



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

# 93

Establishment Name Fishtales Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile  
 Address 9120 Saundersville Rd ☐ Temporary ☐ Seasonal  
 City Mount Juliet Time in 04:45 PM AM / PM Time out 04:50 PM AM / PM  
 Inspection Date 10/01/2021 Establishment # 605247047 Embargoed 0  
 Purpose of Inspection ☐ Routine ☒ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other  
 Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats 300

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance					OUT=not in compliance					NA=not applicable					NO=not observed					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)				
Compliance Status										COS					R					WT									
	IN	OUT	NA	NO	Supervision																								
1	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Person in charge present, demonstrates knowledge, and performs duties					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5															
	IN	OUT	NA	NO	Employee Health																								
2	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Management and food employee awareness, reporting					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5															
3	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Proper use of restriction and exclusion					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
	IN	OUT	NA	NO	Good Hygienic Practices																								
4	<input checked="" type="radio"/>	<input checked="" type="radio"/>		<input checked="" type="radio"/>	Proper eating, tasting, drinking, or tobacco use					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5															
5	<input checked="" type="radio"/>	<input checked="" type="radio"/>		<input checked="" type="radio"/>	No discharge from eyes, nose, and mouth					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
	IN	OUT	NA	NO	Preventing Contamination by Hands																								
6	<input checked="" type="radio"/>	<input checked="" type="radio"/>		<input checked="" type="radio"/>	Hands clean and properly washed					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5															
7	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
8	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Handwashing sinks properly supplied and accessible					<input checked="" type="radio"/>	<input checked="" type="radio"/>			2															
	IN	OUT	NA	NO	Approved Source																								
9	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Food obtained from approved source					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5															
10	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Food received at proper temperature					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
11	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Food in good condition, safe, and unadulterated					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
12	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Required records available: shell stock tags, parasite destruction					<input checked="" type="radio"/>	<input checked="" type="radio"/>																		
	IN	OUT	NA	NO	Protection from Contamination																								
13	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Food separated and protected					<input checked="" type="radio"/>	<input checked="" type="radio"/>			4															
14	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Food-contact surfaces: cleaned and sanitized					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5															
15	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Proper disposition of unsafe food, returned food not re-served					<input checked="" type="radio"/>	<input checked="" type="radio"/>			2															

Compliance Status										COS					R					WT				
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods																			
16	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Proper cooking time and temperatures					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5										
17	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Proper reheating procedures for hot holding					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
	IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control																			
18	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Proper cooling time and temperature					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5										
19	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Proper hot holding temperatures					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
20	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Proper cold holding temperatures					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
21	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Proper date marking and disposition					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
22	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	Time as a public health control: procedures and records					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
	IN	OUT	NA	NO	Consumer Advisory																			
23	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Consumer advisory provided for raw and undercooked food					<input checked="" type="radio"/>	<input checked="" type="radio"/>			4										
	IN	OUT	NA	NO	Highly Susceptible Populations																			
24	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Pasteurized foods used; prohibited foods not offered					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5										
	IN	OUT	NA	NO	Chemicals																			
25	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Food additives: approved and properly used					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5										
26	<input checked="" type="radio"/>	<input checked="" type="radio"/>			Toxic substances properly identified, stored, used					<input checked="" type="radio"/>	<input checked="" type="radio"/>													
	IN	OUT	NA	NO	Conformance with Approved Procedures																			
27	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>		Compliance with variance, specialized process, and HACCP plan					<input checked="" type="radio"/>	<input checked="" type="radio"/>			5										

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

## GOOD RETAIL PRACTICES

OUT=not in compliance					COS=corrected on-site during inspection					R-repeat (violation of the same code provision)					
Compliance Status					COS	R	WT	Compliance Status					COS	R	WT
	OUT	Safe Food and Water							OUT	Utensils and Equipment					
28	<input type="radio"/>	Pasteurized eggs used where required			<input type="radio"/>	<input type="radio"/>	1	45	<input checked="" type="radio"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			<input type="radio"/>	<input type="radio"/>	1
29	<input type="radio"/>	Water and ice from approved source			<input type="radio"/>	<input type="radio"/>	2	46	<input type="radio"/>	Warewashing facilities, installed, maintained, used, test strips			<input type="radio"/>	<input type="radio"/>	1
30	<input type="radio"/>	Variance obtained for specialized processing methods			<input type="radio"/>	<input type="radio"/>	1	47	<input type="radio"/>	Nonfood-contact surfaces clean			<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Temperature Control							OUT	Physical Facilities					
31	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control			<input type="radio"/>	<input type="radio"/>	2	48	<input type="radio"/>	Hot and cold water available; adequate pressure			<input type="radio"/>	<input type="radio"/>	2
32	<input type="radio"/>	Plant food properly cooked for hot holding			<input type="radio"/>	<input type="radio"/>	1	49	<input type="radio"/>	Plumbing installed; proper backflow devices			<input type="radio"/>	<input type="radio"/>	2
33	<input type="radio"/>	Approved thawing methods used			<input type="radio"/>	<input type="radio"/>	1	50	<input type="radio"/>	Sewage and waste water properly disposed			<input type="radio"/>	<input type="radio"/>	2
34	<input checked="" type="radio"/>	Thermometers provided and accurate			<input type="radio"/>	<input type="radio"/>	1	51	<input type="radio"/>	Toilet facilities: properly constructed, supplied, cleaned			<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Identification						52	<input type="radio"/>	Garbage/refuse properly disposed; facilities maintained			<input type="radio"/>	<input type="radio"/>	1
35	<input checked="" type="radio"/>	Food properly labeled; original container; required records available			<input type="radio"/>	<input type="radio"/>	1	53	<input type="radio"/>	Physical facilities installed, maintained, and clean			<input type="radio"/>	<input type="radio"/>	1
	OUT	Prevention of Food Contamination						54	<input type="radio"/>	Adequate ventilation and lighting; designated areas used			<input type="radio"/>	<input type="radio"/>	1
36	<input checked="" type="radio"/>	Insects, rodents, and animals not present			<input type="radio"/>	<input type="radio"/>	2		OUT	Administrative Items					
37	<input type="radio"/>	Contamination prevented during food preparation, storage & display			<input type="radio"/>	<input type="radio"/>	1	55	<input type="radio"/>	Current permit posted			<input type="radio"/>	<input type="radio"/>	0
38	<input type="radio"/>	Personal cleanliness			<input type="radio"/>	<input type="radio"/>	1	56	<input type="radio"/>	Most recent inspection posted			<input type="radio"/>	<input type="radio"/>	
39	<input checked="" type="radio"/>	Wiping cloths: properly used and stored			<input type="radio"/>	<input type="radio"/>	1	Compliance Status					YES	NO	WT
40	<input type="radio"/>	Washing fruits and vegetables			<input type="radio"/>	<input type="radio"/>	1	Non-Smokers Protection Act							
	OUT	Proper Use of Utensils						57		Compliance with TN Non-Smoker Protection Act			<input checked="" type="radio"/>	<input type="radio"/>	
41	<input checked="" type="radio"/>	In-use utensils; properly stored			<input type="radio"/>	<input type="radio"/>	1	58		Tobacco products offered for sale			<input type="radio"/>	<input type="radio"/>	0
42	<input type="radio"/>	Utensils, equipment and linens; properly stored, dried, handled			<input type="radio"/>	<input type="radio"/>	1	59		If tobacco products are sold, NSPA survey completed			<input type="radio"/>	<input type="radio"/>	
43	<input type="radio"/>	Single-use/single-service articles; properly stored, used			<input type="radio"/>	<input type="radio"/>	1								
44	<input type="radio"/>	Gloves used properly			<input type="radio"/>	<input type="radio"/>	1								

Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous manner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this report. T.C.A. sections 68-14-203, 68-14-205, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge San Reed Date 10/01/2021 Signature of Environmental Health Specialist A. Jim Date 10/01/2021

\*\*\*\* Additional food safety information can be found on our website, <http://tn.gov/health/article/eh-foodservice> \*\*\*\*

**TENNESSEE DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD INSPECTION DATA**



<b>Establishment Information</b>	
Establishment Name:	Fishtales
Establishment Number #:	605247047

<b>NSPA Survey – To be completed if #57 is "No"</b>	
Age-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are twenty-one (21) years of age or older.	
Age-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.	
Garage type doors in non-enclosed areas are not completely open.	
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	No
Smoking observed where smoking is prohibited by the Act.	

<b>Warewashing Info</b>			
Machine Name	Sanitizer Type	PPM	Temperature ( Fahrenheit)

<b>Equipment Temperature</b>	
Description	Temperature ( Fahrenheit)

<b>Food Temperature</b>		
Description	State of Food	Temperature ( Fahrenheit)

**Observed Violations****Total #** 6**Repeated #** 0

34:

35:

36:

39:

41:

45:

TENNESSEE DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD INSPECTION DATA



***Establishment Information***

Establishment Name: Fishtales

Establishment Number : 605247047

***Comments/Other Observations***

57:  
6:  
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.***

\*\*\*See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

**Establishment Information**

Establishment Name: Fishtales

Establishment Number : 605247047

**Comments/Other Observations (cont'd)****Additional Comments (cont'd)**

***See last page for additional comments.***

<b>Establishment Information</b>	
Establishment Name:	Fishtales
Establishment Number #:	605247047

**Sources**

Source Type:	Source:
Source Type:	Source:
Source Type:	Source:
Source Type:	Source:
Source Type:	Source:

**Additional Comments**

Follow up. Prority violations corrected same day.