Followup fee of \$50.00 after First Followup

Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

City of Rockwall

Date: 5/19/25			Time in: 2:05										CPFM 1	Food handlers	Page 1 _	of 2		
Purpose of Inspection: 1-Routine 2-Follow Up 3-Con				3-Compla	Complaint 4-Inves			ıvesti	gati	on	5-CO/Construction			TOTAL/SCORE				
Establishment Name: Contact/Own Gateway 19 Shell Beth Chat							me:					Number of Repeat V Vumber of Violation	of Repeat Violations: of Violations COS:		3/A			
Physical Address: 2205 TX-276, Rockwall, TX Pest control: Allstate Pest Control						Control 5/	7/25	/25 Hoo					e trap :/ waste oil 29/25 1000g	Follow-up: Yes No)/ <i>F</i> \		
Mark the appropriate points in the OUT box for each numbered item Mark						e N Mark '		not observed NA = not applicable COS = corrected on site R = repeat v a checkmark in appropriate box for IN, NO, NA, COS Mark an in appropri						olation W= V te box for R	Watch			
Co	mpli	Priority Items (3 Points) violation				violations	Requ		Immediat Complian				tive Action not to exceed 3 days					
O U T	I N	N O	N A	Time and Temperature for Food Safety (F = degrees Fahrenheit)		R		O I N U N O T				Employee Health						
		/			(F = degrees Fahrenheit) 1. Proper cooling time and temperature							/			12. Management, food em knowledge, responsibilitie		employees;	
	~			2. Proper Cold Holding temperature(41°F/45°F) See						•	/			13. Proper use of restriction eyes, nose, and mouth Employee health for		charge from		
		/			3. Proper Hot Holding t	temperature(135	°F)									Contamination by Har	nds	
		/			4. Proper cooking time						•	/			14. Hands cleaned and pro			
		>			5. Proper reheating prod Hours)	cedure for hot ho	olding (16	5°F in 2				/			15. No bare hand contact was alternate method properly Gloves)
	/				6. Time as a Public Hea	alth Control; prod	cedures &	k records)	usceptible Populations		
					Ар	proved Source							-		16. Pasteurized foods used Pasteurized eggs used whe N/a		fered	
	~	7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction Ind. vendors				Food in			Chemicals									
	~				8. Food Received at pro Checking	oper temperature	2						V		17. Food additives; approv & Vegetables N/a			its
						from Contami					•	/			18. Toxic substances prope Stored low and	erly identified, stored ar separate	nd used	
	~				9. Food Separated & pr preparation, storage, dis	splay, and tasting	g								W	ater/ Plumbing		
3					10. Food contact surfact Sanitized at 200	ppm/temperature	re	•			•				19. Water from approved s backflow device City approved	_		
	~				11. Proper disposition of reconditioned Disca	of returned, previ ard	iously ser	ved or			•				20. Approved Sewage/Wardisposal	stewater Disposal Syste	m, proper	
											_		_					
0	T	NI	NI	C	Pri	ority Founda	ation Ite	ms (2 Po							rective Action within 10 d	lays		l D
O U T	I N	N O	N A	C O S	Demonstration	of Knowledge/	/ Personn	el	ints)		o	I N	N	l C		lays ture Control/ Identific	cation	R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: (signature) Genesis Garza	Print: Genesis Garza	Title: Person In Charge/ Owner Shift Lead
Inspected by: Richard Hill	Print: Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name:	Physical A		ity/State:	Tv	License/Permit # FS-9177	Page	2 of 2		
Gatew	vay 19 Shell	600 E	TEMPERATURE OBSERVAT	Rockwall	, IX	FS-91//				
Item/Loc	cation	Temp	Item/Location	Temp	Item/Locat	ion		Temp		
Bluebonnet freezer		-4.3	-		Celsius merchandis		iser	43		
Helados Mexico freezer		-4.1	Ice merchandiser	11.1	C4 Merchandiser			44		
	Nestle freezer Mini melts Beverage surround Ice coffee fridge Beer merchandiser		Coke merchandiser	43	WIC					
			Dr Pepper merchandiser	45	37,32,36,28					
Ве			Red Bull merchandiser	43				39		
I			Bang merchandiser	40				49		
В			Monster merchandiser	45	Come	mini merchano	diser	40		
Pe	epsi merchandiser	42	Rockstar merchandises		1	31,31,40,	34			
Item	AN INSPECTION OF VOLUE ES		SERVATIONS AND CORRECTIVE OF THE SERVICE OF THE SER			HE CONDITIONS ORSER	VED AN	ND		
Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: all temperatures are taken in F									
	Restrooms equipped hot water greater than 110									
	Hand sink equipped greater than 103									
	3 comp sink not setup, 116, using bleach as sanitizer, strips current									
42	No gaps observed at both rear service doors Conoral detail cleaning of shelves for dainy products									
72	General detail cleaning of shelves for dairy products Great storage and organization in back room									
	Great storage and organization in back room									
	Commercial ice machine nonoperational during inspection									
	Bagged ice is purchased by Reddy Ice with Ice is Food certified label									
	Soda nozzles cleaned daily									
	Using 3 comp sink within Subway including hand sink									
	Frozen drink dispensers are cleaned every 2-3 days									
	Outside ice merchandiser 9.8 / 11.3, merchandising on side of building non operational									
43	Light bulb burned out	in wic								
10	Mold on ceiling of ice machine for bagged ice. Use for soda dispenser not bagging. Burn ice w/r/s clean									
	entire hopper and allow to air dry before ice accumulates									
	Checked rotation and expired date on canned food									
44	Dumpster enclosure needs to be cleaned									
40	Paper towels stored under liquids									
40	i aper towers stored u	naer nqu	us							
-										
L										
Received	l by:		Print:			Title: Person In Charge	/ Owner			
(signature)		/e	See abo	ove						
Inspected (signature)		1	S Richard	Hill		Carralla V V	ш			
Form EH-06	6 (Revised 09-2015)	- 	<u> </u>			Samples: Y N	# collecte	cu		