



Texas Department of State Health Services Retail Food Establishment Inspection Report



Date: 2-6-22	Time in: 11:00 a.m.	Time out: 11:35 a.m.	License/Permit #	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: Firehouse Subs			Contact/Owner Name:		* Number of Repeat Violations: ✓ Number of Violations COS: A	
Physical Address: 3110 I-30 # 103			City/County: Greenville		Zip Code: 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 OUT box for each numbered item. Mark 'x' 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	O	I	N	NA	COS	R
Time and Temperature for Food Safety (F = degrees Fahrenheit)						
1. Proper cooling time and temperature						
2. Proper Cold Holding temperature(41°F/ 45°F)						
3. Proper Hot Holding temperature(135°F)						
4. Proper cooking time and temperature						
5. Proper reheating procedure for hot holding (165°F in 2 Hours)						
6. Time as a Public Health Control; procedures & records Approved Source						
7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction						
8. Food Received at proper temperature						
Protection from Contamination						
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting						
10. Food contact surfaces and Returnables: Cleaned and Sanitized at ppm/temperature						
11. Proper disposition of returned, previously served or reconditioned						
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 City of Greenville						
20. Approved Sewage/Wastewater Disposal System, proper disposal Liquid environmental						

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days						
Compliance Status	O	I	N	NA	COS	R
Demonstration of Knowledge/ Personnel						
21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)						
22. Food Handler/ no unauthorized persons/ personnel Safe Water, Record keeping and Food Package Labeling						
23. Hot and Cold Water available; adequate pressure, safe						
24. Required records available (sheetstock tags, parasite destruction); Packaged Food labeled						
Conformance with Approved Procedures						
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions Consumer Advisory						
26. Posting of Consumer Advisories; raw or under cooked foods (Disclosure/Reminder/Buffer Plate)/ Allergen Label						
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	O	I	N	NA	COS	R
Prevention of Food Contamination						
34. No Evidence of Insect contamination, rodent/other animals						
35. Personal Cleanliness/eating, drinking or tobacco use						
36. Wiping Cloths; properly used and stored						
37. Environmental contamination						
38. Approved thawing method						
Proper Use of Utensils						
39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used						
40. Single-service & single-use articles; properly stored and used						
Food Identification						
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: <i>Van Ryan</i>	Print: <i>Vance Reynolds</i>	Title: Person In Charge/ Owner
Inspected by: <i>J. McMahen R.S</i>	Print: <i>T. McMahen R.S</i>	Business Email:



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

Establishment Name: Firehouse Subs	Physical Address: 3110 I-30 #103	City/State: Greenville, TX	License/Permit #	Page 27 of 27
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TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Reach in	38°F				
Reach in	39°F				
Make line hot	34-38°F				
	169°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:

10 Sanitizer not observed readily available

18 Chemicals observed by food product and clean dishes

36 Wiping Cloth observed left on a cutting board. Wiping cloths are to be stored in sanitizer bucket

35 Hair nets or hats not observed. Hats or hair nets are required for anyone handling or preparing food.

43 Exhaust fan in ladies restroom observed with dust build up.

44 Garbage dumpster observed with a damaged lid. Lids must fit tight and securely.

* Do not block electrical panel

* hang maps when not in use

* Closed drain - Call a plumber to clear line

* Remove cardboard from reach in cooler

Call Geus Customer Service for dumpster lid replacement

Register certified food managers with city

Received by: (signature) <i>Vanner</i>	Print: Vanne Reynolds	Title: Person in Charge/owner
Inspected by: (signature) <i>T. McMahan R.S</i>	Print: T. McMahan R.S	Samples: Y N # collected