



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



| | | | | | | | | | | | | | |
|---|---|----------------|---|--------------------|---|---|---|-----------------|---|--------------------------------------|---|---|--|
| Date: 12-2-22 | | Time in: 11:20 | | Time out: 12:00 pm | | License/Permit #: 7528432 | | 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 | | | | | | | | | | | | | |
| Establishment Name: Popeye's Chicken | | | | | | Contact/Owner Name: | | | | * Number of Repeat Violations: _____ | | TOTAL/SCORE: A | |
| Physical Address: 6615 I-30 | | | | | | 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 O U T 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 | | | | | | | | | | | | | |
| Compliance Status | | | | | | Compliance Status | | | | | | | |
| O | I | N | N | C | R | O | I | N | N | C | R | | |
| U | T | | A | O | | U | T | | A | O | | | |
| Time and Temperature for Food Safety (F = degrees Fahrenheit) | | | | | | Employee Health | | | | | | | |
| 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 YES/NO) | | | | | | | |
| 6. Time as a Public Health Control; procedures & records Approved Source | | | | | | Highly Susceptible Populations | | | | | | | |
| 7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction | | | | | | 16. Pasteurized foods used; prohibited food not offered Pasteurized eggs used when required | | | | | | | |
| 8. Food Received at proper temperature | | | | | | Chemicals | | | | | | | |
| Protection from Contamination | | | | | | 17. Food additives; approved and properly stored; Washing Fruits & Vegetables | | | | | | | |
| 9. Food Separated & protected, prevented during food preparation, storage, display, and tasting | | | | | | 18. Toxic substances properly identified, stored and used | | | | | | | |
| 10. Food contact surfaces and Returnables - Cleaned and Sanitized at 200 ppm/temperature | | | | | | Water/ Plumbing | | | | | | | |
| 11. Proper disposition of returned, previously served or reconditioned | | | | | | 19. Water from approved source; Plumbing installed; proper backflow device City of Greenville | | | | | | | |
| | | | | | | 20. Approved Sewage/Wastewater Disposal System, proper disposal Southwest Disposal | | | | | | | |
| Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days | | | | | | | | | | | | | |
| Compliance Status | | | | | | Compliance Status | | | | | | | |
| O | I | N | N | C | R | O | I | N | N | C | R | | |
| U | T | | A | O | | U | T | | A | O | | | |
| Demonstration of Knowledge/ Personnel | | | | | | Food Temperature Control/ Identification | | | | | | | |
| 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 | | | | | | 28. Proper Date Marking and disposition | | | | | | | |
| Safe Water, Recordkeeping and Food Package Labeling | | | | | | 29. Thermometers provided, accurate, and calibrated; Chemical/ Thermal test strips | | | | | | | |
| 23. Hot and Cold Water available; adequate pressure, safe | | | | | | Permit Requirement, Prerequisite for Operation | | | | | | | |
| 24. Required records available (shellstock tags; parasite destruction); Packaged Food labeled | | | | | | 30. Food Establishment Permit (Current & Valid) | | | | | | | |
| Conformance with Approved Procedures | | | | | | Utensils, Equipment, and Vending | | | | | | | |
| 25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions | | | | | | 31. Adequate handwashing facilities: Accessible and properly supplied, used | | | | | | | |
| Consumer Advisory | | | | | | 32. Food and Non-food Contact surfaces cleanable, properly designed, constructed, and used | | | | | | | |
| 26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label | | | | | | 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 or Next Inspection, Whichever Comes First | | | | | | | | | | | | | |
| Compliance Status | | | | | | Compliance Status | | | | | | | |
| O | I | N | N | C | R | O | I | N | N | C | R | | |
| U | T | | A | O | | U | T | | A | O | | | |
| Prevention of Food Contamination | | | | | | Food Identification | | | | | | | |
| 34. No Evidence of Insect contamination, rodent/other animals | | | | | | 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 | | | | | | | |
| Proper Use of Utensils | | | | | | 45. Physical facilities installed, maintained, and clean | | | | | | | |
| 39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used | | | | | | 46. Toilet Facilities; properly constructed, supplied, and clean | | | | | | | |
| 40. Single-service & single-use articles; properly stored and used | | | | | | 47. Other Violations | | | | | | | |
| Received by: (signature) Sandy Romero | | | | | | Print: Sandy R. | | | | | | Title: Person In Charge/ Owner | |
| Inspected by: (signature) T. McMahon R.S | | | | | | Print: T. McMahon R.S | | | | | | Business Email: | |



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Establishment Name: Popeye's Physical Address: 6615 I-30 City/State: Greenville, TX License/Permit # Page 2 of 2

TEMPERATURE OBSERVATIONS

Table with 6 columns: Item/Location, Temp, Item/Location, Temp, Item/Location, Temp. Handwritten entries include: Chicken 136, 186°F; Chicken 136, 45°F; hot hold 116°F; walk in 48°F; reach in 37°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:

- * Ice formation in freezer. Remove ice build up
* Current permit not observed on site
* Grease trap records not on-site current

All food managers are to register with the City of Greenville.

Received by: Sandy Romero Title: Person In Charge/ Owner
Inspected by: J. Memahan R.S Print: Sandy R.
J. Memahan R.S Samples: Y N # collected