



**City of Greenville Public Health**  
 2315 Johnson St. Greenville TX 75401 (903) 457-3161  
**Retail Food Establishment Inspection Report**

0 points  
 (A)

Establishment: <u>Greenville Donuts</u>				Owner:				Permit # <u>8468783</u>			
Physical Address: <u>9701 Wesley St Suite 201</u>				Zip: <u>75402</u>				Phone:			
Time In/Out: <u>11:00-11:20a</u>		Mo: <u>9</u> Day: <u>28</u> Yr: <u>22</u>		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		RFSM Req. <u>Yes</u>		Registered Food Service Manager: <u>Kyung Nam</u>		RFSM No: <u>8281423</u>	
Purpose of Inspection: <u>1-Routine</u>				2-Follow-up				3-Complaint			
				4-Consultation				5-Other			

OUT 5 pts	IN	NA	NO	COS	Temperature/Time Requirements	Remarks
					Violations Require Immediate Corrective Action	
	<input checked="" type="checkbox"/>				1. Proper Cooling for Cooked/Prepared Food	
	<input checked="" type="checkbox"/>				2. Cold Hold ( <u>41</u> degrees Fahrenheit /45 degrees Fahrenheit) <u>34.5°F - 38°F milk - RIC</u>	
		<input checked="" type="checkbox"/>			3. Hot Hold ( <u>135</u> degrees Fahrenheit)	
				<input checked="" type="checkbox"/>	4. Proper Cooking Temperatures	
				<input checked="" type="checkbox"/>	5. Rapid Reheating (165 degrees Fahrenheit in 2 Hrs)	

Item/Location/Temperature

OUT 4 Pts	IN	NA	NO	COS	Personnel/Handling/Source Requirements	Remarks
					Violations Require Immediate Corrective Action	
	<input checked="" type="checkbox"/>				6. Personnel with Infections Restricted/Excluded	
	<input checked="" type="checkbox"/>				7. Proper/Adequate Handwashing <u>Dedicated hand Sink (Hand wash only)</u>	
	<input checked="" type="checkbox"/>				8. Good Hygienic Practices (Eating/Drinking/Smoking/Other)	
	<input checked="" type="checkbox"/>				9. Approved Source/Labeling	
	<input checked="" type="checkbox"/>				10. Sound Condition	
	<input checked="" type="checkbox"/>				11. Proper Handling of Ready-To-Eat Foods	
	<input checked="" type="checkbox"/>				12. Cross-contamination of Raw/Cooked Foods/Other	
	<input checked="" type="checkbox"/>				13. Approved Systems (HACCP Plans/Time as Public Health Control) <u>4 hrs</u>	
	<input checked="" type="checkbox"/>				14. Water Supply - Approved Sources/Sufficient Capacity/Hot and Cold Under Pressure <u>City of Greenville</u>	

OUT 3 Pts	IN	NA	NO	COS	Facility and Equipment Requirements	Remarks
					Violations Require Immediate Corrective Action not to exceed 10 Days	
	<input checked="" type="checkbox"/>				15. Equipment Adequate to Maintain Product Temperature	
	<input checked="" type="checkbox"/>				16. Handwash Facilities Adequate and Accessible	
	<input checked="" type="checkbox"/>				17. Handwash Facilities with Soap and Towels	
	<input checked="" type="checkbox"/>				18. No Evidence of Insect Contamination <u>Excel pest 9-24-22</u>	
	<input checked="" type="checkbox"/>				19. No Evidence of Rodents/Other Animals	
	<input checked="" type="checkbox"/>				20. Toxic Items Properly Labeled/Stored/Used	
	<input checked="" type="checkbox"/>				21. Manual/Mechanical Warewashing and Sanitizing at <u>200ppm</u> temperature <u>Chlorine</u>	
	<input checked="" type="checkbox"/>				22. Manager Demonstration of Knowledge/Certified Food Manager	
	<input checked="" type="checkbox"/>				23. Approved Sewage/Wastewater Disposal System, Proper Disposal <u>City of Greenville</u>	
	<input checked="" type="checkbox"/>				24. Thermometers Provided/Accurate/Properly Calibrated ( $\pm 2$ degrees Fahrenheit) <u>Case / Stem</u>	
	<input checked="" type="checkbox"/>				25. Food Contact Surfaces of Equipment and Utensils Cleaned/Sanitized/Good Repair	
	<input checked="" type="checkbox"/>				26. Posting of Consumer Advisories (Disclosure/Reminder/Buffer Plate)	
	<input checked="" type="checkbox"/>				27. Food Establishment Permit(Display) <u>Send hard copy no email</u>	

Subtotal **Other Violations** - Require Corrective Action, Not to Exceed 90 Days or the Next Inspection, Whichever Comes First

5 pts Keep mop hanging when not in use.

4 pts

3 pts

Total Score	Inspected by: <u>Sammy McMathan RS</u>	Phone: (903) 457-3146	Fax: (903) 457-0503
Follow-Up Yes No	Received by: <u>[Signature]</u>	Print: <u>Myung R Na</u>	Title: <u>owner</u> 1