TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

| 10 | شد ا | - 34 | 153 | | | | | | | | | | | | | | | | | |
|--------------------|----------|----------|----------------|---------------|---|---|-----------------------|---------|--------|---------|---------|----------------|--------------|----------|----------------------------|--|--------------------------------|----------|------|--------|
| 10 | | | S. S. | | | | | | | | | | | | | | | | | |
| Establishment Name | | | | Taco Bell #23 | 3043 | | | | | | | | | | O Farmer's Market Food Uni | | | Z | | |
| | | | t Nar | | 1672 W. Main St. | | | | | | | | | | | | | | | |
| | fress | | | | Lebanon | | | |) · 1 | | | | | | | O Temporary O Seaso ut 10:18; AM AM / | | | | |
| City | 1 | | | | | <u> </u> | | | 9. L | | | - | | | me ou | ut 10:18; AIV AM/ | PM | | | |
| | | on Da | | | | Establishment # | | | | _ | Emba | | | | | | _ L | | | |
| Pur | pose | of In | spect | tion | Routine | O Follow-up | O Complaint | | | O Pro | elimin | ary | | c | Cor | nsultation/Other | | | ~~~ | |
| Ris | k Ca | tegor | | | X1 | O2 | 03 | hake | | 04 | - | | - | | | up Required O Yes 🗮 to the Centers for Diseas | | | 60 | |
| | | | | | | | | | | | | | | | | control measures to preve | | | | |
| | | | rk de | slove | ed compliance status | | | | | | | | | | | INTERVENTIONS ach liom as applicable. Deduct po | lata for catagory or subcat | - | | |
| 17 | t⊧in o | ompli | | | | e NA=not applicable | NO=not observe | юl | | CO | | | | | | | tion of the same code provisi | ion) | | |
| | IN | OUT | NA | NO | Comp | Supervision | | COS | R | WT | | | | | | Compliance Status Cooking and Reheating of | | cos | R | WT |
| 4 | 10 | | ~ | no | Person in charge pre | esent, demonstrates kr | nowledge, and | 0 | 0 | 5 | | IN | | NA | | Control For Safety | (TCS) Foods | | | |
| | | OUT | NA | NO | performs duties | Employee Health | - | - | | - | | 0 家 | 00 | 0 | | Proper cooking time and temper Proper reheating procedures for | | 0 | 8 | 5 |
| _ | | 0 | | | | od employee awarene | ss; reporting | | 2 | 5 | | IN | оит | NA | NO | Cooling and Holding, Date | | | | |
| 3 | × IN | O OUT | NA | NO | Proper use of restric Good | d Hygienic Practice | | 0 | 0 | _ | 18 | 0 | 0 | 0 | <u>8</u> 3 | a Public Health Proper cooling time and tempera | | 0 | 0 | |
| 4 | X | 0 | | 0 | Proper eating, tastin | g. drinking, or tobacco | | 0 | 0 | 5 | 19 | 义 | 0 | 0 | õ | Proper hot holding temperatures | | 0 | 0 | |
| | IN | O OUT | NA | NO | Preventin | yes, nose, and mouth g Contamination by | Hands | | 0 | | 20 | 100 | 00 | 8 | _ | Proper cold holding temperature Proper date marking and dispos | | 0 | ő | 5 |
| 6 | 0 減 | 0 0 | 0 | | Hands clean and pro No bare hand contain | operly washed ct with ready-to-eat foo | ds or approved | 0 | 0 0 | 5 | 22 | 0 | 0 | 0 | 鼠 | Time as a public health control: | procedures and records | 0 | ٥ | |
| 8 | X | 0 | - | - | alternate procedures Handwashing sinks | s followed properly supplied and a | accessible | | 0 | 2 | - | IN | OUT | NA | NO | Consumer Ad Consumer advisory provided for | | | 0 | |
| 9 | IN | OUT | NA | NO | Food obtained from | Approved Source | | | | _ | 23 | O IN | O OUT | | | food Highly Susceptible | Populations | 0 | 9 | • |
| 10 | 0 | 0 | 0 | × | Food received at pro | oper temperature | | 0 | 0 | 5 | 24 | | 0 | 80 | | Pasteurized foods used; prohibit | | 0 | 0 | 5 |
| 11 | | 0 | × | 0 | Required records av | ion, safe, and unadulte ailable: shell stock tag | | 0 | 0 0 | Ĩ | H | IN | OUT | - | | Chemics | | | _ | |
| | IN | OUT | NA | NO | destruction Protect | ion from Contamina | ation | | | | 25 | 0 | 0 | X | | Food additives: approved and pr | openly used | 0 | 0 | 5 |
| 13 14 | 夏 | 0 | 0 | | Food separated and Food-contact surface | i protected es: cleaned and sanitiz | sed | | 00 | | 26 | <u>実</u> IN | O | NA | NO | Toxic substances properly ident Confermance with App | | 0 | 0 | - |
| | _ | 0 | - | | Proper disposition of served | f unsafe food, returned | food not re- | - | 0 | 2 | 27 | 0 | 0 | × | | Compliance with variance, speci HACCP plan | | 0 | 0 | 5 |
| | | | _ | _ | | | | | | _ | | | | | | | | | | |
| | | | | Goo | d Retail Practice | s are preventive n | | | | | | | | | gens | , chemicals, and physical | objects into foods. | | | |
| | | | | 00 | T=not in compliance | | COS=corre | | n-site | during | | | IGR | 5 | | | f the same code provision) | | | |
| | | OUT | | | | iance Status ood and Water | | COS | R | WT | | 0 | UT | | | Compliance Statu Utensils and Equipm | s ent | COS | R | WT |
| _ | 28 29 | | | | d eggs used where r ice from approved s | | | | 8 | | 4 | 5 (| | | | nfood-contact surfaces cleanable and used | e, properly designed, | 0 | 0 | 1 |
| _ | 30 | | | | btained for specialize | ed processing methods | 5 | ŏ | ŏ | î | 4 | 5 (| | | | g facilities, installed, maintained, | used, test strips | 0 | 0 | 1 |
| | 31 | 0 | Prop | er coo | | adequate equipment fo | r temperature | 0 | 0 | 2 | 47 | 7 | o N | lonfoo | d-con | tact surfaces clean | | 0 | 0 | 1 |
| | 32 | - | contr Plant | | properly cooked for I | hot holding | | - | 0 | 1 | 41 | | UT D ⊢ | lot and | t cold | Physical Facilities water available; adequate press | | 0 | 0 | 2 |
| ; | 33 | 0 | Appr | oved | thawing methods use | ed | | 0 | 0 | 1 | 4 | 9 | ΟP | lumbir | ng ins | stalled; proper backflow devices | | 0 | 0 | 2 |
| | 34 | OUT | Ther | mome | eters provided and ac Food I | identification | | 0 | 0 | 1 | 5 | _ | | | | waste water properly disposed as: properly constructed, supplied | l, cleaned | | 0 | 2 |
| ; | 35 | 0 | Food | i prop | erly labeled; original | container; required rec | ords available | 0 | 0 | 1 | 53 | 2 | 0 G | Sarbag | e/refi | use properly disposed; facilities n | naintained | 0 | 0 | 1 |
| _ | | OUT | lace | | | Food Contaminatio | n | _ | | - | 5 | _ | - | | | lities installed, maintained, and c | | | 0 | 1 |
| | 36 | | | | dents, and animals n | , | | 0 | 0 | 2 | 54 | + | - | vaequa | ne ve | ntilation and lighting; designated | | 0 | 0 | 1 |
| | 37 | 0 | | | | g food preparation, sto | rage & display | 0 | 0 | 1 | | | UT | | | Administrative iten | | - | | |
| _ | 38 39 | - | - | | leanliness ths; properly used ar | nd stored | | | 0 | 1 | 54 | | | | | nit posted inspection posted | | 0 | 0 | 0 |
| | 10 | O | Was | hing fi | ruits and vegetables Proper | Use of Utensils | | 0 | 0 | 1 | | - | _ | | | Compliance Status Non-Smokers Prot | | YES | NO | WT |
| | 11 | 12 | | | nsils; properly stored | | handed | | 8 | | 5 | ŗ | | | | with TN Non-Smoker Protection ducts offered for sale | | 8 | | |
| - | 13 | 0 | Sing | e-use | /single-service article | properly stored, dried, es; properly stored, use | | 0 | 0 | | 55 | 5 | | | | oducts are sold, NSPA survey co | mpleted | ŏ | ŏ | |
| | 14 | | | | ed properly | na mistria tan 1880 dana a | and the surgery | | 0 | _ | | | | | | Reported detailers of an identical a | a faith and a second in second | | | |
| | Áce e | stablis | hmer | t perm | sit, items identified as o | constituting imminent her | alth hazards shall be | e corre | cted i | mmedi | ately a | or op- | ration | is shall | cease | Repeated violation of an identical ri e. You are required to post the food lling a written request with the Comm | service establishment permi | t in a c | onsp | icuour |
| > | * | CA | Stio | \cap | 14-703, 68-14-706, 68-14 | -708, 68-14-709, 68-14-711 | , 68-14-715, 68-14-7 | 16, 4-5 | 320. | c a mea | ang r | (| 1 | 41 | Λ | U.L. | nessioner withen een (10) days | OF UNE | Gate | orus |
| | \neg | Ē | € | \mathcal{L} | _ | | 03/1 | 6/2 | 022 | 2 | | Þ | A | 91 | 'l A | Alth_) | (|)3/1 | 6/2 | 022 |
| Sig | natu | re of | Pers | on In | Charge | | | | [| Date | Sig | natu | re of | Envir | onme | ental Health Specialist | | | | Date |
| | | | | | | , | | | | | | | | | | ealth/article/eh-foodservice | *** | | | |
| PH | 2267 | (Rev. | 6-15) |) | | Free food safety | training classes | s are | avai | able | eac | n ma | onth a | at the | cou | inty health department. | | | RD | A 629 |

| 2267 (Rev. 6-15) | Free food safety training class | RDA 6 | | |
|--------------------|---------------------------------|--------------|-------------------------|------|
| (12207 (Nev. 6-15) | Please call (|) 6154445325 | to sign-up for a class. | 1040 |
| | | | | |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Taco Bell #23043 Establishment Number #: 605195818

| ISPA Survey – To be completed if #57 is "No" | |
|--|--|
| ge-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are venty-one (21) years of age or older. | |
| ge-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification. | |
| No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance. | |
| arage type doors in non-enclosed areas are not completely open. | |
| ents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open. | |
| moke from non-enclosed areas is infiltrating into areas where smoking is prohibited. | |
| moking observed where smoking is prohibited by the Act. | |

| Warewashing Info | | | | | | | | | | | | |
|------------------|----------------|-----|--------------------------|--|--|--|--|--|--|--|--|--|
| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenheit) | | | | | | | | | |
| Bucket | QA | 300 | | | | | | | | | | |

| Equipment Temperature | | | | | |
|-----------------------|--------------------------|--|--|--|--|
| Description | Temperature (Fahrenheit) | | | | |
| Reach in cooler (ric) | 33 | | | | |
| Ric main line | 35 | | | | |
| Walk in cooler (wic) | 33 | | | | |
| Walk in freezer (wif) | -3 | | | | |

| Food Temperature | | | | | | |
|------------------|---------------|--------------------------|--|--|--|--|
| Decoription | State of Food | Temperature (Fahrenheit) | | | | |
| Refried beans | Hot Holding | 156 | | | | |
| Diced tomatoes | Cold Holding | 38 | | | | |
| Sausage | Hot Holding | 149 | | | | |
| Ground beef | Hot Holding | 169 | | | | |
| Avocado | Cold Holding | 37 | | | | |
| Chicken | Reheating | 189 | | | | |
| | | | | | | |
| | | | | | | |
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| | | | | | | |

Observed Violations

Total # 3

Repeated # 0

41: Scoop handles down in cheese on line

42: Pans stacked wet on shelf over 3 comp sink

55: No permit posted

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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Establishment Number : 605195818

Comments/Other Observations

1: (IN): ANSI Certified Manager present.

- 2: (IN): An employee health policy is available.
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (IN) Employee isn't drinking, eating, or using tobacco in a food preparation area.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.

7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.

8: (IN): All handsinks are properly equipped and conveniently located for food employee use.

9: See source info

10: (NO): No food received during inspection.

- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (NA) Shell stock not used and parasite destruction not required at this establishment.
- 13: (IN) All raw animal food is separated and protected as required.
- 14: (IN) All food contact surfaces of equipment and utensils cleaned and sanitized using approved methods.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NO) No raw animal foods cooked during inspection.

17: See food temps

- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See food temps

20: See food temps

21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.

- 22: (NO) Time as a public health control is not being used during the inspection.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 24: (NA) A highly susceptible population is not served.
- 25: (NA) Establishment does not use any additives or sulfites on the premises.
- 26: (IN) All poisonous or toxic items are properly identified, stored, and used.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.

57: 58:

***See page at the end of this document for any violations that could not be displayed in this space.

Additional Comments See last page for additional comments.

Establishment Information

Establishment Name: Taco Bell #23043

Establishment Number : 605195818

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

Establishment Information Establishment Name: Taco Bell #23043

Establishment Number # 605195818

| Sources | | | | |
|--------------|-------|---------|---------|--|
| Source Type: | Food | Source: | McLanes | |
| Source Type: | Water | Source: | City | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |

Additional Comments