

Retail Food Establishment Inspection Report

- ☒ First aid kit
- ☒ Allergy policy
- ☒ Vomit clean up
- ☒ Employee health

Date: 9/29/2025	Time in: 1:05	Time out: 2:10	License/Permit # FS-9445	Est. Type	Risk Category	Page <u>1</u> of <u>2</u>
Purpose of Inspection: ☒ 1-Routine ☐ 2-Follow Up ☐ 3-Complaint ☐ 4-Investigation ☐ 5-CO/Construction ☐ 6-Other ☐ TOTAL/SCORE						
Establishment Name: Aldi Foods (N Goliad St)			Contact/Owner Name:		* Number of Repeat Violations: ____ ✓ Number of Violations COS: ____	
Physical Address: 3251 N Goliad Rockwall, TX			Pest control : Orkin/9-16-2025/monthly	Hood n/a	Grease trap : n/a	Follow-up: Yes ☐ No ☒
Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation W- Watch 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 X in appropriate box for R						
Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days						
Compliance Status		Time and Temperature for Food Safety (F = degrees Fahrenheit)			R	
OUT	IN	NO	NA	COS		
	✓				1. Proper cooling time and temperature	
	✓				2. Proper Cold Holding temperature(41°F/ 45°F)	
			✓		3. Proper Hot Holding temperature(135°F)	
			✓		4. Proper cooking time and temperature	
			✓		5. Proper reheating procedure for hot holding (165°F in 2 Hours)	
			✓		6. Time as a Public Health Control; procedures & records	
		Approved Source				
	✓				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction corporate	
	✓				8. Food Received at proper temperature	
		Protection from Contamination				
	✓				9. Food Separated & protected, prevented during food preparation, storage, display, and tasting	
	✓				10. Food contact surfaces and Returnables ; Cleaned and Sanitized at _____ ppm/temperature	
	✓				11. Proper disposition of returned, previously served or reconditioned	
		Employee Health			R	
OUT	IN	NO	NA	COS		
	✓				12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting	
	✓				13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
		Preventing Contamination by Hands				
	✓				14. Hands cleaned and properly washed/ Gloves used properly	
	✓				15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)	
		Highly Susceptible Populations				
	✓				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required	
		Chemicals				
	✓				17. Food additives; approved and properly stored; Washing Fruits & Vegetables	
	✓				18. Toxic substances properly identified, stored and used	
		Water/ Plumbing				
	✓				19. Water from approved source; Plumbing installed; proper backflow device	
	✓				20. Approved Sewage/Wastewater Disposal System, proper disposal	
Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days						
Compliance Status		Demonstration of Knowledge/ Personnel			R	
OUT	IN	NO	NA	COS		
	✓				21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager/ Posted 1	
	✓				22. Food Handler/ no unauthorized persons/ personnel	
		Safe Water, Recordkeeping and Food Package Labeling				
	✓				23. Hot and Cold Water available; adequate pressure, safe	
	✓				24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled	
		Conformance with Approved Procedures				
	✓				25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions	
		Consumer Advisory				
	✓				26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label	
		Food Temperature Control/ Identification			R	
OUT	IN	NO	NA	COS		
	✓				27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
	✓				28. Proper Date Marking and disposition	
	✓				29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips	
		Permit Requirement, Prerequisite for Operation				
	✓		✓		30. Food Establishment Permit (Current/insp report sign posted) 12/31/2025	
		Utensils, Equipment, and Vending				
	✓				31. Adequate handwashing facilities: Accessible and properly supplied, used	
	✓				32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used	
	✓				33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided	
Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First						
Compliance Status		Prevention of Food Contamination			R	
OUT	IN	NO	NA	COS		
	✓				34. No Evidence of Insect contamination, rodent/other animals	
	✓				35. Personal Cleanliness/eating, drinking or tobacco use	
	✓				36. Wiping Cloths; properly used and stored	
1					37. Environmental contamination	
	✓				38. Approved thawing method	
		Proper Use of Utensils				
	✓				39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used	
	✓				40. Single-service & single-use articles; properly stored and used	
		Food Identification			R	
OUT	IN	NO	NA	COS		
	✓				41.Original container labeling (Bulk Food)	
		Physical Facilities				
	✓				42. Non-Food Contact surfaces clean	
	✓				43. Adequate ventilation and lighting; designated areas used	
	✓				44. Garbage and Refuse properly disposed; facilities maintained	
1					45. Physical facilities installed, maintained, and clean	
	✓				46. Toilet Facilities; properly constructed, supplied, and clean	
	✓				47. Other Violations	

Retail Food Establishment Inspection Report

Received by: (signature) <i>Jay Lovejoy</i>	Print: Jay Lovejoy	Title: Person In Charge/ Owner Manager
Inspected by: (signature) <i>Christy Cortez, RS</i>	Print: Christy Cortez, RS	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: Aldi Foods (N Goliad St)	Physical Address: 3251 N Goliad	City/State: Rockwall, TX	License/Permit # FS-9445	Page <u>2</u> of <u>2</u>
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TEMPERATURE OBSERVATIONS

Item/Location	Temp F	Item/Location	Temp F	Item/Location	Temp F
dessert freezer	-10	fry freezer	-4	chicken wall ambient	35
bagged fruit freezer	7	German dessert freezer	-6	beef wall	35
German freezer	-11	WIC ambient	-23	cheese wall	33
eggroll freezer	-15	2 door freezer insta cart	-11		
turkey freezer	-12	2 door cooler	33		
pretzel freezer	2	2 door cooler	31		
meatballs freezer	10	dairy WIC amber	32		
Pizza freezer	-7	meat WIC	30		

OBSERVATIONS AND CORRECTIVE ACTIONS

[illegible]

Received by: (signature) <i>Jay Lovejoy</i>	Print: Jay Lovejoy	Title: Person In Charge/ Owner Manager
Inspected by: (signature) <i>Christy Cortez, RS</i>	Print: Christy Cortez, RS	Samples: Y N # collected

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