Follow-up fee of \$50.00 is required after 1st Followup

Retail Food Establishment Inspection Report City of Rockwall

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

Date: 06/20/2023	Time in: 7 Tim 9:3	34	Fs 0016					Food Managers Food Handlers Page 1 of 2	2
		-Follow Up	3-Complaint	4-1	Invest	igatio	n	5-CO/Construction 6-Other 7 TOTAL/SCOI	RE
Establishment Na Towne place s	suites	Don	act/Owner Name	1				* Number of Repeat Violations: Y Number of Violations COS: e tran / waste oil : Follow-un: Yes \ 0/100/	/Δ
Physical Address: 908 E I -330		Pest contro Ecolab 06/1	12/2023	Hoo Na		03	3/15/2	2023 1000 Trimble No 🗹	
Mark the appropriate	te points in the OUT box for each n	numbered item	Mark √ in	appropr	iate bo	for I	N, NC		:h
Compliance Status	Priority i	items (5 Points)) violations Keq		<i>meata</i> omplia			ive Action not to exceed 3 days	T
O I N N C U N O A O S	Time and Temperat	ture for Food Safe s Fahrenheit)	ety R	U T	I N	N N	C O S	Employee Health	R
	Proper cooling time and ter	1. Proper cooling time and temperature			/			12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
	2. Proper Cold Holding temper	erature(41°F/45°F))		~			13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth Posted at hand sink	
	3. Proper Hot Holding temper	rature(135°F)						Preventing Contamination by Hands	
	4. Proper cooking time and te	emperature			1		П	14. Hands cleaned and properly washed/ Gloves used properly	
	5. Proper reheating procedure Hours)	e for hot holding (10	65°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 Co Tphc for all buffet	ontrol; procedures	& records					Highly Susceptible Populations	
		ed Source			Т		,	16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
	7. Food and ice obtained from		Food in					Precooked	
w	good condition, safe, and unaddestruction Watch dates	dulterated; parasite						Chemicals	
	8. Food Received at proper te Randomly choosing by		3 items)			-	,	17. Food additives; approved and properly stored; Washing Fruits & Vegetables	
		1 Contamination			/			18. Toxic substances properly identified, stored and used	
	9. Food Separated & protected preparation, storage, display,		g food					Water/ Plumbing	
	10. Food contact surfaces and Sanitized at 200 ppm/to	temperature 18	0		\			19. Water from approved source; Plumbing installed; proper backflow device Confirmed	
	11. Proper disposition of return reconditioned	rned, previously se	erved or		/			20. Approved Sewage/Wastewater Disposal System, proper disposal	
		Foundation It						rective Action within 10 days	
		nowledge/ Person	R	O U		N N		Food Temperature Control/ Identification	R
O I N N C U N O A O T S	Demonstration of Ki	8		T	11		Š		
U N O A O	Demonstration of Kr 21. Person in charge present, and perform duties/ Certified	demonstration of k	nowledge,		· ·			27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
U N O A O	Demonstration of Kn 21. Person in charge present,	demonstration of k Food Manager (CF	cnowledge, FM)		·			Maintain Product Temperature 28. Proper Date Marking and disposition Frozen	
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Retail Food Establishment Inspection Report

City of Rockwall

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

Form EH-06 (Revised 09-2015)

Establishment Name: Towne place	Physical A 908 E		City/State: Rockwal		ge <u>2</u> of <u>2</u>					
·		TEMPERATURE OBSERVAT								
Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp					
Milk cooler customer area	34/36	Upright	40.9	Market						
Silk milk in pitche	r Tphc	Butter	41	Ice cream	-4					
Oatmeal	167	Upright freezer	-8	Water	36					
Hot plates		Upright 2	10	Refrigerator cheese	37					
Eggs / sausage	159/136									
Cold well spinach	n Tphc									
Salsa	Tphc									
Cheese	Tphc									
		SERVATIONS AND CORRECTI	VE ACTION	NS						
	ESTABLISHME	NT HAS BEEN MADE. YOUR ATTENT	TION IS DIRE	CTED TO THE CONDITIONS OBSERVED A	AND					
	NOTED BELOW: temps in F Restroom hot water 108 F - equipped									
Watch dates on milk		ыррос								
Breakfast - 6:30-9:3										
Sign posted for buffe										
Using paper plates a	-									
All tphc butter and c		o tobo not on ico								
•		se - tpric - not on ice								
Milk etc for coffee tp		changes								
	Discussed allergen poster and changes									
	Kitchen:									
Hot water 112		I-								
Quats sanitizer 200	• •	K								
Thermo and test stri	•	-1!-1								
Dishmachine- confir										
All foods are precoo		st rethermalized								
Keep and eye on air										
		tizer going forward - store v	<u> </u>	th in sanitizer						
	Ice cream from its fate / label looks complete - customer area									
Watch dates on nak	ed juice too)								
Received by: (signature) See aho	NA	Print:		Title: Person In Charge/ Owner	er					
See abo Inspected by: (signature) Kelly Kirk	, v C	Print:								
Inspected by: (signature) **Kolly Kirk**	natici ch	PC Frint:								
Rewy RUM	m, un			Samples: Y N # collect	cted					