



Texas Department of State Health Services Retail Food Establishment Inspection Report



Date: 10-17-22	Time in: 2:30 p.m.	Time out: 3:30 p.m.	License/Permit #	Est. Type	Risk Category	Page 1 of 2
Purpose of Inspection: <input type="checkbox"/> 1-Compliance <input checked="" type="checkbox"/> 2-Routine <input type="checkbox"/> 3-Field Investigation <input type="checkbox"/> 4-Visit <input type="checkbox"/> 5-Other						
Establishment Name: Cotton Patch			Contact/Owner Name:		* Number of Repeat Violations: ✓ Number of Violations COS: A	
Physical Address: 3128 E-30 W		City/County: Greenville	Zip Code: 75402	Phone:	Follow-up: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (Circle one)	

Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation
 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 asterisk * in appropriate box for R

Compliance Status						Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days					
O	I	N	N	C	R	O	I	N	N	C	R
U	N	O	A	O		U	N	O	A	O	
T				S		T				S	
Time and Temperature for Food Safety (F = degrees Fahrenheit)						Employee Health					
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
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)						13. 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						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)					
6. Time as a Public Health Control; procedures & records Approved Source						Highly Susceptible Populations					
7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction						16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required					
8. Food Received at proper temperature						Chemicals					
Protection from Contamination						17. Food additives; approved and properly stored; Washing Fruits & Vegetables					
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting						18. Toxic substances properly identified, stored and used					
10. Food contact surfaces and Returnables Cleaned and Sanitized at 200 ppm/temperature 200°C						Water/ Plumbing					
11. Proper disposition of returned, previously served or reconditioned						19. Water from approved source; Plumbing installed; proper backflow device City of Greenville					
						20. Approved Sewage/Wastewater Disposal System, proper disposal					

Compliance Status						Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days					
O	I	N	N	C	R	O	I	N	N	C	R
U	N	O	A	O		U	N	O	A	O	
T				S		T				S	
Demonstration of Knowledge/ Personnel						Food Temperature Control/ Identification					
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
21. Person in charge present, demonstration of knowledge and perform duties/ Certified Food Manager (CFM)						27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature					
22. Food Handler/ no unauthorized persons/ personnel Safe Water, Recordkeeping and Food Package Labeling						28. Proper Date Marking and disposition					
23. Hot and Cold Water available; adequate pressure safe						29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips					
24. Required records available (shellstock tags, parasite destruction); Packaged Food labeled						Permit Requirement, Prerequisite for Operation					
Conformance with Approved Procedures						30. Food Establishment Permit (Current & Valid)					
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions						Utensils, Equipment, and Vending					
26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label						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					

Compliance Status						Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First					
O	I	N	N	C	R	O	I	N	N	C	R
U	N	O	A	O		U	N	O	A	O	
T				S		T				S	
Prevention of Food Contamination						Food Identification					
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
34. No Evidence of Insect contamination, rodent/other animals						41. Original container labeling (Bulk Food)					
35. Personal Cleanliness/eating, drinking or tobacco use						Physical Facilities					
36. Wiping Cloths; properly used and stored						42. Non-Food Contact surfaces clean					
37. Environmental contamination						43. Adequate ventilation and lighting; designated areas used					
38. Approved thawing method						44. Garbage and Refuse properly disposed; facilities maintained					
Proper Use of Utensils						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					
40. Single-service & single-use articles; properly stored and used						47. Other Violations					

Received by: <i>Allysha Taylor</i>	Print: Allysha Taylor	Title: Person In Charge/ Owner
Inspected by: <i>Tammy McMahon</i>	Print: Tammy McMahon	Business Email:

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Texas Department of State Health Services
Retail Food Establishment Inspection Report

Establishment Name: Cotton Patch Physical Address: 3128 I-30 City/State: Greenville, TX License/Permit #: _____ Page 2 of 2

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
reach in	39°F	hot box	154°F	cold hold	38°F
reach in	41°F				
Salad cooler	38°F				
Rice	152°F				
Gravy	139°F				
Potatoes	140°F				
Chicken Fried Steak	179°F				

OBSERVATIONS AND CORRECTIVE ACTIONS
AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:

- 29 Digital thermometer observed broken - not able to temp food. Replace thermometer.
- 31 Obtain Chlorine test strips for warewash machine as hand wash sinks are to be dedicated and paper towels.
- 35 All hand wash Sinks are to be dedicated and stocked with soap and paper towels.
- 35 Several staff members in the kitchen were observed without a hat or hairnet. Make sure all employees handling food in your kitchen have on a hat or hair net.
- Personal drink observed in food prep area. Keep personal eating and drinking separate from food prep area and clean dishes.
- 43 Lighting over the oven was observed very dim. Replace bulbs.
- 45 Missing ceiling tile in the office. Broken tile observed in the walk-in. Replace tile and grout to seal.
- Women's restroom faucet should be adjusted to keep for 15 seconds minimum to ensure proper hand washing.
- * Clean microwaves. Clean inside of all coolers. Have Ecolab come out to service the sanitizers of the three compartment sinks.
- Maple ice build up in the freezer that needs to be addressed.

Received by: Hannah Borja (signature) Print: Hannah Borja Title: Person In Charge/Owner Assistant
 Inspected by: Tammy McElhan (signature) Print: Tammy McElhan Samples: Y N # collected _____
 Form EH-06 (Revised 09-2015) RS RS