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:		_	Time in:	Time out:		License/Permit #						CPFM	Food handlers	n 1	-c 2			
5/22/25			9:30	11:30		S-90	9398					AII	1	Page 1	of <u>~</u>			
Purp Estab				tion: 1-Routine	2-Follow U	Jp 3-Co Contact/Ov	omplai		4-	Inve	stigat	tion		5-CO/Construction  Number of Repeat Violate	6-Other	TOTAL/S	CORE	
				lospital - Accent		Nichole A								Number of Violations CO	OS:	0/10	Λ/Λ	
Physical Address: Pest control: 3150 Horizon Rd, Rockwall, TX 75032 Refer to Cafe report						oort							e trap :/ waste oil	0/100/A				
	Co	mplia	nce S	Status: Out = not in co	ompliance IN = in	compliance	NO		obser	ved		= not	t app	plicable <b>COS</b> = corrected on s	_	lation W=	Watch	
Mark	the	appro	priate	points in the OUT box for										ox for IN, NO, NA, COS Markive Action not to exceed 3 day.		e box for R		
		ce Sta			`		unons		C	ompli	ance	Statu	IS	ve neuon noi to exceed 5 day.	3		R	
	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					R	U T	N	N O A		C O S	Emplo	<b>Employee Health</b>					
	Proper cooling time and temperature										12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting							
		2 Proper Cold Holding temperature(41°F/45°F)					~											
V		2. Proper Cold Holding temperature(41°F/45°F) See					<b>/</b>				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth							
4. Pr		$\vdash$	Proper Hot Holding temperature(135°F)      Proper cooking time and temperature										Preventing Contamination by Hands					
													14. Hands cleaned and properly washed/ Gloves used properly					
		Proper reheating pro-	5. Proper reheating procedure for hot holding (165°F in 2					<b>'</b>	-			15. No bare hand contact with ready to eat foods or approved						
	V	Hours)							٠	/	alternate method properly follo			_)				
	v			6. Time as a Public Hea	alth Control; pro	cedures & rec	ords							Highly Susce	ptible Populations			
														16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required				
				•	proved Source				L					Fully cooked	quirea			
				<ol><li>Food and ice obtaine good condition, safe, ar</li></ol>	nd unadulterated		in							Ch	emicals			
				destruction Comme	ercial									Cil	cinicais			
v				8. Food Received at pro	oper temperature	;								17. Food additives; approved a & Vegetables	nd properly stored;	Washing Fru	iits	
				Checking							_			No prep  18. Toxic substances properly in	identified stored an	d used		
		1		Protection  9. Food Separated & pr	n from Contami		ı			•				To. Toxic substances properly	identified, stored an	u useu		
V				preparation, storage, di										Water	/ Plumbing			
			H	10. Food contact surfac			and				T		+	19. Water from approved source	ce; Plumbing installe	ed; proper		
V				Sanitized at 200									ī	backflow device				
			·	<ol> <li>Proper disposition of reconditioned</li> </ol>	of returned, previ	iously served o	or							<ol><li>Approved Sewage/Wastew disposal</li></ol>	ater Disposal Syster	n, proper		
				Dri	iority Founda	. 4° T4							Com					
							(2 Poi	nte)	violai	tions	Roan			rective Action within 10 days				
0 1	ı l	N N	C				(2 Poi	nts) R	О	I	N	N	С	rective Action within 10 days	Control/Identific	ation	R	
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## Retail Food Establishment Inspection Report

## City of Rockwall

Received by: Nichole Anguiano	Print: Nichole Anguiano	Title: Person In Charge/ Owner Dietitian
Inspected by: Richard Hill (signature)	Print: Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: Texas Health Hospital Coffee	Physical A	Address: Summer Lee Dr	City/State:	T∨	License/Permit # FS9-9398	Page <u>2</u> of <u>2</u>
Texas Health Hospital Collect	2091	TEMPERATURE OB		, IX	1 39-9390	
Item/Location	Temp	Item/Location	Temp	Item/Loc	ation	Temp
Drink Merchandiser non tcs	40					
Drink Merchandizer non tcs	40					
Glass TCS fridge	39					
Salad/chix	39					
	OI	BSERVATIONS AND COR	RRECTIVE ACTIONS	S		l
Item AN INSPECTION OF YOUR ES NOTED BELOW: all temperature			R ATTENTION IS DIREC	TED TO	THE CONDITIONS OBSER	VED AND
Restrooms refer to caf	e report					
Thermos hanging in ea	ach refriç	gerator				
Tcs food fridge is locka	ıble, all f	ood pre packaged				
Labels appear correct	on all fo	od				
Snacks and chips prep	ackage	d by manufacturer wit	h labels on back			
Camera at pos and on	all coole	ers				
Company phone and e	email po	sted				
Good rotation of foods	, did not	observe expired food	d in reach in fridg	e or sh	elf stable package	s
Received by:		Print:			Title: Person In Charge/	Owner.
(signature) See abov	'e		above		THE TOSON IN CHAIGE	Owner
Inspected by: (signature)	17	Print: Dich	ord Lill (	CIT		
	120	(7) HICH	ard Hill :		Samples: Y N #	# collected