Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

	ite:				Time in:	Time out:		License/Po							Est. Type	Risk Category	4 ~	,	
					- 00	DD 6673								Page <u>1</u> of <u>2</u>	<u>-</u>				
	Purpose of Inspection: 1-Routine 2-Follow Up 3-Compla Establishment Name: Contact/Owner N						4-Investigation			ation	ı	5-CO/Construction	5-CO/Construction 6-Other * Number of Repeat Violations:		TOTAL/SCORE				
					e Williams Elem	nentary	Contac	ct/Owner r	vame:						✓ Number of Violations		0/100/	Λ	
Physical Address: 350 Dalton Rd Rockwall, TX Pest control: internal/monthly									Hood Guardian/5-202				Grease trap :		e trap : to send to Teddy w/city	Follow-up: Yes No	0/100/A		
IN = in compliance											observed NA = not applicable COS = corrected on site						olation W- Watch	h	
Mark the appropriate points in the OUT box for each numbered item Mark '\' a checkmark in appropriate box for IN, NO, NA, COS Mark an in appropriate box for R Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days																			
	mpli				F1101	Tity Items	(3 Folius)	violations		C	Compli	iance	e Stat	tus	lve Action not to exceed 5 de	ays		R	
U T	N O A O Time and Temperature for Food Safety							y	R	U	J N			О	Employee Health				
1		(F = degrees Fahrenheit) 1. Proper cooling time and temperature							1				3	12. Management, food emplo		employees;			
	~										knowledge, respons 13. Proper use of re				- 1	nsibilities, and reporting			
	~	2. Proper Cold Holding temperature(41°F/ 45°F)									~			charge from					
		3. Proper Hot Holding temperature(135°F)								Descenting Contemination by Han						. 1.			
		•			4. Proper cooking time a	and temperat	ture				Preventing Contamination by I 14. Hands cleaned and properly washed/ Glove								
		~			5. Proper reheating proc			5°E in 2			gloves used 15. No bare hand contact with ready to eat foo								
		~			Hours)	cedure for no	n noiding (10.) F III 2			~								
		~			6. Time as a Public Hea	alth Control; j	procedures &	records							Highly Sus	ceptible Populations			
				<u> </u>									1		16. Pasteurized foods used; p				
					Арр	proved Sour	rce				~				Pasteurized eggs used when no raw shelled e	required COS			
					7. Food and ice obtained good condition, safe, an			Food in							no raw one nod oggo				
	~				destruction LaBatt		area, parasite									Chemicals			
	_				8. Food Received at pro		ture								17. Food additives; approved	d and properly stored;	Washing Fruits		
	~				checked at re	ceipt					~				& Vegetables				
					Protection	from Conta	amination				~				18. Toxic substances properl	ly identified, stored an	nd used		
	~	9. Food Separated & protected, prevented during food preparation, storage, display, and tasting												Wat	ter/ Plumbing				
	~				10. Food contact surface Sanitized at			ned and			V				19. Water from approved sou backflow device	urce; Plumbing install	ed; proper		
					11. Proper disposition o			ved or							20. Approved Sewage/Waste	ewater Disposal System	m. proper		
	~				reconditioned disca	arded	, , , , , , , , , , , , , , , , , , , ,				~				disposal		71 1		
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		37	27		Prio	ority Foun	ndation Ite	ms (2 Po							rrective Action within 10 day	ys		D	
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Retail Food Establishment Inspection Report

Received by: (signature) Valerie Simmons	Print: Valerie Simmons	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: ebbie Williams Elementary	Physical A			Ci	ty/State:	all, TX		Permit #	Page	e <u>2</u> of <u>2</u>	
KISDIN	ebble Williams Elementary	350 L		ERATURE O			all, IA	FOOD 6673				
Item/Loc	ation	Temp F	Item/Locat		DSEKVAII	Temp F	Item/Loc	ation			Temp F	
milk c	ooler ambient	34										
reach	in hot holding ambient	165										
reach i	n cooler/whipped topping	41										
WIC	/sliced cheese	41										
	WIF	-10										
	V V I I	10										
		OE	SERVATIO	ONS AND CO	ORRECTIVI	E ACTIO	NS					
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW:	TABLISHME	NT HAS BEI	EN MADE. YOU	JR ATTENTIO	ON IS DIRI	ECTED TO T	HE COND	ITIONS OBSE	RVED A	ND	
	Line hand sink 128	F equipr	ned									
				ed.								
W	warewash hand sink 130F equipped Dishwasher sanitizing per temp strips/had to run twice to hit high temp rinse cycle/one door was slightly ajar											
- • • • • • • • • • • • • • • • • • • •	Dishwasher temp s		•				3 0 9 0 10 7 0 1 1	- 400. 11	rae enginay	aja.		
	Line steam wells ar		•			rvice						
					raitor oc	1 1100						
HACCP legs kept/reminder to fill in daily Reminder to dump and refill sanitizer buckets every 2 hours or as often as needed to keep at re Batch cooking								ep at regu	ired pi	om		
												
No leftovers												
Allergy policy on file per student												
	Employee health po		•									
	Menus online and in		• •									
	No dented cans no	ted at in	ed at inspection/ to watch									
	Air curtain at back		·									
Prep line hand sink 108F equipped												
3 comp sink 120F Temp logs kept on outside of hot and cold holding reach ins No raw meat or raw shelled eggs Dial thermos/calibrated every other day												
Received	hv.		D _{ref} .	nt•				Title: De	rson In Chara	e/ Owner	r	
(signature)	•		Valerie Simmons				Title: Person In Charge/ Owner Manager					
Inspected (signature)		tez, R	S		ty Cor	tez,	RS	Samples:	Y N	# collec	ted	