## **Retail Food Establishment Inspection Report**

First aid kit
Allergy policy
Vomit clean up
Employee health

Date: 6/20/2025		25								Est. Type Risk Category Page 1 of 2	<u>.</u>					
Purpose of Inspectors Establishment Narryia Yia Yia's Ho				Nan		Contact/Own	3-Complaint 4-Investigation ct/Owner Name: Dria Kaprantzas							5-CO/Construction   6-Other   TOTAL/SCOR   * Number of Repeat Violations: / Number of Violations COS:		
Physical Address: 2435 Ridge Rd Rockwall, TX  Pest control: Forterra/6-17-2025							•		Hood Grease			Gre Roa	ease	e trap : Follow-up: Yes Inner/12-19-2025/500gal No	9/91/A	
М					Status: Out = not in compoints in the OUT box for	each numbered i			chec	kmar	rk in	appro	priat	e bo	plicable COS = corrected on site R = repeat violation W-Watch ox for IN, NO, NA, COS Mark an in appropriate box for R	1
Priority Items (3 Points) violations R						ons Req	uire			ance	Statu		ive Action not to exceed 3 days	R		
Ŭ T	U N O A O Time and Temperature for Food Safety								U N O A O Employee Health					• •		
	~				1. Proper cooling time a	and temperature	,				~				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
	2. Proper Cold Holding temperature(41°F/ 45°F)							•		~				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth		
	3. Proper Hot Holding temperature(135°F)													Preventing Contamination by Hands		
		4. Proper cooking time and temperature									~				14. Hands cleaned and properly washed/ Gloves used properly	
		~			5. Proper reheating procedure for hot holding (165°F in 2 Hours)						~				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N )	
3 6. Time as a Public Health Control; procedures & records					ds	•						Highly Susceptible Populations				
					Approved Source						~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
	~				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction  Sysco										Chemicals	
	~				8. Food Received at pro	e							17. Food additives; approved and properly stored; Washing Fruits & Vegetables			
	Ľ				check at rece	ipt ı from Contami	ination		-		<u>'</u>				18. Toxic substances properly identified, stored and used	
	~				9. Food Separated & propreparation, storage, dis				•						Water/ Plumbing	
	~				10. Food contact surfact Sanitized at	ı			<u></u>			-	19. Water from approved source; Plumbing installed; proper backflow device			
	~				11. Proper disposition of reconditioned		=		<u>,                                    </u>				20. Approved Sewage/Wastewater Disposal System, proper disposal			
					reconditioned disc										^	
					Pri	ority Founda	ation Items (2	Points	) vio	olatio	ons I	Reau	uire (	Cor	rective Action within 10 days	
O U T	I N	N O	N A	C O S	Demonstration	•		Points	) vio	Olatio O U T	I N	N	N A	Cor. C O S	Food Temperature Control/ Identification	R
		N O		О		of Knowledge	e/ Personnel	R	) via	O U T	I	N	N A	C O		R
	N	N O		О	Demonstration 21. Person in charge pro	esent, demonstr	e/ Personnel ration of knowled mager/ Posted	R	) vio	O U T	I N	N	N A	C O	Food Temperature Control/ Identification  27. Proper cooling method used; Equipment Adequate to	R
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## **Retail Food Establishment Inspection Report**

Received by: (signature) Victoria Kaprantzas	Print: Victoria Kaprantzas	Title: Person In Charge/ Owner OWNEr					
Inspected by: Christy Cortez, RS	Print: Christy Cortez, RS	Business Email:					
Form EH-06 (Revised 09-2015)							

	ment Name:	Physical A	ddress:	City/State:	JI TV	License/Permit #	Page <u>2</u> of <u>2</u>						
YIA Y	ia's House of Gyros	2435	Ridge Rd  TEMPERATURE OBSERVAT	Rockwa	all, IX	FS-9362							
Item/Loc	cation	Temp F	Item/Location	Temp F	Item/Loca	tion	Temp 1						
2 door	glass cooler/gyro meat	40	cold top/cut tomatoes	41									
chic	cken skewers	40	cheese	41									
lar	mb skewers	39	under/spanakopita	32									
back	cooler/gyro meat	42	steam wells/soup	178									
raw chicken		35	soup	169									
2 do	or freezer ambient	14	dessert case	39									
W	hite freezer	1											
W	hite freezer	-7											
Item			SERVATIONS AND CORRECTIVE				DVIDE ::-						
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:												
	Cookline hand sink	100F e	quipped										
	3 comp sink 123F												
	sani bucket at 100p	•											
W			ecoming an issue of retaining										
	Plumbers have been out/ need building landlord to address issues as has been an issue with adjacent tenants as well												
	<u> </u>		within 2-3 hours/then pl		metal p	ans in freezer							
	Meat in pan on counter/half pans/used for 2 hours max												
6	Need to document TPHC/for gyro meat												
32 42	To address cutting boards where badly discolored/scored  To clean in/around/on equipment												
45	To clean in/around/on equipment  To clean back back wall behind cookline, grill												
34	Some flies												
36		cloths	on aprons/store in sani	buckets	s instea	d							
45	Maintenance to wal			Buonote		<u>.                                    </u>							
	Digital thermo	,	<del>9</del>										
	3												
D			Detect		ı	Tid., D Y. Co	a/ O						
Received (signature)	•	tzas	Victoria Ka	prant	zas	Title: Person In Charg  Owner	e/ Owner						
Inspected (signature)		tor	RS Christy Co	ortez	R6								
	6 (Revised 09-2015)	16/2/, 1	Commisty Co	<i>πι<del>σ</del>∠,</i>	110	Samples: Y N	# collected						