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

	ate:	20	'n	4	Time in:	Time ou		License			72					Est. Type	Risk	Category	Page 1	of 2
		22/			1:10 tion: 1-Routine	1:51	low Up	FS (			/ J -Inve	ctics	otion		5-CO/Const	Yogurt		Other	TOTAL/S	
E	stabli	shme	nt l	Vam		2-1011	Co	ntact/Owne	r Name:		-11170	suga	ation	L	* Number of	Repeat Viola	ations: _		TOTAL/S	CORE
_		trea al Ado					Joi Pest cor	rdan Ste	jer	Но	od		G	rance	✓ Number of e trap :			— up: Yes 🔽	7/93	3/A
	mme		ure	SS.			To provid	le		Na	oou			prov			No	up: res		
М					Out = not in corpoints in the OUT box for	mpliance II	N = in comp	liance Mar	NO = not						oplicable COS =				olation W-V te box for R	Vatch
IVI	ark u	е аррі	Юрі	iacc	•										ive Action not to			ш арргорна	te box for <b>R</b>	
О	Î		N	us C O	Time and Tem	nerature	for Food S	afety	R	О		N	N	С						R
U T	N	0	A	o S	(F = de	egrees Fah	renheit)	arcty		U T		O	A	o S			loyee He			
					1. Proper cooling time a	and temper	ature								<ol><li>Management knowledge, respectively.</li></ol>				l employees;	
		_			2. Proper Cold Holding	temperatu	re(41°F/ 45	°F)		-					13. Proper use of	f restriction ar	nd exclu	sion: No dis	scharge from	
	~				See	, temperatu	10(11 17 10	-,			~				eyes, nose, and a	mouth			-	
		_	1		3. Proper Hot Holding t	temperatur	e(135°F)									eventing Con				
		•			4. Proper cooking time	and tempe	rature			١٨	<b>/</b>				14. Hands clean					
-					5. Proper reheating proc	cedure for	hot holding	(165°F in 2		V 1	V				15. No bare hand	d contact with	ready to	eat foods o	or approved	
		~			Hours)							•			alternate method	properly follo	lowed (A	APPROVED	O YN)	1
		/			6. Time as a Public Hea	alth Contro	l; procedure	es & records								Highly Susce	eptible I	Populations	3	
						nnoved C-	uroc								16. Pasteurized f			food not of	ffered	
						proved So							•		Pasteurized eggs	used when re	equired			
	~				<ol> <li>Food and ice obtained good condition, safe, and destruction</li> </ol>											Cl	hemical	s		
					8. Food Received at pro	oper tempe	rature		+						17. Food additive	es; approved a	and prop	erly stored;	; Washing Frui	ts
	~				To always chee	ck					~				& Vegetables Water onl	lv				
					Protection	from Co	ntaminatio	n			1				18. Toxic substar		identific	ed, stored ar	nd used	
3					Food Separated & propreparation, storage, discovered by the second storage in the s			ring food							<u> </u>		er/ Plum	bing		
	/				10. Food contact surface Sanitized at _200_			Cleaned and			/				19. Water from a backflow device		rce; Plun	nbing instal	led; proper	
_					11. Proper disposition o	of returned	, previously	served or			./				City appro 20. Approved Se disposal	ewage/Wastev	water Dis	sposal Syste	em, proper	
					Disca	ard									uisposai					
					reconditioned Disca		undation	Items (2 l	Points)	violai	tions	Req	uire	Cor	*	ithin 10 days	s			
O U	I		N A	COO		ority Fo			Points)	O U	I	Req N O	vuire N A	C 0	rrective Action wi	<i>ithin 10 days</i> Temperatur		ol/ Identific	cation	R
O U T					Pri	ority For	ledge/ Pers	onnel of knowledge	R	0	I	N	N	C	Food 27. Proper coolin	Temperatur	e Contr			R
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## **Retail Food Establishment Inspection Report**

## City of Rockwall

Received by: (signature) Printed /covid Avery Hampton	Print:	Title: Person In Charge/ Owner
Inspected by: Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name: <b>y treats</b>	Physical A		ity/State: Rockwal	I	FS 0001073	ge <u>2</u> of <u>2</u>				
	,		TEMPERATURE OBSERVAT								
Item/Loc		Temp F	Item/Location	Temp F	Item/Locati	<u>on</u>	Temp				
Small	bev cooler non Tcs	48	Soft serve unit 3	36/32							
Res	idential cooler	34	Unit 2	41/42	Watc	h borderline!					
	Sauce	37	Unit 3	40/39							
	Freezer	5	ColdTop unit	34							
	RIF	1	Cookie dough	39							
2	door cooler		<u> </u>								
	roduce temp	41									
• •	Cadoc temp	• • •									
		OI	 BSERVATIONS AND CORRECTIV	E ACTION	īS						
Item Number	AN INSPECTION OF YOUR EST NOTED BELOW:	rab <b>L</b> ISHMI	ENT HAS BEEN MADE. YOUR ATTENTI	ON IS DIREC	CTED TO TH	E CONDITIONS OBSERVED A	AND				
W	Washing hands in kitchen before assisting customers - current set was part of COVID reaction.										
	Hand sanitizer on site but does not replace hand washing / keeping back door open to allow for hand washing in kitcher										
39	Hand sanitizer on site but does not replace hand washing / keeping back door open to allow for hand washing in kitcher  Keep trash can out of way to use hand sink										
	Hot water 112										
		unit to pr	otect food containers								
	Vinyl tarp on shelving unit to protect food containers  Watch storage of mop etc										
43	One light out in back k		will need it for prep								
	Using Sani buckets in		· · ·								
W	Avoid using pinesol for non food contact areas										
	Gloves used to handling food directly										
09			items to ss or plastic in resid	dential co	ooler						
	Watch upright 2 door cooler as barely 41										
	All Food prep should be done in back prep where hand sink is located										
	Unit 2 is borderline - barely 41										
29	Tcs rte foods to be date marked with 6 days if not using within 24 hrs of opening etc deisacussed 6 days after thawed for cheese cake										
	Each condiment container to have own utensil / watch placement of peanuts etc / nut spoons designated and used only for this										
	Sanitizer bucket -200 ppm -watch use of cotton cloths in bucket										
	Using dial thermo which appears to be calibrated										
W	Labeled one spray bottle while on site										
	Discussed lid and removing and storing off ground etc										
Received (signature)	lby:		Print:			Title: Person In Charge/ Owne	er				
	See abov	<u>'</u>									
Inspected (signature)	d by:		Print:								
. 5	кешу Кіткра	urick	/KS			Samples: Y N # collection					