Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

7/	7/28/2025 1:45 3:00 i		License/Permit # FOOD5043 3-Complaint 4-Investigation							Est. Type Risk Category	Page <u>1</u> of <u>2</u>						
		se o i ishm				2-Follow U		-Complai t/Owner N		4-]	Inve	stiga	ation	1	5-CO/Construction 6-Other	TOTAL/SCOR	RE
					ise		Contact	JOWNEI 1	variic.						✓ Number of Violations COS:	10/90/	Δ
Ph 30	ysic 3 E	al A I-3	ddre 80 F	ess: Roc	kwall, TX	Re	est control entokil/7-	-9-2025		Hoo America		5-2025	Gı LE	ease S/5	e trap : Follow-up: Yes 🗸 5-27-2025	10/30//	$\boldsymbol{\wedge}$
.,		Com	plia	nce S	Status: Out = not in co	ompliance IN = in	compliance	NO) = not						plicable COS = corrected on site R = repeat viola	ation W-Watch	ch
Ma	ark t	ne ap	oprop	riate	points in the OUT box for								_		ox for IN, NO, NA, COS Mark an in appropriate ive Action not to exceed 3 days	box for K	
Co	mpl I	iance N	Sta N	C	Time and Ter	nperature for F	ood Safety	,	R	Co		N	N	tus C			R
U T	N	0	A	o s	(F = c)	legrees Fahrenhe	eit)			U T	N	O	A	o S	Employee Health		
	~				1. Proper cooling time	and temperature					~				12. Management, food employees and conditional e knowledge, responsibilities, and reporting	employees;	
					2. Proper Cold Holding	g temperature(41°	°F/ 45°F)								13. Proper use of restriction and exclusion; No disch	harge from	-
3											~				eyes, nose, and mouth		
	>				3. Proper Hot Holding	temperature(135	5°F)								Preventing Contamination by Hand	ls	
		~			4. Proper cooking time	and temperature	2				~				14. Hands cleaned and properly washed/ Gloves us	ed properly	
		~			5. Proper reheating pro Hours)	cedure for hot ho	olding (165	°F in 2			~				15. No bare hand contact with ready to eat foods or alternate method properly followed (APPROVED		
					6. Time as a Public He	alth Control: pro	cedures &	records								/	
		•											1		Highly Susceptible Populations 16. Pasteurized foods used; prohibited food not offe	ored	
					AĮ	proved Source					~				Pasteurized eggs used when required eggs COOked	ared	
					7. Food and ice obtaine good condition, safe, a	nd unadultaratad		ood in							oggo oconoc		
	~				destruction Sysco)	i, parasite								Chemicals		
	~				8. Food Received at pr	oper temperature	•								17. Food additives; approved and properly stored; V & Vegetables	Washing Fruits	
					check at rece	eipt					~				water only 18. Toxic substances properly identified, stored and	Lucad	<u> </u>
						n from Contami		1			~				18. Toxic substances properly identified, stored and	used	
	~				9. Food Separated & p. preparation, storage, di			00a							Water/ Plumbing		
	/				10. Food contact surface Sanitized at100_			ed and			~			1	19. Water from approved source; Plumbing installed backflow device	d; proper	
	~				11. Proper disposition reconditioned disc			ed or			~			İ	20. Approved Sewage/Wastewater Disposal System disposal	ı, proper	
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Received by: (signature) Will Mc Mullen	Print: Will McMullen	Title: Person In Charge/ Owner Manager
Inspected by: Chwisty Cortez, RS	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

	ment Name:	Physical A		City/State:	u TV	License/Permit # P	Page <u>2</u> of <u>2</u>		
rne	Oar House	303 E	: 1-3U TEMPERATURE OBSERVAT	Rockwa	III, IX	FOOD5043			
Item/Loc	cation	Temp F	Item/Location	Temp F	Item/Locat	tion	Temp F		
salad cold top/cut tomatoes ranch		49	9 lemons for reference		drawers/beef		41		
		50	butter	44	chicken		41		
2 door	reach in freezer ambient	2	steam well/soup	144/147					
\	WIC/pasta	44	line cold top/pasta	41					
,	tomatoes	45	shrimp	shrimp 42					
	lasagna	43	beef	41					
	beef	43	43 large cold top/ cut tomatoes						
mas	shed potatoes	43	artichokes	41					
Item	AN INSPECTION OF YOUR ES		SERVATIONS AND CORRECTIONS AND CORRECTIONS HAS BEEN MADE. YOUR ATTENT			HE CONDITIONS OBSERVED	O AND		
Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:								
	3 comp sink 130F								
	Dishwasher sanitizi		• •						
	Prep hand sink 144								
W			ow and separate/ not ov						
W			knives in hand sink/ nee	eds to be	e for ha	nd washing only			
2			enser in salad cold top						
	•		issues/need to replace						
	To discard any TCS foods over 4 hours								
42	Need to clean inside								
45			ment, behind equipment	•					
45	To clean air return	vents							
42	To clean fans in WI								
2	WIC NEEDS to cold								
32			where discolored/ score	ed					
45	To patch holes in w	alls							
32	·	-	posed wood/needs to b	e cleana	able				
W Need new test strips/expired last month									
	Sani bucket strong/need to setup to 100ppm chlorine								
42	Need to clean in/around/on equipment/ lots of grease buildup and food debris								
W	Need to store wiping cloths in sani buckets/not on prep tables and cutting boards								
	3 comp sink 110F								
- 4	Using steramine tabs for bar warewashing								
34									
28	Need to date mark all foods once cooked or opened/discard 6 days later								
32	,								
45									
W To watch condition of bar top/to be sealed to be cleanable									
Received	l by:		Print:		T	Title: Person In Charge/ Ow	ner		
(signature)				Mulle	en	Manager	-		
Inspected (signature)		tez, 1	RS Christy Co	ortez,	RS	0 1 2 2 "	1 1		
5 511.01	6 (Revised 09-2015)	<i>U</i>		•		Samples: Y N # col	lected		