



## Texas Department of State Health Services Retail Food Establishment Inspection Report



Date: 11-10-22		Time in: 9:30 am		Time out: 10:25 am		License/Permit #: 8617018		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													TOTAL SCORE					
Establishment Name: McDonald's 0244						Contact/Owner Name:			* Number of Repeat Violations:			A						
Physical Address: 4929 Hwy 169 South Greenville						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 OUF box for each numbered item. Mark with a checkmark in appropriate box for IN, NO, NA, COS. Mark an asterisk '*' in appropriate box for R.																		
<b>Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days</b>																		
Compliance Status						Compliance Status												
O U T		I N	N O	N A	C O S	Time and Temperature for Food Safety (F = degrees Fahrenheit)		R		O U T		I N	N O	N A	C O S	Employee Health		R
						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 <input checked="" type="checkbox"/> N <input type="checkbox"/> )		
						6. Time as a Public Health Control; procedures & records Approved Source										Highly Susceptible Populations		
						7. <del>Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction</del>										16. Pasteurized foods used; <del>prohibited food not offered</del> - Pasteurized eggs used when required		
						8. Food Received at proper temperature										Chemicals		
						9. Food Separated & protected, prevented during food preparation, storage, display, and tasting										17. Food additives; approved and properly stored; Washing Fruits & Vegetables		
						10. Food contact surfaces and Returnables: Cleaned and Sanitized at ppm/temperature										18. Toxic substances properly identified, stored and used		
						11. Proper disposition of returned, previously served or reconditioned										Water/ Plumbing		
																19. Water from approved source; Plumbing installed; proper backflow device City of Greenville		
																20. Approved Sewage/Wastewater Disposal System, proper disposal Liquid Environmental Solutions		
<b>Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days</b>																		
Compliance Status						Compliance Status												
O U T		I N	N O	N A	C O S	Demonstration of Knowledge/ Personnel		R		O U T		I N	N O	N A	C O S	Food Temperature Control/ Identification		R
						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 Obtain Acc strips		
						24. Required records available (shelfstock tags; parasite destruction); Packaged Food labeled										Permit Requirement, Prerequisite for Operation		
						25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions										30. Food Establishment Permit (Current & Valid)		
						26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label										Utensils, Equipment, and Vending		
																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		
<b>Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First.</b>																		
Compliance Status						Compliance Status												
O U T		I N	N O	N A	C O S	Prevention of Food Contamination		R		O U T		I N	N O	N A	C O S	Food Identification		R
						34. No Evidence of insect contamination, rodent/other animals Ecotab 11-3-22										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		
						39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used										45. Physical facilities installed, maintained, and clean		
						40. Single-service & single-use articles; properly stored and used										46. Toilet Facilities; properly constructed, supplied, and clean		
																47. Other Violations		
Received by (signature): Ana McDaniel						Print: Flota McDaniel						Title: Person In Charge/ Owner						
Inspected by (signature): J. McMath R.S						Print: T. McMath R.S						Business Email:						



Texas Department of State Health Services  
Retail Food Establishment Inspection Report

Establishment Name: McDonald's Physical Address: 4929 Hwy 69 S City/State: Greenville, TX License/Permit # \_\_\_\_\_ Page 2 of 2

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Cold hold	40°F				
REC	33-				
Hash browns	39°F				
	144°F				

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

- \* Obtain DAC test strips for sanitizer buckets and 3 compartment sink.
- \* All employees that are preparing or packaging food must have a hat or hair net.
- \* Sink by back 3-Compartment sink must be a dedicated hand sink.
- \* Check exhaust fans in Restrooms
- \* Soap dispensers empty in women's Restrooms
- \* Obtain a drain plug for dumpster
- \* Clean area that trash receptacles are in
- \* Clean under Soda Machine area

Received by (signature) Flora McDaniel Print: Flora McDaniel Title: Person In Charge/ Owner  
 Inspected by (signature) T. McManahan R.S Print: T. McManahan R.S Samples: Y N # collected \_\_\_\_\_