



Texas Department of State Health Services Retail Food Establishment Inspection Report



Date: 12-1-22 Time in: 9:50 a.m Time out: 10:25 License/Permit # _____ Est. Type _____ Risk Category _____ Page 1 of 1

Purpose of Inspection: 1-Compliance 2-Routine 3-Field Investigation 4-Visit 5-Other **TOTAL/SCORE**

Establishment Name: Big Lots Stores Contact/Owner Name: _____ * Number of Repeat Violations: _____
 ✓ Number of Violations COS: _____

Physical Address: 6408 Wesley St City/County: Greenville Zip Code: 75402 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**

Compliance Status						Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days											
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R						
						Time and Temperature for Food Safety (F = degrees Fahrenheit)						Employee Health					
												Preventing Contamination by Hands					
												Highly Susceptible Populations					
												Chemicals					
												Water/ Plumbing					
												Food Temperature Control/ Identification					
												Permit Requirement, Prerequisite for Operation					
												Utensils, Equipment, and Vending					
												Food Identification					
												Physical Facilities					
												Other Violations					

Compliance Status						Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days											
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R						
						Demonstration of Knowledge/ Personnel						Food Temperature Control/ Identification					
												Permit Requirement, Prerequisite for Operation					
												Utensils, Equipment, and Vending					
												Food Identification					
												Physical Facilities					
												Other Violations					

Compliance Status						Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection, Whichever Comes First											
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R						
						Prevention of Food Contamination						Food Identification					
												Physical Facilities					
												Other Violations					

Received by: _____ (signature) Title: Person In Charge/ Owner

Print: EMERLYN RICHARD

Inspected by: T. McMahen R.S (signature) Business Email: _____

Print: T. McMahen R.S

44 Trash and broken glass observed around dumpster

45 Ceiling tiles observed with heavy water damage. Replace tiles 2 weeks

46 Flooring observed damaged and broken. Replace tiles that are damaged

46 Covered receptacle needed in back ladies restroom. Attach exhaust Vents to ceiling