



Texas Department of State Health Services
Retail Food Establishment Inspection Report

Date: 10-7-22 Time in: 3:00 Time out: 3:40 pm License/Permit # Est. Type Risk Category Page 1 of 2
Purpose of Inspection: 1-Compliance 2-Routine 3-Field Investigation 4-Visit 5-Other TOTAL/SCORE
Establishment Name: Snuffer's Contact/Owner Name: * Number of Repeat Violations:
Physical Address: 3104 I-30 City/County: Greenville, TX Zip Code: 75462 Phone: Follow-up: Yes No (circle one) A

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

Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days
Table with columns for Compliance Status (OUT, IN, NO, NA, COS) and rows for Time and Temperature for Food Safety, Employee Health, Preventing Contamination by Hands, Highly Susceptible Populations, Chemicals, Water/Plumbing.

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days
Table with columns for Compliance Status (OUT, IN, NO, NA, COS) and rows for Demonstration of Knowledge/ Personnel, Food Temperature Control/ Identification, Safe Water, Recordkeeping and Food Package Labeling, Permit Requirement, Prerequisite for Operation, Conformance with Approved Procedures, Utensils, Equipment, and Vending, Consumer Advisory.

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First
Table with columns for Compliance Status (OUT, IN, NO, NA, COS) and rows for Prevention of Food Contamination, Food Identification, Proper Use of Utensils, Physical Facilities.

Received by: (signature) Print: Kathryn Sells Title: Person In Charge/ Owner
Inspected by: (signature) Print: Tammy McManhan RS Business Email:



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TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
bar cooler	39°F				
reach in	39.5°F				
walk in	34°F				
bottom RIC	35°F				

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

39 Plates and baskets observed face up. All plates baskets bowls etc are to be placed face down to ~~the~~ avoid contamination

Keep drains and grates clean

Area behind bar at the Soda Machine lens needs to have foam removed and a cap with the hose cutout hole and then silicone. Same thing in the back by the soda bibs

Drain Plug needed for dumpster
Dumpster is damaged call for replacement
dedicate all hand sinks

Renew Health Permit immediately if has not been renewed in three years \$900 to be current until the end of 2022.

TABC application and payment to be made with the City of Greenville. Speak to ROSA at 2315 Johnson St.

Received by: (signature) <i>Kathryn Sells</i>	Print: Kathryn Sells	Title: Person In Charge/ Owner
Inspected by: (signature) <i>T. McManan RS</i>	Print: T. McManan RS	Samples: Y N # collected