

Followup Fee of  
\$50.00 after  
First Followup

**Retail Food Establishment Inspection Report**

**City of Rockwall**

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

Date: 5/29/26	Time in: 8:25	Time out: 9:10	License/Permit # FS-9514	CPFM 8	Food handlers 90	Page <u>1</u> of <u>2</u>
------------------	------------------	-------------------	-----------------------------	-----------	---------------------	---------------------------

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	TOTAL/SCORE
--	--------------------------------------	--------------------------------------	--	--	----------------------------------	-------------

Establishment Name: Chick-fil-A North	Contact/Owner Name: Tim Mosley	Number of Repeat Violations: <input checked="" type="checkbox"/> 0	Number of Violations COS: <input type="checkbox"/> 0	<b>1/99/A</b>
--	-----------------------------------	--	--	---------------

Physical Address: 1979 N Goliad Rockwall, Tx	Pest control : Terminix 3/21/26	Hood Power clean 3/2026	Grease trap / waste oil Darpro 3/27/26 1500g	Follow-up: Yes <input type="checkbox"/> No <input checked="" 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 X in appropriate box for R

**Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Time and Temperature for Food Safety</b> (F = degrees Fahrenheit)						<b>Employee Health</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
1. Proper cooling time and temperature <b>See</b>						12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
2. Proper Cold Holding temperature(41°F/ 45°F) <b>See</b>						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth <b>Employee health form posted</b>					
<input checked="" type="checkbox"/>						<b>Preventing Contamination by Hands</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
3. Proper Hot Holding temperature(135°F) <b>See</b>						14. Hands cleaned and properly washed/ Gloves used properly					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
4. Proper cooking time and temperature <b>See</b>						15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y. N. ) <b>Gloves &amp; utensils</b>					
<input checked="" type="checkbox"/>						<b>Highly Susceptible Populations</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
5. Proper reheating procedure for hot holding (165°F in 2 Hours)						16. Pasteurized foods used; prohibited food not offered <b>Eggs</b>					
<input checked="" type="checkbox"/>						<b>Chemicals</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
6. Time as a Public Health Control; procedures & records						17. Food additives; approved and properly stored; Washing Fruits & Vegetables <b>Veggie wash</b>					
<b>Approved Source</b>						<input checked="" type="checkbox"/>					
<input checked="" type="checkbox"/>						18. Toxic substances properly identified, stored and used <b>Stowed low and separate</b>					
<input checked="" type="checkbox"/>						<b>Water/ Plumbing</b>					
7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction <b>Chick Fil A supply</b>						<input checked="" type="checkbox"/>					
<input checked="" type="checkbox"/>						19. Water from approved source; Plumbing installed; proper backflow device <b>City approved</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
8. Food Received at proper temperature <b>Checking</b>						20. Approved Sewage/Wastewater Disposal System, proper disposal					
<b>Protection from Contamination</b>											
<input checked="" type="checkbox"/>											
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting											
<input checked="" type="checkbox"/>											
10. Food contact surfaces and Returnables ; Cleaned and Sanitized at <u>200</u> ppm/temperature <b>160</b>											
<input checked="" type="checkbox"/>											
11. Proper disposition of returned, previously served or reconditioned <b>Discard</b>											

**Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Demonstration of Knowledge/ Personnel</b>						<b>Food Temperature Control/ Identification</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM) <b>8</b>						27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature <b>Wic</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
22. Food Handler/ no unauthorized persons/ personnel <b>90, during orientation</b>						28. Proper Date Marking and disposition <b>Great Date marking</b>					
<b>Safe Water, Recordkeeping and Food Package Labeling</b>						<input checked="" type="checkbox"/>					
<input checked="" type="checkbox"/>						29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips <b>Digital thermo, strips current</b>					
<input checked="" type="checkbox"/>						<b>Permit Requirement, Prerequisite for Operation</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
23. Hot and Cold Water available; adequate pressure, safe <b>142, Good pressure</b>						30. Food Establishment Permit/Inspection Current/ insp posted <b>Posted &amp; current</b>					
<input checked="" type="checkbox"/>						<b>Utensils, Equipment, and Vending</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled <b>Commercial</b>						31. Adequate handwashing facilities: Accessible and properly supplied, used <b>Equipped</b>					
<b>Conformance with Approved Procedures</b>						<input checked="" type="checkbox"/>					
<input checked="" type="checkbox"/>						32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used <b>Shelves</b>					
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions						<input checked="" type="checkbox"/>					
<b>Consumer Advisory</b>						33. Warewashing Facilities; installed, maintained, used/ Service sink or curb cleaning facility provided <b>Set up and equipped/confirmed 160 st</b>					
<input checked="" type="checkbox"/>											
26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label On menu											

**Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First**

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Prevention of Food Contamination</b>						<b>Food Identification</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
34. No Evidence of Insect contamination, rodent/other animals						41. Original container labeling (Bulk Food)					
<input checked="" type="checkbox"/>						<b>Physical Facilities</b>					
35. Personal Cleanliness/eating, drinking or tobacco use <b>Stored separately</b>						<input checked="" type="checkbox"/>					
<input checked="" type="checkbox"/>						42. Non-Food Contact surfaces clean					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
36. Wiping Cloths; properly used and stored <b>Using all sani wipes</b>						43. Adequate ventilation and lighting; designated areas used					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
37. Environmental contamination <b>See</b>						44. Garbage and Refuse properly disposed; facilities maintained					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
38. Approved thawing method <b>Refrigerator</b>						45. Physical facilities installed, maintained, and clean <b>WIF air block curtains</b>					
<b>Proper Use of Utensils</b>						1					
<input checked="" type="checkbox"/>						46. Toilet Facilities; properly constructed, supplied, and clean <b>Stocked and clean</b>					
<input checked="" type="checkbox"/>						<input checked="" type="checkbox"/>					
39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used						47. Other Violations <b>N/a</b>					
<input checked="" type="checkbox"/>											
40. Single-service & single-use articles; properly stored and used											

**Retail Food Establishment Inspection Report**

**City of Rockwall**

Received by: (signature) <b>Anelle Gamez</b>	Print: <b>Anelle Gamez</b>	Title: Person In Charge/ Owner <b>MOD</b>
Inspected by: (signature) <b>Richard Hill</b>	Print: <b>Richard Hill</b>	Business Email:

Form EH-06 (Revised 09-2015)

Establishment Name: <b>Chick-fil-A North</b>	Physical Address: <b>1979 N Goliad</b>	City/State: <b>Rockwall, Tx</b>	License/Permit # <b>FS-9514</b>	Page 2 of 2
---	---	------------------------------------	------------------------------------	-------------

**TEMPERATURE OBSERVATIONS**

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
WIC amb	35	Drive Thru Service		Fry freezer HTT	9.7
Cooked chicken, Mac&chz	39/38	Cold hold		Hot hold counter service	
Thaw cabinet 1	36	Blend chz/tom	39/39	Eggs/egg whites	155/158
Thaw cabinet 2	38	Slice chz / lettuce	39/40	Sausage/grill chx	146/178
Thaw cabinet 3	37	UC fridge amb	37	UC fridge amb	37
WIF HTT	6.1	Hot hold		Drawer 1&2	38
Breading station 1	36	chx filet/eggs	184/178	Uc freezer HTT	7.6
Breading station 2	37	Cooking Eggs/Chicken filet	202/1999	Cookie freezer HTT	5.4

**OBSERVATIONS AND CORRECTIVE ACTIONS**

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW: all temperatures are taken in F
	Restrooms equipped greater than 103 in each room
	3comp sink setup 142, quat sani 200ppm dishwasher confirmed 160 surface temperature
	Air curtain operational on rear service door and drive thru doors
	Ice machine looks great air gap confirmed
	Allergen awareness poster available
	Discarding all hot holding items every 20 minutes
	Veggie wash confirmed within range via current strips current 01/2029
	Salad Prep cooler, spicy shredded chix 38, shredded chicken 38, lettuce 38, corn 39
	Fruit UC cooler, amb 37
	Lemonade dispenser cleaned 3x weekly
	Soda and tea nozzles cleaned nightly
	Digital thermo available, quat test strips current 07/2028
	UC prep cooler front counter 38, UC cooler front/drive thru 37,37
	UC Bev cooler drive thru out of order w/ sign, dessert cooler 40, yogurt 39
	Soft serve 35/35
	Shake base 39. 2% milk 39
	Hershey syrup is shelf stable, refrigeration not required
	Using sani wipes throughout kitchen and front, no longer using sani buckets 200ppm
	Dumpster area clean and organized
	Handsinks equipped greater than 103 throughout building
45	WIC air block curtains, particularly torn, to replace to make operational as designed

Received by: (signature) <b>See above</b>	Print: <b>See above</b>	Title: Person In Charge/ Owner
Inspected by: (signature) <b>Richard Hill</b>	Print: <b>Richard</b>	Samples: Y N # collected

Form EH-06 (Revised 09-2015)