

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
- Vomit clean up
- Employee health

Date: 08/03/2021	Time in: 10:44	Time out: 11:24	License/Permit # FS 9504	Est. Type Limited	Risk Category LOW	Page <u>1</u> of <u>2</u>
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Purpose of Inspection: 1-Routine 2-Follow Up 3-Complaint 4-Investigation 5-CO/Construction 6-Other **TOTAL/SCORE**

Establishment Name: Tropical smoothie cafe	Contact/Owner Name: Michael Drankoski	* Number of Repeat Violations: <u> </u> ✓ Number of Violations COS: <u> </u>	3/97/A
Physical Address: Ridge road	Pest control : Massey 08/02/21	Hood Na	Grease trap : Trimble 07/26/21 25 gals
Follow-up: Yes <input type="checkbox"/> No <input checked="" 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
Time and Temperature for Food Safety (F = degrees Fahrenheit)						Employee Health					
		✓				✓					
	✓					✓					
		✓				Preventing Contamination by Hands					
		✓				✓					
		✓					✓				
		✓				Highly Susceptible Populations					
		✓				✓					
	✓					Chemicals					
	✓					✓					
						✓					
						Water/ Plumbing					
	✓					✓					
		✓				✓					

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
Demonstration of Knowledge/ Personnel						Food Temperature Control/ Identification					
	✓					✓					
	✓					✓					
Safe Water, Recordkeeping and Food Package Labeling						Permit Requirement, Prerequisite for Operation					
	✓					✓					
	✓					Utensils, Equipment, and Vending					
			✓			✓					
Consumer Advisory						W					
	✓						✓				

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
Prevention of Food Contamination						Food Identification					
1							✓				
	✓					Physical Facilities					
	✓					1					
		✓				✓					
	✓					✓					
Proper Use of Utensils						1					
W	✓					✓					
	✓						✓				

Retail Food Establishment Inspection Report

City of Rockwall

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

Form EH-06 (Revised 09-2015)

Establishment Name: Tropical smoothie cafe	Physical Address: Ridge road	City/State: Rockwall	License/Permit # FS 9504	Page 2 of 2
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TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
Smoothie cold top	37/38	Meat cold top	38/39	Wic	
Spinach	41	Chicken.	34	Ham	40
Coconut	39	Chicken	39	Tomatoes	39
Cold top	37/38	Hummus	41	Wif	-1
Cut greens	39				
Pesto	39				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: all temps F
	Hot water 119 F at hand sink
W	Watch use of wooden buckets for bananas - best to use plastic
45	Minor cleaning under equipment - floor etc
	Having styro cups inside SS cups for dry additives- replacing weekly - or more often if needed
	Covered at night to protect
42	Detailed cleaning of lid over items in coldTop unit needed - spills from additive containers above
	Supplements - cleaned daily and cleaned on rotation - discussed weekly or more often
	Blender pitchers are w r s every 4 hrs or less
	Sani bucket 200 ppm
	new cutting boards on site
	Allergy policy on site for shrimp and nuts etc -.postings
	Addressing rusty shelving next to threeComp sink - added netting and plans for new
	Will address shelving unit - bar netting
	Digital thermo
45	Clean air vents where needed
	Restrooms equipped -watch hot water - 125 F

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

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