Follow-up fee of \$50.00 is required after 1st Followup

Retail Food Establishment Inspection Report

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First aid kit
Allergy policy/training
Vomit clean up Employee health
Employee health

Da	ite:			Time in:	Time out:	_	License/Pe							Food hand		nanagers	Do 20 1	of 3
		0/25		2:48	3:40		To po		_					?		ff site	Page 1	
		e of Ir		tion: 1-Routine ne:	2-Follow		3-Complai ct/Owner N		4-]	Invest	igati	on	5-CO/Con * Number	struction of Repeat Vi		Other	TOTAL/S	CORE
_				and general store		Down		Т	T.T.	1		0		of Violations		p: Yes	13/8	7/B
		l Addı wn Ro			Ne	Pest control eed info			Hoo Na	3 a	١	leed t	se trap / waste oi to check as it ma	ide solicited	No F	PiCS	. 0, 0	
Ma		C omplia e appro		Status: Out = not in co	ompliance IN = i	ın complianc l item	e NO Mark) = not o					oplicable COS O, NA, COS	= corrected o	on site R	= repeat vio	olation W-V	Watch
									re Im	ımedi	ate C	orreci	tive Action not t	o exceed 3 a				
O U	I N	N N O A	С		nperature for l		y	R	O	omplia I N	N N O A	C		Em	ployee Hea	nlth		R
Т			S	(F = d) 1. Proper cooling time	legrees Fahrenh and temperature				Т			S	12. Manageme				employees;	
										~			knowledge, res	ponsibilities	, and reporti	ing		
	~			2. Proper Cold Holding See	g temperature(4	1°F/ 45°F)				~			13. Proper use eyes, nose, and To post		and exclus	ion; No dis	charge from	
		~	,	3. Proper Hot Holding	temperature(13	85°F)							•	Preventing C	Contaminati	ion by Han	nds	
		~	,	4. Proper cooking time	and temperatur	re				/			14. Hands clea		perly washe	d/ Gloves u	ised properly	
		~	,	5. Proper reheating pro Hours)	cedure for hot h	holding (16	5°F in 2				v		15. No bare ha alternate metho No prep	nd contact w	ith ready to ollowed (A	eat foods o PPROVED	or approved N. N.)
		~	•	6. Time as a Public Hea	alth Control; pr	rocedures &	records							Highly Su	sceptible P	opulations		
				Ар	oproved Source	e					V		16. Pasteurized Pasteurized egg		•	food not of	fered	
	~			7. Food and ice obtaine good condition, safe, at destruction Comme	nd unadulterate	ed; parasite	Food in								Chemicals			
	~			8. Food Received at pro							V		17. Food addit	ives; approve	ed and prope	erly stored;	Washing Fru	its
					n from Contam	nination			W				18. Toxic subs				nd used	
				9. Food Separated & pr			food						Watch o					
	~			preparation, storage, di									10 777		ter/ Plumb	Ü		
3				10. Food contact surfact Sanitized at0	ppm/temperatu	ure Wrong	bleach	*		/			19. Water from backflow device Self retra	acting		-		
		/		11. Proper disposition of reconditioned	of returned, pre	eviously serv	ved or			/			20. Approved S disposal	Sewage/Wast	tewater Disp	osal Syste	m, proper	
			L															
				Pri	iority Found	lation Ite	ms (2 Poi	ints) v	iolati	ions I	Requi	e Co	rrective Action	within 10 da	ıys			
O U T	I N	N N O A	C O S	Demonstration	n of Knowledge	ge/ Personn	el	ints) v	O U T	I	Requir N N O A	C		within 10 da d Temperat		l/ Identific	cation	R
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Retail Food Establishment Inspection Report

City of Rockwall

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

Form EH-06 (Revised 09-2015)

						Blocked	hand sink
	ment Name:	Physical Ac		City/State:		License/Permit #	Page 2 of 2
Rockw	all drug and general store	Down	town Rockwall	Rockwa	<u> </u>	Need	
Item/Loc	ation	Temp F	TEMPERATURE OBSERVA	ATIONS Temp F	Item/Loca	tion	Temp
	ential cooler / freezer	34/1	<u> </u>	10	100112 2000		<u> </u>
1 looids		ו /דיכ	7 un				
			wrapped				
Day		39	candies				
pe	v cooler						
			- <u></u>				
			GODDEGE GODDEGE				
Item	AN INSPECTION OF YOUR ES		SERVATIONS AND CORRECT NT HAS BEEN MADE. YOUR ATTE			HE CONDITIONS OBSE	ERVED AND
Number	NOTED BELOW: All temps take						
	Still not using soft serv	/e machin	ie				
	Still have self serve ca	ındyap	prox 6 that are unwrappe	d there fire	have so	coops	
	Ingredients by request	for unwra	apped and wrapped items	s - comom	oounder	un aware	
10	Scoops should be was	sh daily	??				
W	Containers for candy	when dirt	y or at restock To use FIF	O to confir	m		
39	Store scoops with han	dles up					
	No peanut items						
	Hot water at 110						
10/33	Not using kitchen area	except for	or warewashing - observe	ed soap , b	leach ar	nd test strips	Not set up
	Test strips within date	11/25					No sanitiz
	Residential dishwashe	er not use	d for store only personal	not hooke	d up ?		set up
W	Using area for cleaning	g pharma	cy items as wellso har	nd sink and	I three co	omp used by con	npounder to
47			parate duties - washing so			-	•
42	Residential cooler toC	lean as n	eeded no Tcs foods at th	is time bev	erages		
	If using for Tcs will nee	ed to add	thermo for food and coole	er			
	Pull down Faucet is se	elf retracti	ng above sink level- confi	irmed			
W	Using correct blea	ach this	time none mixed at	insp			
35	_		g cloths if using wipi	•	to be s	stored in Sani	
47			to address excessive clu				
	If using soft serve unit	to provid	e cleaning protocol from	company			
33	Mop sink never hooke	ed lup					
	Permit not posted						
	Owner is a food mana	ager and	is not on site				
46			s provided / need self clo	sing door			
	Adowning@scmpharm		_ '				
Received	by:		Print:			Title: Person In Charg	ge/ Owner
(signature)	See abov	/e					
Inspected	l by:		Print:				
(signature)	See abov	ıtríck	RS				