N A	Na	t one	No ✓ No ✓ Plicable COS = corrected on site R = repeat violation W-W		
	e points in the <b>OUT</b> box for	each numbered iten	n Mark	√ in app	oropr	iate bo	x for	r IN,	NO	NA, COS Mark an $$ in appropriate box for R	ucn	
Compliance Status	Prio	ority Items (3 Po	oints) violation	s Require	_	<i>media</i> omplia				ive Action not to exceed 3 days		
O   I   N   N   C   Time and Temperature for Food Safety   U   N   O   A   O   (F = degrees Fahrenheit)					O U T	I N		A	C O S	Employee Health	R	
	s (r = degrees rantemen)  1. Proper cooling time and temperature				1				3	12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting		
2 Proper Cold Holding temperature/419E/459E)						_						
2. Proper Cold Holding temperature(41°F/ 45°F)  See attached						<b>✓</b>				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and nouth		
	3 Proper Hot Holding temperature(135°F)				Policy / masks  Preventing Contamination by Ha					Preventing Contamination by Hands		
	4 Proper cooking time and temperature									14. Hands cleaned and properly washed/ Gloves used properly		
	5. Proper reheating pro-	cedure for hot hold	ing (165°F in 2							15. No bare hand contact with ready to eat foods or approved	+	
	Hours)									alternate method properly followed (APPROVED Y N N No food contact expect to handle apples		
	6. Time as a Public Hea	alth Control; proced	dures & records							Highly Susceptible Populations		
	Ap	proved Source								16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required		
	7. Food and ice obtaine	ed from approved so	ource; Food in									
	good condition, safe, ar destruction From st	nd unadulterated; pare	arasite							Chemicals		
	8. Food Received at pro					T				17. Food additives; approved and properly stored; Washing Fruits	;	
	At receiving in	store					•			& Vegetables Not washing		
		n from Contamina				<b>/</b>				18. Toxic substances properly identified, stored and used Stored on floor watch for cleaning under		
	Food Separated & pr preparation, storage, dis-		during food							Water/ Plumbing		
	10. Food contact surfact Sanitized at		; Cleaned and		W	•			+	19. Water from approved source; Plumbing installed; proper backflow device		
	11. Proper disposition of		icly carved or	$\perp$	VV				-1	Slow drain at back hand sink  20. Approved Sewage/Wastewater Disposal System, proper	_	
	40.4	-	•			/				disposal		
	Dani	naged / dis	caraea							*		
				_	_					rective Action within 10 days		
O I N N C U N O A O T S	Pri		on Items (2 Po	oints) via	O U	I	N	N A	C O		R	
	Pri	ority Foundation of Knowledge/ Poseent, demonstration	on Items (2 Poersonnel on of knowledge,	_	О	I	N	N A	C	Food Temperature Control/ Identification  27. Proper cooling method used; Equipment Adequate to	R	
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## Retail Food Establishment Inspection Report

## City of Rockwall

Received by: Johnny Mendoza	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: Thumb 2964 Fuel cente	Physical Add			City/State: Rockwall	License/Permit # FS 9053	Page <u>2</u> of <u>2</u>			
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Milk c	ooler	32/34								
Гио	zan faad unit	+								
Frc	zen food unit	10								
Item	AN INSPECTION OF YOUR ES		ERVATIONS AND			TO THE COMPUTIONS OPE	EDVED AND			
Number	NOTED BELOW: all temps F	TADLISHMEN	I HAS BEEN MADE	. TOUK ALIENI	ION IS DIKECTED	TO THE CONDITIONS OBS.	EKVED AND			
	Using reddy ice									
	Hot water 134 F									
W	Hand sink is slow draining to address									
	Drains looks great									
	Instructions on three sink indicate lukewarm for sanitizer set up - tested to be 200 after running									
	Cleaning soda nozzle	s etc sever	al times a wee	k						
	Restroom equipped									
	See scores sheet for									
W		Watch line deposit in soda drain tray / keep scrubbed delimed								
	Apples in washable w									
	Other frozen drink uni									
	All disposable utensils		-	aws						
Very minimal cleaning of flooring etc needed!										
	Watch interiors of cab	ineis								
			•							
Received (signature)	Coo obox	<u> </u>	Print:			Title: Person In Char	ge/ Owner			
	See abov	<del>/</del> E								
Inspecte (signature)	d by:		Print:							
- '/	Keuy Kukpa	urick	KS			Samples: Y N	# collected			