



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



Date: 12-22 Time in: 1:15 p.m. Time out: 1:35 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

Establishment Name: R Food Mart Contact/Owner Name: _____ * Number of Repeat Violations: _____
 ✓ Number of Violations COS: _____

Physical Address: 4101 Oneal St 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 **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

Compliance Status						R	Compliance Status						R											
O	I	N	N	C	O		O	I	N	N	C	O												
U	T	O	A	S	S	U	T	O	A	S	S													
Time and Temperature for Food Safety (F = degrees Fahrenheit)													Employee Health											
							✓						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											
													20. Approved Sewage/Waste-water Disposal System, proper disposal											

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days

Compliance Status						R	Compliance Status						R											
O	I	N	N	C	O		O	I	N	N	C	O												
U	T	O	A	S	S	U	T	O	A	S	S													
Demonstration of Knowledge/ Personnel													Food Temperature Control/ Identification											
							✓						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 or Next Inspection, Whichever Comes First

Compliance Status						R	Compliance Status						R											
O	I	N	N	C	O		O	I	N	N	C	O												
U	T	O	A	S	S	U	T	O	A	S	S													
Prevention of Food Contamination													Food Identification											
							✓						34. No Evidence of Insect contamination, rodent/other animals											
							✓						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											
													47. Other Violations											

Received by: Nina Loya Print: Nina Loya Title: Person In Charge/ Owner
 Inspected by: J. Menahan R.S. Print: J. Menahan R.S. Business Email: _____



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Retail Food Establishment Inspection Report

Establishment Name: K Food Mart	Physical Address: 4101 Oneal	City/State: Greenville, TX	License/Permit #	Page <u>22</u> of <u>22</u>
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TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Walk-in	35.5°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:
34	Dead insects observed. Remove dead insects behind machines
42	Tracks on all cold holding coolers observed sealed.
45	Holes observed in the ceiling. Fill holes and silicone
	Reattach ceiling tiles that are hanging down.
46	Paper towels not available in Restroom. Stock paper towels
40	Single serve items observed on the ground. Make sure that items are off the floor or remove all excess items that are not needed.
	Remove make-line cooler that is not in use
	Hang maps when not in use
	Secure cylinder.
	Clean microwave
	Plastic flaps in walk-in need to be replaced

Received by: (signature) <i>[Signature]</i>	Print: Nina Loyd	Title: Person In Charge/ Owner
Inspected by: (signature) <i>J. McManahan R.S</i>	Print: T. McManahan R.S	Samples: Y N # collected