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: 7/16/25			Time in: 1:05	Time out: 2:00		FS-0		[#] 0106					2 CPFM	Food handlers	Page 1	of <u>2</u>		
Purpose of Inspection: 1-Routine 2-Follow Up 3-Compla							nt 4-Investigation					5-CO/Construction	6-Other	TOTAL/S	CORE			
Establishment Name: Contact/Owner I The Bagel Lady Revi Menasc								e:					Number of Repeat Violations: 1 Number of Violations COS:		0/00/4			
Physical Address: 316 S Goliad Rockwall, Tx Pest control: Spidermen 7/1/25								Hood Grease N/a IMC 1/16						Follow-up: Yes ✓ No ☐	8/92	2/A		
Ma					Status: Out = not in co points in the OUT box for	$\frac{IN}{\text{ench numbered ite}}$	complianc em	ce NO Mark '		t obser					plicable COS = corrected on s x for IN, NO, NA, COS Mar	site $\mathbf{R} = \text{repeat vio}$ rk an \mathbf{X} in appropriat	lation W= V e box for R	Watch
Co	Priority Items (3 Points) violations							Requ		ire Immediat			_	ive Action not to exceed 3 days				
O U T	I N	I N N C Time and Temperature for Food Safety			R	U T	I	N	N A	N C	Employee Health							
1		~		· S	Proper cooling time and temperature					12. Management, food employees and conditional knowledge, responsibilities, and reporting					employees;			
3					2. Proper Cold Holding temperature(41°F/ 45°F)					~				13. Proper use of restriction ar eyes, nose, and mouth Employee health form		charge from		
		~			3. Proper Hot Holding temperature(135°F)										ntamination by Han	ıds		
		~			4. Proper cooking time and temperature					/				14. Hands cleaned and proper	rly washed/ Gloves u	ised properly		
		~			5. Proper reheating prod Hours)	cedure for hot hole	lding (16	55°F in 2			~				15. No bare hand contact with alternate method properly following Gloves and utensils)
	/				6. Time as a Public Hea	alth Control; proce	edures &	& records							Highly Susce	eptible Populations		
					Ap	proved Source					~				16. Pasteurized foods used; pre Pasteurized eggs used when re		fered	
	7. Food and ice obtained from approgood condition, safe, and unadultera destruction Sysco					nd unaduÎterated; j									CI			
	~				8. Food Received at pro Checking	oper temperature					/				17. Food additives; approved a & Vegetables Water	and properly stored;	Washing Frui	its
	,				Protection	n from Contamin	ation				/				18. Toxic substances properly Stored low and separa		d used	
	~				9. Food Separated & pr preparation, storage, dis	splay, and tasting										r/ Plumbing		
3					10. Food contact surfac Sanitized at100	ppm/temperature	:				'				19. Water from approved sour backflow device City approved			
	11. Proper disposition of returned, previously served or reconditioned Discard						/				20. Approved Sewage/Wastew disposal	vater Disposal Syster	m, proper					
0	T	N.T.	3.7	G	Pri	ority Foundat	tion Ite	ems (2 Po	, <u> </u>			_			rective Action within 10 days	3		
O U T	I N	N O	N A	C O S		ority Foundat n of Knowledge/ l		`	ints)	viola U	I	Req N O	uire N A	Cor.		e Control/ Identific	ation	R
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Retail Food Establishment Inspection Report

City of Rockwall

Received by: Revi Menasche	Print: Revi Menasche	Title: Person In Charge/ Owner
Inspected by: Richard Hill (signature)	Print: Richard Hill SIT	Business Email:

Form EH-06 (Revised 09-2015)

	nent Name: Begal Lady	Physical A		ity/State: Rockwal	I, Tx	License/Permit # Page FS-0000106	2 of 2		
		m	TEMPERATURE OBSERVAT	IONS			l m		
Item/Loc	erator 1	Temp	Item/Location	Temp	Item/Loca		Temp 42/28		
			UC fridge coffee			salad/sausage cheddar /tomato			
Cr	eam cheese		Milk/whip/coldfoam	51/50/49	Slice	38/39			
	HB eggs	38	Icecream freezer	8.6	Salmon		38		
F	reezer 2 htt	6.9	Beverage cooler	45	/pl	39/39			
Fre	eezer 3 HTT	8.7	Dessert display	39					
F	reezer 1 htt	9.5	UC cooler	45	Black	39/39			
G	lass cooler	N/a	Half & half/milk	46/47	Thawing salmon		34		
Pre	p cooler back	37	Prep cooler		De	3.4			
T ₄			SERVATIONS AND CORRECTIV		,~				
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW: all temperature		ENT HAS BEEN MADE. YOUR ATTENT! F	ON IS DIRE	CTED TO T	HE CONDITIONS OBSERVED A	ND		
	Restrooms all equippe	d greate	r than 100 throughout kitche	n					
			er than 105 throughout kitch						
10			ng chlorine sani 100ppm, st	•					
10			nold on deflection plate, burn inoperative during inspection		and allov	v to dry before ice accur	nuiales		
			ses, handed directly to custo		na utens	sils			
	Utensils cleaned every		•		<u></u>				
	Ice cream freezer now	being u	sed to store frozen food on s	ervice lir	ne				
25			ROP, must remove or pierce				insp		
2			y items discarded within 4 ho	ours impr	oper col	d holding			
	Sani buckets filled at 3								
	Using red digital therm Dessert freezer contains of		e cream sandwiches / popsicle a	l individua	llv labels	and prepackaged by manu	ıfacturer		
					,	and proposinged by main			
Received (signature)		e	See abo	ove		Title: Person In Charge/ Owner			
Inspected (signature)	pby: M Hz	(Z)	S Richard	Hill	SIT	Samples: Y N # collector	ed		