Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

	nte: /21	12	202	25	Time in: 2:30	Time out: 3:35	License/I							Est. Type	Risk Category	Page 1 of 2	2_
					tion: 1-Routine	2-Follow				-Inve	stiga	tion	n	5-CO/Construction	6-Other	TOTAL/SCOI	RE
Es	tabli nn	shm	ent	Nan	ne:		Contact/Owner	-			- 0			★ Number of Repeat Violati ✓ Number of Violations CO			
Ph	ysica	al A	ddre	ess:			Pest control :			ood		G	reas	e trap :	Follow-up: Yes	90/10/	A
27			_		Rockwall, TX Status: Out = not in con	Be mpliance IN = i	errett/6-27-202 n compliance	5 NO = no	n/a		N/	-		s/250gal/6-6-2025 Policable $COS = corrected on signature COS = correcte$	No D - repeat vio	lation W-Wate	h
Ma					points in the OUT box for	each numbered	item Mark	'√'ac	heckm	nark in	appr	opria	ate bo	ox for IN, NO, NA, COS Mark	k an 💢 in appropriate	e box for R	.11
Co	mpli				Prio	rity Items (3	3 Points) violation		(Compl	iance	Stat	tus	ive Action not to exceed 3 days	S		
U T	I N	N O	N A	C O S	Time and Tem $(F = de$	nperature for l egrees Fahrenh	Food Safety neit)	R	U	J N	N O	N A	o s	Emplo	yee Health		R
	~			, o	1. Proper cooling time a			П		7			, i	12. Management, food employe knowledge, responsibilities, and		employees;	
					2. Proper Cold Holding	temperature(4	1°F/ 45°F)	$\downarrow \downarrow$	-					13. Proper use of restriction and		charge from	
	~				2. Proper Cold Holding	temperature(4	1 17 43 1)			~				eyes, nose, and mouth	u exclusion, no uisc	charge nom	
		~			3. Proper Hot Holding to	emperature(13	5°F)							Preventing Cont	tamination by Han	ıds	
		~			4. Proper cooking time	and temperatur	re	\dagger		~				14. Hands cleaned and properly	y washed/ Gloves u	sed properly	
		/			5. Proper reheating proc Hours)	edure for hot h	holding (165°F in 2			_				15. No bare hand contact with ralternate method properly follows:			
		•			6. Time as a Public Hea	lth Control		4	L					alternate method property folio	Wed (AFFROVED	1	
		~			o. Time as a rubiic nea	iui Conuoi, pro	ocedures & records	\perp				ı		~ -	ptible Populations	S 1	
					Арр	proved Source	e			~				16. Pasteurized foods used; pro Pasteurized eggs used when rec		erea	
	П				7. Food and ice obtained									no eggs			
	~				good condition, safe, an destruction	d unadunterate	u; parasite							Che	emicals		
					8. Food Received at pro	per temperatur	re	+						17. Food additives; approved a	nd properly stored;	Washing Fruits	
L	_									~				& Vegetables	.1 1	1 1	
						from Contam			L	~				18. Toxic substances properly i	identified, stored an	d used	
	~				9. Food Separated & propreparation, storage, dis									Water	/ Plumbing		
3					10. Food contact surface Sanitized at		,			~			i	19. Water from approved source backflow device	ce; Plumbing installe	ed; proper	
	~				11. Proper disposition o reconditioned	of returned, pre-	viously served or			~				20. Approved Sewage/Wastewa disposal	ater Disposal Syster	m, proper	
			_		Pri	4 E		oints)	viola	tions	Reg	uire	Cor				
					1110	ority Found	lation Items (2 P							rective Action within 10 days			
O U T	I N	N O	N A	C O S	Demonstration			R	U	I J N	N O	N A	C	Food Temperature	· Control/ Identific	ation	R
U T					Demonstration 21. Person in charge pro and perform duties/ Cer	of Knowledge esent, demonst	e/ Personnel	R	C	I J N	N	N	C		d; Equipment Adec		R
U	N			О	Demonstration 21. Person in charge pro	esent, demonstrified Food Ma	e/ Personnel ration of knowledge, anager/ Posted	R	U	I N	N	N	C	Food Temperature 27. Proper cooling method used	d; Equipment Adec		R
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Received by: (signature) Charles Hoff	Print: Charles Hoff	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: Ny John's	Physical Address: 2785 Ridge Rd		City/State: Rockw	all, TX	License/Permit # FS-9292	Page <u>2</u> of <u>2</u>			
	,	ı	TEMPERATURE OBSERVAT	ΓIONS	,					
Item/Loc	ation	Temp F	Item/Location	Temp F	Item/Loca	ition	Temp F			
WIF a	mbient	-2	overstock cooler/roast beef	41						
WI	C/tomatoes	36	turkey	41						
reach	n in cooler/dressing	40								
cold top/turkey		41								
ham		41								
	chicken	42								
	cheese	42								
unde	er/ cut tomatoes	41								
		Ol	SERVATIONS AND CORRECTI	VE ACTIO	NS					
Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND									
	Front hand sink 108	BF equip	pped							
45	To clean floors/und		•							
	Condensation in WI									
22			ys of hire to have food h	nandler	s license	9				
	Ice deflector panel i		-							
	3 comp sink 128F	•								
10/33	Sani sink/setup less	than 1	50ppm quats							
10	· · · · · · · · · · · · · · · · · · ·									
10	Sani dispenser at 3 comp sink not dispensing correctly/need to repair									
	Inspector provided quat tal	os just to h	nold over till repair. Otherwise wi	II need to	force open	closed sani/to hand	d mix			
	Gloves used for all	prep/R	ΓΕ							
34	Couple of flies									
	Digital thermos									
	Soda/tea nozzles V	/RS da	ily							
36	Need to store wipin	g cloths	in sani buckets							
45	To clean hand sink/	around								
	-		Ta :			I				
Received (signature)			Charles	Но	ff	Title: Person In Charg				
Inspected (signature)	l by:	_	RS Christy Co							