	Retail Food Establishment Inspection Report First aid kit Allergy policy Vomit clean up Employee health																	
Date: Time in: Time out: License/Pe 8/10/2022 12:10 1:05 FS-8														Est. Type Risk Category Page <u>1</u> of <u>2</u>	2			
Purpose of Inspection: 1-Routine 2-Follow Up 3-Compla						int		_	[nve	stiga	atio	n	5-CO/Construction 6-Other TOTAL/SCOI	RE				
Establishment Name: Contact/Owner N Wingstop Rex Hecke												* Number of Repeat Violations: ✓ Number of Violations COS:	•					
Physical Address: 2455 Ridge Road Rockwall, TX Pest control : APT/monthly]	Hoc hine&	od Glitter	/3mo	G	reas	se trap : Follow-up: Yes 9/91//	ł					
Compliance Status: Out = not in compliance IN = in compliance N						$\mathbf{O} = \mathbf{n}$	ot ob	oserv	ved	NA	\ = n	ot ap	pplicable $COS = corrected on site R = repeat violation W- Watc$	ch				
Mark the appropriate points in the OUT box for each numbered item Mark '\$\sigma' a checkmark in appropriate box for IN, NO, NA, COS Mark an \$\begin{pmatrix} in appropriate box for R \\																		
0	Î	pliance Status Time and Temperature for Food Sofety							0	ompli I	Ν	e Sta N A	С					
U T	N	0	A	0 S	(F = degrees Fahrenheit) 1. Proper cooling time and temperature				U T	N	0	A	0 S					
	~		1. Froper cooling time and temperature						~				knowledge, responsibilities, and reporting					
	~	2. Proper Cold Holding temperature(41°F/ 45°F)						~				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth						
		3. Proper Hot Holding temperature(135°F)				Ī						Preventing Contamination by Hands						
	~	4 Proper cooking time and temperature						~				14. Hands cleaned and properly washed/ Gloves used properly	-					
	-	,	5. Proper reheating procedure for hot holding (165°F in 2		(165°F in 2		-						GIOVES USED 15. No bare hand contact with ready to eat foods or approved	+				
<u> </u>		Hours) G. Time as a Public Health Control: procedures. & records		\square			~				alternate method properly followed (APPROVED YN)							
	6. Time as a Public Health Control; procedures & records												Highly Susceptible Populations 16. Pasteurized foods used; prohibited food not offered					
	Approved Source							~				Pasteurized eggs used when required NO EQQS						
	~				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction PFG									Chemicals				
	~				8. Food Received at proper temperature			·		~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables				
					check at receipt Protection from Contamination			-		~				water only 18. Toxic substances properly identified, stored and used	+			
		Protection from Contamination 9. Food Separated & protected, prevented during food						•										
	~	preparation, storage, display, and tasting 10. Food contact surfaces and Returnables ; Cleaned and		eaned and					Water/ Plumbing 19. Water from approved source; Plumbing installed; proper									
3				~	Sanitized at 200 ppm/temperature				W				~	backflow device				
	~				11. Proper disposition of returned, previously reconditioned discarded					~				20. Approved Sewage/Wastewater Disposal System, proper disposal				
O U	I N	N O	N A	C O	Demonstration of Knowledge/ Perso	<u>`</u>	R R) vio	olati O U	I N	Req N O	N A	Con C C		R			
Ť		Ŭ		s	21. Person in charge present, demonstration o	f knowledge,			T		-		Š					
	~				and perform duties/ Certified Food Manager/					~				Maintain Product Temperature				
	~				22. Food Handler/ no unauthorized persons/ perso	ersonnel			2				~	28. Proper Date Marking and disposition				
		Safe Water, Recordkeeping and Food Package Labeling					~				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips digital							
	~	23. Hot and Cold Water available; adequate pressure, safe									Permit Requirement, Prerequisite for Operation							
	~				24. Required records available (shellstock tags destruction); Packaged Food labeled	; parasite				~				30. Food Establishment Permit (Current/insp report sign posted)				
-					Conformance with Approved Procee									12/31/2022 Utensils, Equipment, and Vending				
	~				25. Compliance with Variance, Specialized Pr HACCP plan; Variance obtained for specialize processing methods; manufacturer instructions	ed				~				31. Adequate handwashing facilities: Accessible and properly supplied, used				
					Consumer Advisory					~				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used	1			
-	~				26. Posting of Consumer Advisories; raw or un foods (Disclosure/Reminder/Buffet Plate)/ All all meats to required temps	nder cooked ergen Label				~				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided				
0	I	N	N	С			Acti R	ion l	Not o	to E.		ceed 90 D		ays or Next Inspection , Whichever Comes First	R			
U T	N N	0	A	o s	Prevention of Food Contamination				U T	N N	0	A	o s	Food Identification				
	~				34. No Evidence of Insect contamination, rode animals					•				41.Original container labeling (Bulk Food)				
1					35. Personal Cleanliness/eating, drinking or to36. Wiping Cloths; properly used and stored	Dacco use								Physical Facilities 42. Non-Food Contact surfaces clean	F			
W					36. Wiping Cloths; properly used and stored37. Environmental contamination					~				42. Non-Food Contact surfaces clean43. Adequate ventilation and lighting; designated areas used	<u> </u>			
1					38. Approved thawing method					~				44. Garbage and Refuse properly disposed; facilities maintained	<u> </u>			
	~									~				45. Physical facilities installed, maintained, and clean	<u> </u>			
-					Proper Use of Utensils 39. Utensils, equipment, & linens; properly us				1					46. Toilet Facilities; properly constructed, supplied, and clean	+			
	~				dried, & handled/ In use utensils; properly use	ed				•								
1					40. Single-service & single-use articles; prope and used	rly stored				~				47. Other Violations				

Received by: (signature) Veronica Perez	^{Print:} Veronica Perez	Title: Person In Charge/ Owner Manager
Inspected by: (signature) Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

TEMPERATURE OBSERVATIONS Item/Location Temp F Item/Location Temp F Item/Location	Town F										
	Temp F										
WIF ambient <u>4</u> reach in freezer ambient <u>6</u>											
2 door cooler/ranch 42											
WIC/par fried fries 39-42											
corn 40											
chicken fried 189											
veggie cold top/ranch 41											
reach in cooler/chicken 41											
cheese machine/cheese 138											
OBSERVATIONS AND CORRECTIVE ACTIONS											
Item AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDI- Number NOTED BELOW:	ONS OBSERVED AND										
Back hand sink 100 F	Back hand sink 100 F										
3 comp sink 110 +F											
W Store wiping cloths in sani buckets											
	Store employee food items low and separate/ not over prep tables										
Front hand sink 100+F											
45 Recaulk behind hand sinks/to seal to wall											
Chicken and fries cooked to order/no hot holding											
Saucing bowls and tongs WRS every 4 hours											
45 Replace ceiling tiles where missing											
W Keep air gap at back hand sink. One tube from hot water heater in drain.	COS										
37 Best to hang mops to dry											
10 Have sani bucket setup during prep and service/ COS to 200 ppm quats											
28 Date mark par fried fries appropriately/ fries made today with yesterday's	date . COS										
Soda/ tea nozzles WRS daily											
40 Avoid use of cardboard boxes with liners to store par fried fries. Use NSF contai	iers instead.										
Clean walls, under equipment, behind fryers											
Received by: Print: Title: Per	on In Charge/ Owner										
	ager										
Inspected by: (ginature) Print:											
Form EH-06 (Revised 09-2015)	N # collected										