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: 7/30/24		1	Time in: 8:35	Time out: 9:10				ense/Permit # S-7820					Page 1 of _	2		
					tion: 1-Routine	2-Follow U		3-Complai		4-	Inve	stiga	tion		5-CO/Construction 6-Other TOTAL/SCO	RE
La	qui	nta	Inr		^{ne:} Suites - Breakfas		Jay S		Name:	1 **			0		Number of Repeat Violations: Number of Violations COS: e tran:/ waste oil Follow-up: Yes 0/100/	/Δ
		al A		ess: vall,	Tx	-	est contro olab by n			Ho N/a			Gre N/a	ease	e trap :/ waste oil Follow-up: Yes Volume Vo	, ,
Ma					Status: Out = not in co points in the OUT box for Prio	each numbered it		Mark '		heckm	ark in	appro	priate	e bo	plicable COS = corrected on site R = repeat violation W = Wat ox for IN, NO, NA, COS Mark an in appropriate box for R ive Action not to exceed 3 days	ch
Co O U	Î	ance N O	Sta N A	tus C O		nperature for Fo		,	R		ompli		Statu	_		R
T	N	U	A	s	Proper cooling time:	egrees Fahrenhe				T		U		s	Employee Health 12. Management, food employees and conditional employees;	
	•				No Leftovers 2. Proper Cold Holding	temperature(41)	°F/ 45°F)							knowledge, responsibilities, and reporting 13. Proper use of restriction and exclusion; No discharge from	_
	~				See			,			•				eyes, nose, and mouth Employee health form posted	
	'				3. Proper Hot Holding See 4. Proper cooking time	_									Preventing Contamination by Hands 14. Hands cleaned and properly washed/ Gloves used properly	
	•				5. Proper reheating pro-			65°F in 2			•				15. No bare hand contact with ready to eat foods or approved	+
		•			Hours) 6. Time as a Public Hea	alth Control: pro	cedures	& records							alternate method properly followed (APPROVED Y. N.) Gloves & utensils	L
	/				Milk for cereal										Highly Susceptible Populations 16. Pasteurized foods used; prohibited food not offered	
					7. Food and ice obtaine	proved Source	d source:	Food in							Pasteurized eggs used when required N/A	L
	•				good condition, safe, and destruction US food	nd unadulterated;	l; parasite								Chemicals	
	~				8. Food Received at pro Checking	oper temperature					•				17. Food additives; approved and properly stored; Washing Fruits & Vegetables Water	
					Protection 9. Food Separated & pr	ofected prevente		z food			'				18. Toxic substances properly identified, stored and used	L
	~				preparation, storage, di	splay, and tasting	g								Water/ Plumbing	
	~				Sanitized at 200	ppm/temperature	re				~				19. Water from approved source; Plumbing installed; proper backflow device City approved	
	~				11. Proper disposition of reconditioned Disc	_	nously se	rved or			~				20. Approved Sewage/Wastewater Disposal System, proper disposal	
		_			Pri	ority Founda	ation It	ems (2 Po	ints)	violai	tions	Requ	uire (Cor	rective Action within 10 days	
									_	_						
O U T	I N	N O	N A	C O S		n of Knowledge/	/ Personi		R	U T	N	N O	A	C O S	Food Temperature Control/ Identification	R
				О	Demonstration 21. Person in charge pr and perform duties/ Cer 1	esent, demonstra	/ Person	nowledge,	_	U	N		A	О	·	R
				О	21. Person in charge pr and perform duties/ Cer	esent, demonstra rtified Food Man	/ Person ation of k nager (CI	nowledge, FM)	_	U	N		A	О	Food Temperature Control/ Identification 27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature No leftovers 28. Proper Date Marking and disposition Great date labels	R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Jay Soun	Print: Jay Soun	Title: Person In Charge/ Owner
Inspected by: Richard Hill (signature)	Print: Richard Hill	Business Email:

Form EH-06 (Revised 09-2015)

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	nent Name: inta Inn	Physical A		Tity/State: Rockwa	II. Tx	License/Permit # FS-7820	Page	<u>2</u> of <u>2</u>					
2444		000 11	TEMPERATURE OBSERVAT		., .,	1.07020							
Item/Loc	ation	Temp	Item/Location	Temp	Item/Loca	tion		Temp					
Cooler		34	UR Fridge	35	33			39					
	eam Cheese	37	Liquid eggs	39	2 Door Freezer HTT		HTT	6.2					
	∕ogurt/HBE	37/38	Half & Half	38	Manda A Fiddle a			4.0					
-	Hot holding		Whole milk	38	Market Fridge			40					
	Eggs	161	Residential Combo		Mark	et Freezer l	HTT	9.8					
	Sausage	143	Freezer HTT	7.1									
F	rench Toast	139	Refrigerator amb										
			Cream cheese	40									
Item	AN INSPECTION OF VOLID ES	~ -	SERVATIONS AND CORRECTIV			HE CONDITIONS OBSEI	DVED 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												
			ater than 101 both rooms										
	Hand sink equipped g												
			ni 200ppm, strips current										
	_		7-10 weekends, only 3 hou		مانوللانيار) h.u.a							
	Using tphc for milk at cereal bar, discarded when breakfast is closed within 3 hrs												
	Red sani bucket not setup, using spray bottle tested 200ppm												
	Food is precooked and rethermalized onsite per manufacturer's directions and held at 135 or greater												
	Buffet sign posted requiring the use of new plate each visit Chemicals stored low under sink												
	All hot food is dicarded, no leftovers												
	Using digital thermo, gloves & utensils for Rte foods												
	Washing utensils as needed and at closed daily												
	Waffle batter is discarded daily, start with new bag every morning												
	Kitchen is clean, organized and looks good												
	Using disposable cutle	ery and p	ates for breakfast bar										
	Market items are manufactured with labels on back of package, all within date as well												
W	Need to fill small holes in wall within storage area of kitchen												
Received (signature)		/e	See abo	ove		Title: Person In Charge	e/ Owner						
Inspected (signature)			Richard										
Form FIL 06	6 (Revised 09-2015)	-	· - I Horiaid			Samples: Y N	# collecte	ed					