



Texas Department of State Health Services Retail Food Establishment Inspection Report



Date: 12-7-22		Time in: 11:20		Time out: 11:45		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: Super 8						Contact/Owner Name:				* Number of Repeat Violations: 0		TOTAL/SCORE	
Physical Address: 5010 Hwy 69 S						City/County: Greenville		Zip Code: 75402		Phone:		✓ Number of Violations COS: 0	
Compliance Status: Out = not in compliance IN = in compliance NO = not observed NA = not applicable COS = corrected on site R = repeat violation												B+	
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						Compliance Status							
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R		
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) 38°F Milk						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 Y N)							
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							
8. Food Received at proper temperature						Pasteurized eggs used when required							
Protection from Contamination						Chemicals							
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting						17. Food additives; approved and properly stored; Washing Fruits & Vegetables							
10. Food contact surfaces and Returnables: Cleaned and Sanitized at ppm/temperature						18. Toxic substances properly identified, stored and used							
11. Proper disposition of returned, previously served or reconditioned						Water/ Plumbing							
						19. Water from approved source; Plumbing installed; proper backflow device City of Greenville							
						20. Approved Sewage/Wastewater Disposal System, proper disposal							
Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days													
Compliance Status						Compliance Status							
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R		
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/ Buffet 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							
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R		
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: Jennifer S. Price						Print: Jennifer S. Price						Title: Person In Charge/ Owner	
Inspected by: J. Manahan R.S						Print: T. Newsham R.S						Business Email:	



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

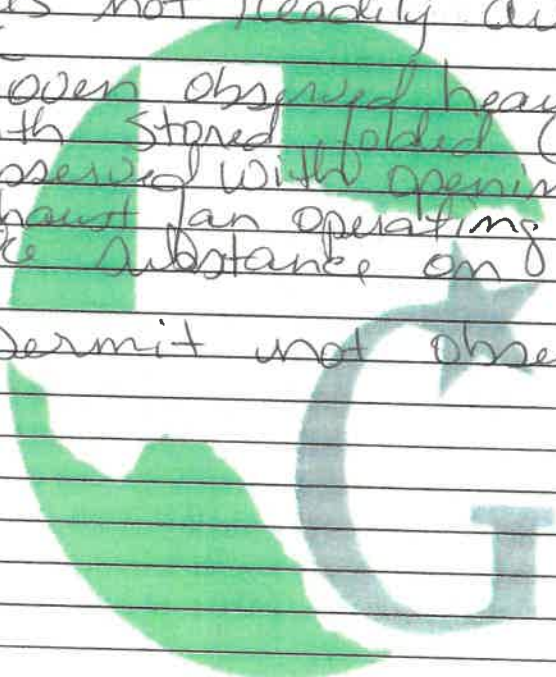
Establishment Name: <i>Super 8</i>	Physical Address: <i>5010 Hwy 69</i>	City/State: <i>Greenville, TX</i>	License/Permit #	Page <i>2</i> of <i>2</i>
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TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
<i>Milk</i>	<i>37°F</i>				

OBSERVATIONS AND CORRECTIVE ACTIONS

AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:

- 10 Sanitizer not observed*
- 31 Paper towels not readily available at hand sink*
- 32 Microwave oven observed heavily soiled*
- 36 Wiping cloth stored folded (wet) on sink*
- 46 Restroom observed with openings in the ceiling without exhaust fan operating and with mildew like substance on ceiling*
- 30 Current permit not observed*



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