rec Foll	l n ow	i r	e d		of \$50.00 is after 1st		City of	Rock	Ś		In	spo	ecti	ion Report		First aid k Allergy po Vomit clea Employee	olicy/trainii n up	ng
	Date:         Time in:         Time out:         License/Per           07/20/2020         12:52         1:30         FS 89													Est. Typ	be	Risk Category	Page $\underline{1}$ of	2
Pu	Purpose of Inspection: 1-Routine 2-Follow Up 3-Complaint							aint		4-Investigation 5-CO/Constru			5-CO/Construction	_	6-Other	TOTAL/SCO	RE	
	Establishment Name: Contact/Owner Na Walgreens #11519 ( North) Walgreens						Name:						<ul> <li>★ Number of Repeat</li> <li>✓ Number of Violation</li> </ul>			001	^	
	ysica		ddre	ess:	· · ·		t control : tokil 05/13/2020		Ho Na	od		G Na		e trap :	F	Follow-up:Yes	6/94//	A
	(	Com			Status: Out = not in con	$\frac{1}{1} = \frac{1}{1}$	compliance N	$\mathbf{O} = \text{not}$	obser			<b>A</b> = n	not ap	oplicable <b>COS</b> = correcte		te $\mathbf{R}$ = repeat vio	lation W- Wat	ch
Ma	rk th	ie ap	prop	riate	points in the OUT box for	r each numbered ite	em Mark							D, NA, COS tive Action not to exceed .	Mark 3 days	÷ 11 1	te box for <b>R</b>	
Col	mpli I	ance N	e Sta N	tus C				R		ompl								R
U T	$\begin{array}{c c c c c c c c c c c c c c c c c c c $					U T		0	A	O S	Employee Health							
	1. Proper cooling time and temperature							~		12. Management, food employees and conditional employees knowledge, responsibilities, and reporting					employees;			
	2. Proper Cold Holding temperature(41°F/ 45°F)						-		13. Proper use of restriction and exclusion; No discharge from						charge from			
	V		Good							~		eyes, nose, and mouth						
		3. Proper Hot Holding temperature(135°F)						Preventing Contamination by Ha										
	4. Proper cooking time and temperature					14. Hands cleaned and properly washed/ Gloves us         15. No bare hand contact with ready to eat foods or												
			~		5. Proper reheating proc Hours)	cedure for hot hol	ding (165°F in 2				~			15. No bare hand contact alternate method properly				
	6. Time as a Public Health Control; procedures & records					Highly Susceptible Population						otible Populations		-				
									If it is a second sec						ered			
						proved Source				V				Pasteurized eggs used wh	nen rec	quired		
3				~	7. Food and ice obtained good condition, safe, an destruction 1 dented													
					8. Food Received at pro	oper temperature						~		17. Food additives; appro & Vegetables	oved ar	nd properly stored;	Washing Fruits	
						n from Contamin	- 49		_			•		18. Toxic substances pro	perly i	dentified, stored an	d used	_
	1				9. Food Separated & pro									_				
	/				preparation, storage, dis	· • • ·	C							V	Water/	Plumbing		
	~				10. Food contact surface Sanitized at	ppm/temperature				~				19. Water from approved backflow device				
		~			11. Proper disposition or reconditioned	-	-			~				20. Approved Sewage/W disposal		ater Disposal Syster	n, proper	
0	I	N	N	C			· · · · · ·	Dints) V	0	Ι	Req N O		С	rrective Action within 10		<u> </u>		R
U T	N	0	A	0 S	21. Person in charge pre	n of Knowledge/			U T		0	A	O S	•		Control/ Identific		
	~				and perform duties/ Cer					~				27. Proper cooling metho Maintain Product Temper			quate to	
	~				22. Food Handler/ no u	nauthorized perso	ons/ personnel			1		~		28. Proper Date Marking	and di	isposition		-
					Safe Water, Reco		ood Package							29. Thermometers provid Thermal test strips	led, ac	curate, and calibrate	ed; Chemical/	
	_				23. Hot and Cold Water	Labeling	ate pressure safe							At receiving and				
	r				110 24. Required records av	_	-			1				<b>Permit Requirem</b> 30. Food Establishment		Prerequisite for Op		
	~				destruction); Packaged					~				Posted		· (···································	6 (	
					Conformance v 25. Compliance with Va	with Approved P				1				Utensils, 1 31. Adequate handwashin		ment, and Vendin		
			>		HACCP plan; Variance processing methods; ma	e obtained for spe	cialized			~				supplied, used		intres. Accessible a	iu property	
					Cons	sumer Advisory				~				32. Food and Non-food C designed, constructed, an			, properly	
	~				26. Posting of Consume foods (Disclosure/Remi Commercial product	inder/Buffet Plate					~			33. Warewashing Faciliti Service sink or curb clear			used/	
0	I	N	N	С	Core Items (1 Poin	nt) Violations K	Require Corrective	e Action	Not 0		Excee N	ed 90 N	0 Da C	ys or Next Inspection , V	Vhich	ever Comes First		R
U T	N	0	A	o s		of Food Contam			U T	Ν	0	A	o s			lentification		
1					34. No Evidence of Inse animals Watch any ga	ap at door	*				~			41.Original container lab	eling (	(Bulk Food)		
	/				35. Personal Cleanlines	0. 0	, ,								•	al Facilities		
	/				36. Wiping Cloths; prop		ored		1					42. Non-Food Contact su Minor				
	_	~			37. Environmental cont	tamination			W					43. Adequate ventilation Watch in coolers				
		~			38. Approved thawing r	method				~				44. Garbage and Refuse I	proper	ly disposed; facilitie	es maintained	
					-	er Use of Utensil			1	1				45. Physical facilities inst Minor	talled,	maintained, and cle	ean	
	~				39. Utensils, equipment dried, & handled/ In us	se utensils; proper	ly used			~				46. Toilet Facilities; prop	perly co	onstructed, supplied	l, and clean	
	~				40. Single-service & sin and used	ngle-use articles;	properly stored				~			47. Other Violations				

## **Retail Food Establishment Inspection Report**

## City of Rockwall

Received by: (signature) Traci Franklin	Print:	Title: Person In Charge/ Owner
Inspected by: (signature) Kelly Kirkpatrick RS	Print:	Business Email:

Form EH-06 (Revised 09-2015)

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	nent Name: eens 11519	Physical Address: N Goliad		City/State: Rockwal	I	License/Permit # FS 8932	Page <u>2</u> of <u>2</u>			
0			TEMPERATURE OBSERVA	TIONS						
Item/Loca	ation	<u>Temp F</u>	Item/Location	<u>Temp F</u>	Item/Locat	ion	<u>Temp F</u>			
Wic										
	33/34/35									
	Wif	-8								
Item			SERVATIONS AND CORRECT							
Number	AN INSPECTION OF YOUR ES	TABLISHME	NT HAS BEEN MADE. YOUR ATTEN	TION IS DIRE	CTED TO TH	E CONDITIONS OBSERV	ED AND			
	Hot water in restrooms	s 111								
	Checking dates on Tcs	s foods da	ily and weekly on the non	Tcs						
45/42	Minor cleaning under s	shelving i	n wic and on shelving							
07	Watch for dented cans									
	Dates for baby formula and food appear to be in compliance									
42/45										
	Wif is still slightly dark									
34	Evidence of past rodent presence and smoke beetles - to sweep up									
	Advised to use any and all sanitizers per label									
	<u> </u>									
Covid	Not using water fountains / sanitizing common surfaces 4?times per day - using quats product 200-400									
	Baskets are sanitized with alcohol wipes / w tips are provided for using key pad / hand sanitizer provided to customers and employees									
	Daily temp checks for employees and all are wearing masks etc / screening questions at arrival									
Received	by:		Print:			Title: Person In Charge/	Owner			
(signature)	See abov	'e								
Inspected	by:	-	Print:							
(signature)	See abov <sup>by:</sup> Kelly Kírkpa	ıtríck	RS			Samples: Y N #	collected			