Retail Food Establishment Inspection Report

First aid kit
Allergy policy
Vomit clean up
Employee health

Date: 2/24/2021				11:35				_	4-Investigation				Susiii Medicini/riigii	Page <u>1</u> of <u>2</u>	
Purpose of Inspection: V 1-Routine 2-Follow Up 3-Compla Establishment Name: Contact/Owner N								4-]	Inve	stiga	ation		5-CO/Construction 6-Other TOTAL/SCO * Number of Repeat Violations:)RE	
Kro.	Kroger #575 DAE & JI Corp Su Kim Physical Address: Pest control:								Hood Grease t			Gr	ease	Number of Violations COS: Follow-up: Yes /	Α
Ridg				·	W/I	main insp			<u>n/a</u>	,	NI.	-		in insp	. 1
Mark	the a	mpna approp	riate	points in the OUT box for e	each numbered i	item	Mark '√'		ckma	ark in	appr	opria	te bo	plicable $COS = corrected on site R = repeat violation W- Wat ox for IN, NO, NA, COS Mark an in appropriate box for R ive Action not to exceed 3 days$	tch
	Compliance Status							Co	ompliance Status		us				
O I U N	N O	$ \begin{array}{c cccc} N & N & C \\ O & A & O \\ S & & & & & \\ \hline \end{array} $ Time and Temperature for Food Safety $ (F = \text{degrees Fahrenheit}) $					1	R	U T	I N	N O	A	C O S	Employee Health	
v	,			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)						\ \ \				Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth	
		~		3. Proper Hot Holding temperature(135°F)										Preventing Contamination by Hands	+
				4. Proper cooking time and temperature						<u></u>				14. Hands cleaned and properly washed/ Gloves used properly	
				5. Proper reheating proce	edure for hot he	olding (165°F	7 in 2							GIOVES USEC 15. No bare hand contact with ready to eat foods or approved	+
	Hours)							•				alternate method properly followed (APPROVED Y N.)			
•	1			6. Time as a Public Heal	th Control; pro	ocedures & re	ecords							Highly Susceptible Populations	
	Approved Source							~				16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required NO EQGS			
,				7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite										Chemicals	
					epot/Dr I										
V	4			8. Food Received at prop	•	e				~				17. Food additives; approved and properly stored; Washing Fruits & Vegetables	
				check at recei	•	ination				~				water only 18. Toxic substances properly identified, stored and used	+
				Protection from Contamination 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting										Water/ Plumbing	
·	,			10. Food contact surface Sanitized at p			and			_				19. Water from approved source; Plumbing installed; proper backflow device	
	,			11. Proper disposition of reconditioned	f returned, prev	viously served	or			V			ĺ	20. Approved Sewage/Wastewater Disposal System, proper disposal	+
Ľ				Prio	rity Founds	ation Itams	: (2 Poin	ıte) wi	iolat	ions	Pag	uira	Cor	•	
O I U N	O A O Demonstration of Knowledge/ Personnel			R	O U		I N N C N O Fo		C O	Food Temperature Control/ Identification	R				
T	,		S	21. Person in charge pre and perform duties/ Cert					Т	~			S	27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature	
- L				22. Food Handler/ no un	authorized pers	sons/ personne	el			~				28. Proper Date Marking and disposition	+
				22. Food Handler/ no unauthorized persons/ personnel Safe Water, Recordkeeping and Food Package Labeling						~			•	29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips	_
23. H				23. Hot and Cold Water available; adequate pressure, safe						•				-l' - l	
				23. Hot and Cold Water	Labeling available; adeq		, safe							dial	
V				24. Required records ava	available; adeq	quate pressure								Permit Requirement, Prerequisite for Operation 30. Food Establishment Permit (Current/insp report sign posted))
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Retail Food Establishment Inspection Report

Received by: (signature) see below	see below	Title: Person In Charge/ Owner
Inspected by: see below (signature)	Print: see below	Business Email:

Form EH-06 (Revised 09-2015)

F								Γ -		
Establishment Name: Kroger #575 DAE & JI Corp		Physical A Ridge	ddress: Road		City/State: Rockwa	all, TX	License/Permit # Page 2 of 2 FS-8038			
J-				URE OBSERVAT		,				
Item/Location		Temp F	Item/Location		Temp F	Item/Loca	tion	Tem	рF	
WIC ambient		35								
WIF ambient		2								
sushi display		35								
under counter cooler/crab		36								
unde	r prep cooler/shrimp	36								
	tuna/crab	37/37								
		OB	SERVATIONS A	ND CORRECTI	VE ACTIO	NS				
Item Number	AN INSPECTION OF YOUR ES NOTED BELOW:						HE CONDITIONS OBSE	ERVED AND		
W	Hand sink 100 F .	Must ha	ve faucet in	correct posi	tion to r	each 10	00			
32	Galvanized shelving	g in WIC	·							
	All sushi labeled wi	th ingred	dients listed/	dated						
	3 comp sink 110 F									
32	Cutting boards nee	d to be r	eplaced/ res	surfaced						
42	Clean non contact f		•							
	pH logs up to date									
40	Discard cardboard boxes after initial use									
	Dr Fish supplier/parasite assurance on invoice Sani sink setup to 200 ppm quats									
	Sani spray 200 ppr		40.0.00							
	Saran on rice roller		ded at least	everv 4 hou	ırs					
	Rice discarded eve			<u> </u>						
45	Clean floors, under			of food debr	is					
		oquipiii		<u> </u>						
Received	by:		Print:				Title: Person In Char	ge/ Owner	_	
(signature)	Sa Kim		S	u Kim			Owner			
Inspected	l by:		Print:							
(signature)	Christy Cor	tez, R	S CI	hristy Co	ortez,	RS	Samples: Y N	# collected		