Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

| | ate: /2 4 | 1/2 | 202 | 25 | Time in: 2:18 | Time out: 3:30 | | se/Permit | | | | | | Est. Type | Risk Category | Page 1 | of <u>2</u> |
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| Purpose of Inspection: 1-Routine 2-Follow Up 3-Complain Establishment Name: Contact/Owner Na | | | | | | | 4-Investigation 5-CO/Construction 6-Other * Number of Repeat Violations: | | | | | TOTAL/S | CORE | | | | |
| La Cocina Del Tio Mon Physical Address: Pest control: | | | | | | | ✓ Number of Violations COS: | | | | 13/8 | 7/B | | | | | |
| 105 Kenway Rockwall, TX All Pest/4-18-2025 All Pest/4-4-2025 All Pest/4-4-2025 All Pest/4-4-2025 All Pest/4-18-2025 All Pest/4-18-2025 | | | | | | | | | | | | | | | | | |
| М | Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W-Watch 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 in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days | | | | | | | | | | | | Watch | | | | |
| O U | | | | | | | R | Compliance Status | | | | | R | | | | |
| T | | | | S | (F = degrees Fahrenheit) 1. Proper cooling time and temperature | | | | | Γ | _ | | 12. Management, food employees and conditional emp | | | | |
| | ~ | | | | | | OF (450F) | | | ~ | | | | knowledge, responsibilities, and | | 1 6 | |
| 3 | | | | | 2. Proper Cold Holding temperature(41°F/ 45°F) | | | | | ~ | | | | 13. Proper use of restriction and eyes, nose, and mouth | d exclusion; No disc | charge from | |
| | ~ | - | | | 3. Proper Hot Holding temperature(135°F) | | | | | Preventing Contamination by Hand | | | | | ds | | |
| | ~ | | Proper cooking time and temperature | | | | | | 14. Hands cleaned and properly washed/ Gloves used gloves used | | | | | sed properly | | | |
| | ~ | 5. Proper reheating procedure for hot holding (165°F in 2 Hours) | | | | 12 | | ~ | | | 15. No bare hand contact with ready to eat foods or approvalternate method properly followed (APPROVED Y | | | | _) | | |
| | 6. Time as a Public Health Control; procedures & records | | | | ords | Highly Susceptible Populations | | | | | | | | | | | |
| | | | | | Ap | proved Source | | | | 16. Pasteurized foods used; prohibited food not offer Pasteurized eggs used when required | | | | | ered | | |
| | | | | | 7. Food and ice obtaine | d from approved | | n | | | | | | | | | |
| | ~ | good condition safe and unadulterated parasite | | | | | | | | | | Che | Chemicals | | | | |
| | ~ | | | | 8. Food Received at pro | oper temperature | | | | \ <u>\</u> | | | | 17. Food additives; approved at & Vegetables | nd properly stored; | Washing Fru | its |
| | Ľ | check at receipt Protection from Contamination | | | | | | \ <u>\</u> | | | | 18. Toxic substances properly i | d used | | | | |
| | | | | | 9. Food Separated & pr | otected, prevente | ed during food | | | | | | | W 4 | /DI 1: | | |
| | ~ | | | | preparation, storage, dis | | _ | nd | | | | | | 19. Water from approved source | / Plumbing | ed: proper | |
| | ~ | | | | Sanitized at 100 | ppm/temperature | re | | | ~ | | | | backflow device | | | |
| | ~ | | | | 11. Proper disposition of reconditioned disc | | iously served or | r | | ~ | | | | 20. Approved Sewage/Wastewa disposal | ater Disposal Syster | n, proper | |
| Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days | | | | | | | | | | R | | | | | | | |
| O U T | N N | N O | N A | C O S | | n of Knowledge/ | | R | t T | JN | N O | | C O S | Food Temperature | Control/ Identific | ation | K |
| 2 | | | | | 21. Person in charge pr | | ation of knowle | dge, | | | | | | 27. Proper cooling method used | | | |
| | | | | | and perform duties/ Ce. | rtified Food Mar | nager/ Posted | | 2 | | | | | Maintain Product Temperature | | quate to | |
| | ~ | | | | 22. Food Handler/ no us | | | | 2 | ~ | | | | Maintain Product Temperature 28. Proper Date Marking and d | | quate to | |
| | ~ | | | | • | nauthorized pers | sons/ personnel | | 2 | ν ν | | | | * | isposition | | 7 |
| | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | | 22. Food Handler/ no u | nauthorized pers rdkeeping and l Labeling | sons/ personnel Food Package | afe | 2 | | | | | 28. Proper Date Marking and d | isposition curate, and calibrat | ed; Chemica | / |
| | | | | | 22. Food Handler/ no u | rdkeeping and l Labeling r available; adequalable (shellsto | Food Package uate pressure, s | | 2 | | | | | 28. Proper Date Marking and d. 29. Thermometers provided, ac Thermal test strips Permit Requirement, 1 30. Food Establishment Permit | isposition curate, and calibrate Prerequisite for O | ed; Chemica | |
| | V | | | | 22. Food Handler/ no use Safe Water, Record 23. Hot and Cold Water 24. Required records av destruction); Packaged Conformance v | rdkeeping and l Labeling r available; adeq vailable (shellsto Food labeled | Food Package uate pressure, s ck tags; parasite | e | 2 | ~ | | | | 28. Proper Date Marking and d. 29. Thermometers provided, ac Thermal test strips Permit Requirement, 1 30. Food Establishment Perm 12/31/2025 Utensils, Equip | recurate, and calibrate Prerequisite for Opit (Current/insp recomment, and Vendin | peration port sign po | |
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| Received by: (signature) Noe Cavazos | Print: Noe Cavazos | Title: Person In Charge/ Owner Manager |
|--------------------------------------|---------------------------|----------------------------------------|
| Inspected by: Christy Cortez, RS | Print: Christy Cortez, RS | Business Email: |

Form EH-06 (Revised 09-2015)

| | ment Name: Ocina Del Tio Mon | Physical A | | City/State: Rockwa | ıl TX | License/Permit # Page 15 Page | ge <u>2</u> of <u>2</u> | | | |
|-------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------|------------------------------|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|--|--|--|
| La Co | | 1001 | TEMPERATURE OBSERVAT | | III, 17 | 10-3031 | | | | |
| Item/Loc | ation | Temp F | Item/Location | Temp F | Item/Loca | tion | Temp F | | | |
| cold to | op/cut tomatoes | 45 | beans/pork | 158/162 | ² beans/beans | | 41/41 | | | |
| shre | edded cheese | 45 | beef | 165 | beef/beef | | 41/41 | | | |
| | cut lettuce | 48 | chicharrones | 148 | on | on counter/rice | | | | |
| un | der/hot dogs | 45 | reach in drink cooler/milk | 46 | | beef | 105 | | | |
| radishe | es in water for reference | 46 | white freezer | -1 | on ice/beef | | 91 | | | |
| or | n stove/beef | 154 | WIC/rice | 41 | | 89/85 | | | | |
| | pork | 198 | rice | 41 | ice d | ream freezei | -20 | | | |
| stea | am wells/rice | 156 | beef stew | 41 | | | | | | |
| Τ. | T | | SERVATIONS AND CORRECTI | | | | | | | |
| Item Number | AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: | | | | | | | | | |
| | Hand sink 104F equ | uipped | | | | | | | | |
| 2 | Items in cold tops to b | e 41F o | below/to discard at 4 hou | rs/small a | amounts | only/ no overstock | | | | |
| 40 | Avoid use of foil to I | ine she | ves | | | | | | | |
| 45 | Need to clean floors | s/food d | ebris | | | | | | | |
| 45 | Maintenance needed to | o floors (d | cracked tiles), walls (need to | replace | FRP), ne | eed baseboards replac | ed | | | |
| 45 | Need to seal holes in walls | | | | | | | | | |
| <u> </u> | When replacing ceiling tiles, do not replace with acoustic tiles | | | | | | | | | |
| 2 | Milk in reach in drink cooler at 46/needs to cold hold at 41F or below | | | | | | | | | |
| | Digital thermo and gloves used | | | | | | | | | |
| 45 | Sani bucket at 100ppm chlorine | | | | | | | | | |
| 45 | Need to clean floor drains 3 comp sink 110F, sani sink setup to 100ppm chlorine | | | | | | | | | |
| 36 | to store wiping cloth | | | IIIIE | | | | | | |
| 42 | To clean in/around/ | | | | | | | | | |
| 21 | | | er on duty during prep a | nd servi | ce | | | | | |
| 27 | | | | | | F or below | | | | |
| | Need to aggressively cool foods/2 hours to 70F then 4 hours to 41F or below Foods on counter made an hour previous, some on ice slurries, moved to WIC | | | | | | | | | |
| | Once foods reach 135, must aggressively cool | | | | | | | | | |
| 40 Need cleanable containers for straws, etc, avoid Styrofoam cups as storage | | | | | | | | | | |
| 32 To clean cutting boards where discolored and scored | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| Received (signature) | | | Noe Ca | V270 | 16 | Title: Person In Charge/ Own Manager | er | | | |
| Ingnost | I Was Cavazos | | Define | ٧۵۷ | | ivialiayei | | | | |
| Inspected (signature) | | tez, 1 | Christy Co | Christy Cortez, RS | | | cted | | | |