



Texas Department of State Health Services
Retail Food Establishment Inspection Report



Date: 11-30-22 Time in: 2:00 p.m Time out: 3:15 p.m 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: Hub Crib Contact/Owner Name: * Number of Repeat Violations: Number of Violations COS: A-

Physical Address: 6815 I-30 City/County: Greenville Zip Code: 75402 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 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, and 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, Permit Requirement, Prerequisite for Operation, Utensils, Equipment, and Vending.

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, Physical Facilities, and Proper Use of Utensils.

Received by: [Signature] Print: Trevor Miller Title: Person In Charge/ Owner
Inspected by: [Signature] R.S Print: T. McMahon R.S Business Email:



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Retail Food Establishment Inspection Report**

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Establishment Name: Rib Crib	Physical Address: 16815 I-30	City/State: Greenville, TX	License/Permit #	Page <u> </u> of <u> </u>
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TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Potato Salad	38°F				
Coke Slaw	37°F				
Sausage	142°F				
brisket	139°F				
hot box	141°F				
beans	152°F				
Reach in	39°F				
Walk in	34.2°F				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:
21	Certified food manager not observed on site. Certified food manager is required during all hours of operation. 2 days to complete. Registered all food managers with City of Greenville.
23	Hand sink by breaker panel room observed with low pressure. Pressure is inadequate for washing hands. 5 days to repair.
34	Several small flies observed throughout restaurant. Make sure drains are being cleaned and all surfaces wiped down.
35	Personal items observed on clean silverware. Personal items are to be stored away from clean utensils and dishes.
42	Walls observed moderately soiled.
44	Dumpsters observed damaged - missing doors and lids. Contact Gen's customer service for replacements. Keep correspondence.
45	Ceiling tiles and vents observed with dust build up. Light covers observed with dust build up and dead insects. 7 days

Received by: (signature) <i>Trevor Miller</i>	Print: Trevor Miller	Title: Person In Charge/ Owner
Inspected by: (signature) <i>J. McMahon R.S</i>	Print: T. McMahon R.S	Samples: Y N # collected