



Texas Department of State Health Services Retail Food Establishment Inspection Report



Date: 12-29-22	Time in: 1:40 P.M.	Time out: 2:20 P.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: Fatto A Mano			Contact/Owner Name:		* Number of Repeat Violations: ✓ Number of Violations COS: A	
Physical Address: 2205 Lee St		City/County: Greenville		Zip Code: 75401	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 ✓ 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	Time and Temperature for Food Safety (F = degrees Fahrenheit)					R
OUT	IN	NO	NA	COS		
						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 (WAC)
						11. Proper disposition of returned, previously served or reconditioned

Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days						
Compliance Status	Demonstration of Knowledge/ Personnel					R
OUT	IN	NO	NA	COS		
						21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)
						22. Food Handler/ no unauthorized persons/ personnel Safe Water, Recordkeeping and Food Package Labeling
						23. Hot and Cold Water available; adequate pressure, safe
						24. Required records available (shellstock 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

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

Received by: (signature) <i>[Signature]</i>	Print: Edward H Grillo	Title: Person In Charge/ Owner
Inspected by: (signature) <i>J. Membran R.S.</i>	Print: T. Membran R.S.	Business Email: ---



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

Establishment Name: FATD A Mano	Physical Address: 2205 Lee St	City/State: Greenville	License/Permit #	Page 2 of 2
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TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Reach In	37°F				
Reach In	39°F				
Front reach in	37°F				
Front Cooler	35°F				

OBSERVATIONS AND CORRECTIVE ACTIONS

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

- 28 Exposure all food out of the original package has date label.
- 31 Hand sink for handwashing only
- 38 Follow proper thawing procedures
- 45 Reseal floor in kitchen and replace damaged tiles
- Clean dust from exhaust fans in Restrooms
- * Correct sanitizer issue at 3 Compartment sink
- Clean inside of refrigeration units
- Repair hole in office
- Clean under dishwashing area and on the walls
- Cover dishes on Store inverted.
- Discard broken dishes

[Handwritten Signature]

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