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|---|----|---|----|-----------------------------|--|---------------------------|--|------------------------------|-----|---|----|-----------------|-----------------------------------|---|---|--|---|
| Date: 9/25/25 | | Time in: 9:45 | | Time out: 10:30 | | License/Permit # FS-9049 | | | | CPFM 2 | | Food handlers 2 | | Page 1 of 2 | | | |
| Purpose of Inspection: <input checked="" type="checkbox"/> 1-Routine <input type="checkbox"/> 2-Follow Up <input type="checkbox"/> 3-Complaint <input type="checkbox"/> 4-Investigation <input type="checkbox"/> 5-CO/Construction <input type="checkbox"/> 6-Other <input type="checkbox"/> | | | | | | | | | | | | | | TOTAL/SCORE | | | |
| Establishment Name: Scottie's Rockwall | | | | | | Contact/Owner Name: Patel | | | | <div>✗ Number of Repeat Violations: 3</div> <div>✓ Number of Violations COS: </div> | | | | 12/88/B | | | |
| Physical Address: 2860 Ridge Rd Rockwall, Tx | | | | Pest control : AJB 10/19/25 | | Hood N/a | | Grease trap :/ waste oil N/a | | Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | | | | | | | |
| 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 ✗ 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 | | Compliance Status | | Employee Health | | | | R | | | |
| OUT | IN | NO | NA | COS | | | | | OUT | IN | NO | NA | COS | | | | |
| | | | ✓ | | 1. Proper cooling time and temperature | | | | | ✓ | | | | 12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting | | | |
| | ✓ | | | | 2. Proper Cold Holding temperature(41°F/ 45°F) See | | | | | ✓ | | | | 13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth Employee health form posted | | | |
| | ✓ | | | | 3. Proper Hot Holding temperature(135°F) See | | | | | | | | Preventing Contamination by Hands | | | | |
| | | | ✓ | | 4. Proper cooking time and temperature | | | | | ✓ | | | | 14. Hands cleaned and properly washed/ Gloves used properly | | | |
| | | | ✓ | | 5. Proper reheating procedure for hot holding (165°F in 2 Hours) | | | | | ✓ | | | | 15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N) Gloves | | | |
| | ✓ | | | | 6. Time as a Public Health Control; procedures & records | | | | | | | | Highly Susceptible Populations | | | | |
| | | | | | Approved Source | | | | | ✓ | | | | 16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required N/a | | | |
| | ✓ | | | | 7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction GSC, Texas Wholesale | | | | | | | | Chemicals | | | | |
| | ✓ | | | | 8. Food Received at proper temperature Checking | | | | | | | ✓ | | 17. Food additives; approved and properly stored; Washing Fruits & Vegetables N/a | | | |
| | | | | | Protection from Contamination | | | | | ✓ | | | | 18. Toxic substances properly identified, stored and used Stored low and separate | | | |
| | ✓ | | | | 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting | | | | | | | | Water/ Plumbing | | | | |
| | ✓ | | | | 10. Food contact surfaces and Returnables ; Cleaned and Sanitized at 100 ppm/temperature | | | | | ✓ | | | | 19. Water from approved source; Plumbing installed; proper backflow device City approved | | | |
| | ✓ | | | | 11. Proper disposition of returned, previously served or reconditioned Discard | | | | | ✓ | | | | 20. Approved Sewage/Wastewater Disposal System, proper disposal | | | |
| Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days | | | | | | | | | | | | | | | | | |
| OUT | IN | NO | NA | COS | Demonstration of Knowledge/ Personnel | | | | R | OUT | IN | NO | NA | COS | Food Temperature Control/ Identification | | R |
| | ✓ | | | | 21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) 2 | | | | | | ✓ | | | | 27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature N/a | | |
| | ✓ | | | | 22. Food Handler/ no unauthorized persons/ personnel 2 | | | | | | ✓ | | | | 28. Proper Date Marking and disposition Good date labels | | |
| | | | | | Safe Water, Recordkeeping and Food Package Labeling | | | | | | ✓ | | | | 29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips Black digital thermo, test strips current | | |
| 2 | | | | | 23. Hot and Cold Water available; adequate pressure, safe 107, good pressure | | | | | | | | | Permit Requirement, Prerequisite for Operation | | | |
| 2 | | | | | 24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled Ice bags | | | | | | ✓ | | | | 30. Food Establishment Permit/Inspection Current/ insp posted Posted and current | | |
| | | | | | Conformance with Approved Procedures | | | | | | | | | Utensils, Equipment, and Vending | | | |
| | ✓ | | | | 25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions | | | | | 2 | | | | | 31. Adequate handwashing facilities: Accessible and properly supplied, used See | | |
| | | | | | Consumer Advisory | | | | | W | | | | | 32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used See | | |
| | ✓ | | | | 26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Bufet Plate)/ Allergen Label | | | | | 2 | | | | | 33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided See | | |
| Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First | | | | | | | | | | | | | | | | | |
| OUT | IN | NO | NA | COS | Prevention of Food Contamination | | | | R | OUT | IN | NO | NA | COS | Food Identification | | R |
| 1 | | | | | 34. No Evidence of Insect contamination, rodent/other animals See | | | | | | ✓ | | | | 41.Original container labeling (Bulk Food) | | |
| | ✓ | | | | 35. Personal Cleanliness/eating, drinking or tobacco use | | | | | | | | | Physical Facilities | | | |
| | ✓ | | | | 36. Wiping Cloths; properly used and stored Using spray bottle | | | | | 1 | | | | | 42. Non-Food Contact surfaces clean | | ★ |
| | ✓ | | | | 37. Environmental contamination | | | | | 1 | | | | | 43. Adequate ventilation and lighting; designated areas used | | |
| | ✓ | | | | 38. Approved thawing method | | | | | | ✓ | | | | 44. Garbage and Refuse properly disposed; facilities maintained | | |
| | | | | | Proper Use of Utensils | | | | | 1 | | | | | 45. Physical facilities installed, maintained, and clean | | ★ |
| | ✓ | | | | 39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used | | | | | | ✓ | | | | 46. Toilet Facilities; properly constructed, supplied, and clean Equipped | | |
| | ✓ | | | | 40. Single-service & single-use articles; properly stored and used | | | | | | | | ✓ | | 47. Other Violations N/a | | |

City of Rockwall

Form EH-06 (Revised 09-2015)

TEMPERATURE OBSERVATIONS

[illegible]

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