



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



Date: 11-15-22 Time in: 10:05 am Time out: 10:30 am License/Permit #: 4911848 Est. Type: \_\_\_\_\_ Risk Category: \_\_\_\_\_ Page 1 of 1

Purpose of Inspection:  1-Compliance  2-Routine  3-Field Investigation  4-Visit  5-Other \_\_\_\_\_ TO FALS SCORE: \_\_\_\_\_

Establishment Name: Atwood's Contact/Owner Name: \_\_\_\_\_ \* Number of Repeat Violations: \_\_\_\_\_  
 ✓ Number of Violations COS: \_\_\_\_\_

Physical Address: 5222 Wesley City/County: Greenville Zip Code: 75401 Phone: \_\_\_\_\_ Follow-up: Yes  No  (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 OUI box for each numbered item. Mark ✓ a checkmark in appropriate box for IN, NO, NA, COS. Mark \* in appropriate box for R.

Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days					
Compliance Status	Item	Time and Temperature for Food Safety (F = degrees Fahrenheit)	Compliance Status	Item	Employee Health
OUI	IN	NO	NA	COS	R
					12. Management, food employees and conditional employees; knowledge, responsibilities, and reporting
					13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth
					Preventing Contamination by Hands
					14. Hands cleaned and properly washed/ Gloves used properly
					15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y N)
					Highly Susceptible Populations
					16. Pasteurized foods used; prohibited food not offered
					Pasteurized eggs used when required
					Chemicals
					17. Food additives; approved and properly stored; Washing Fruits & Vegetables
					18. Toxic substances properly identified, stored and used
					Water/Plumbing
					19. Water from approved source; Plumbing installed; proper backflow device <u>City of Greenville</u>
					20. Approved Sewage/Wastewater Disposal System, proper disposal

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days					
Compliance Status	Item	Demonstration of Knowledge/ Personnel	Compliance Status	Item	Food Temperature Control/ Identification
OUI	IN	NO	NA	COS	R
					27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature
					28. Proper Date Marking and disposition
					29. Thermometers provided, accurate, and calibrated; Chemical/Thermal test strips
					Permit Requirement, Prerequisite for Operation
					30. Food Establishment Permit (Current & Valid)
					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

Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days at Next Inspection, Whichever Comes First					
Compliance Status	Item	Prevention of Food Contamination	Compliance Status	Item	Food Identification
OUI	IN	NO	NA	COS	R
					41. Original container labeling (Bulk Food)
					Physical Facilities
					42. Non-Food Contact surfaces clean
					43. Adequate ventilation and lighting; designated areas used
					44. Garbage and Refuse properly disposed; facilities maintained
					45. Physical facilities installed, maintained, and clean
					46. Toilet Facilities; properly constructed, supplied, and clean
					<u>Exhaust Fans covered receptacle</u>
					47. Other Violations

Received by: (signature) Roger Krone Print: ROGER KRONE Title: Person In Charge/ Owner

Inspected by: (signature) J. Memahan R.S Print: J. Memahan R.S Business Email: \_\_\_\_\_

Form EH-06 (Revised 09-2015)

\* Clean ~~to~~ webs in front entry area.  
 \* Covered receptacles in ladies room