TENNESSEE DEPARTMENT OF HEALTH FOOD REDVICE FRARI IRUMENT INRECTION DEBORT

| | | | | | | FOOD SERV | ICE ESTA | BL | SH | IME | ENT | r 11 | NSI | PEC | TI | ON REPORT | sco | RE | | |
|--------|---------------|----------|----------------|-------|---------------------------------------|--|--------------------|----------|------|-------------|---------|--------|-------------|----------|---------|--|---------------------------------------|-------|----------|----|
| CITY C | | | and the second | | Amigo's Me | exican Grill | | | | | | | | | | O Fermer's Market Food I | | C | | |
| Esta | blish | nem | t Nan | | 1025 Crocc | vinge Plud | | | | | _ | Ту; | ce of l | Establ | ishme | | | | J | |
| Add | ress | | | | 1025 Cross | siliys divu. | | | _ | | _ | | | | | O Temporary O Sea | sonal | | - | |
| City | | | | | Spring Hill | | | | .:54 | 4 A | M | _ A | M/P | M Ti | me o | ut 12:36:PM AN | 1/PM | | | |
| Insp | ectic | n Da | te | ÷ | 12/16/20 | 21 Establishment # | 60521672 | 4 | | | Emba | argoe | d C |) | | | | | | |
| Puŋ | ose | of In | spect | ion | Routine | O Follow-up | O Complaint | | | O Pr | elimin | ary | | c | Cor | nsuitation/Other | | | | |
| Risi | Cat | egon | / | | O 1 | 3 \$2 | O 3 | | | O 4 | | | | Fo | -wollo | up Required O Yes 🖇 | K No Number of S | Seats | 13 | 85 |
| | | R | | | | | | | | | | | | | | to the Centers for Dises control measures to pre- | ase Control and Prever | | | |
| | | | | | | | | | | | | | | | | INTERVENTIONS | | | | |
| | | | | lgnat | | | | | lens | | | | | | | ach liem as applicable. Deduct | | | .) | |
| IN | in c | ompili | ance | | | nce NA=not applicable | NO=not observe | d COS | R | | s=co | rrecte | d on-s | ite dur | ing ins | Spection R=repeat (vi Compliance Stats | olation of the same code provis | | R | WT |
| | IN | ουτ | NA | NO | | Supervision | | | | | | IN | ουτ | NA | NO | Cooking and Reheating | · · · · · · · · · · · · · · · · · · · | | | |
| 1 | 鼠 | 0 | | | Person in charge performs duties | present, demonstrates k | nowledge, and | 0 | 0 | 5 | 16 | 0 | 0 | 0 | 57 | Control For Safe Proper cooking time and temp | | - | | |
| | | | NA | NO | periorns dubes | Employee Health | | | | | | ŏ | ŏ | | | Proper reheating procedures f | | ŏ | 00 | 5 |
| | X | | | | | food employee awarene | ss; reporting | | 0 | 5 | | IN | ουτ | NA | NO | Cooling and Holding, Dat | | | | |
| 3 | 8 | O OUT | NA | NO | , | triction and exclusion od Hygienic Practice | - | 0 | 0 | _ | 18 | 0 | 0 | 0 | 194 | a Public Hea Proper cooling time and temp | | | 0 | |
| 4 | X | 0 | nia. | | | ting, drinking, or tobacco | | 0 | σ | - | | 1 | 6 | 6 | | Proper hot holding temperatur | | | 6 | |
| 5 | X | 0 | | 0 | No discharge from | n eyes, nose, and mouth | | Ō | Ō | 5 | 20 | 25 | 0 | 0 | | Proper cold holding temperatu | ires | 0 | 0 | 5 |
| | | 001 | NA | NO | | ting Contamination by | y Hands | 0 | | | 21 | 12 | 0 | 0 | 0 | Proper date marking and disp | osition | _ | 0 | Ť |
| | <u>×</u> | - | - | | Hands clean and No bare hand core | propeny washed itact with ready-to-eat for | ds or approved | 0 | | 5 | 22 | 0 | 0 | 8 | 0 | Time as a public health control | i: procedures and records | 0 | 0 | |
| 7 | 鬣 | 0 | 0 | | alternate procedu | res followed | | 0 | 0 | | | IN | OUT | NA | NO | Consumer | | | _ | |
| 8 | | ᇞ | NA | NO | Handwashing sin/ | Approved Source | accessible | 0 | 0 | 2 | 23 | 12 | 0 | 0 | | Consumer advisory provided food | for raw and undercooked | 0 | 0 | 4 |
| 9 | 黨 | 0 | | | | m approved source | | | 0 | | | IN | OUT | NA | NO | Highly Susceptib | le Populations | | | |
| 10 | <u>。</u> 送 | 8 | 0 | × | | proper temperature dition, safe, and unadulte | rated | 0 | 00 | 5 | 24 | 0 | 0 | 88 | | Pasteurized foods used; prohi | bited foods not offered | 0 | 0 | 5 |
| 12 | _ | ŏ | × | 0 | Required records | available: shell stock tag | | ō | ŏ | | | IN | OUT | NA | NO | Chemi | Icals | | | |
| | | - | NA | - | destruction Prote | ction from Contamin | ation | - | - | _ | 25 | | | 25 | | Food additives: approved and | | 0 | ю | |
| 13 | | 0 | | | Food separated a | | | 0 | 0 | 4 | | Ř | ŏ | _ | 1 | Toxic substances properly ide | | | ŏ | 5 |
| 14 | × | 0 | 0 | | Food-contact surf | aces: cleaned and saniti | zed | 0 | 0 | 5 | | IN | OUT | NA | NO | Conformance with Ap | | | | |
| 15 | 2 | 0 | | | Proper disposition served | of unsafe food, returned | i food not re- | 0 | 0 | 2 | 27 | 0 | 0 | × | | Compliance with variance, sp HACCP plan | ecialized process, and | 0 | 0 | 5 |
| | _ | _ | | - | | | | | | _ | - | | - | | _ | | | _ | _ | |
| | | | | Goo | d Retail Practi | ces are preventive r | | | | | | | _ | | gens | s, chemicals, and physics | al objects into foods. | | | |
| | | | | 00 | Penot in compliance | | COS=corre | G00 | | | | | | 5 | | P-reneat /sidelin | n of the same code provision) | | | |
| | | | | | | pliance Status | CO3-COTE | COS | | | | 2000 | | | | Compliance Sta | | COS | R | WT |
| | _ | OUT | | | | Food and Water | | - | | | | 0 | TUK | _ | | Utensils and Equip | | | | |
| 2 | _ | | | | d eggs used when ice from approved | | | 8 | 0 | + | 4 | 5 | | | | prood-contact surfaces cleana and used | ble, properly designed, | 0 | 0 | 1 |
| 3 | _ | | | | btained for specia | lized processing method | \$ | ŏ | ŏ | 1 | 4 | e | - F | | | g facilities, installed, maintaine | d upod toot string | 0 | 0 | 1 |
| | | OUT | _ | | | emperature Control | | | | | | _ | - | | | - | u, useu, test solps | - | - | - |
| 3 | 1 | 0 | Prop | | oling methods use | d; adequate equipment fo | or temperature | 0 | 0 | 2 | 4 | _ | O ↑ NUT | vontoo | d-cor | ntact surfaces clean Physical Faciliti | | 0 | 0 | 1 |
| 3 | 2 | 0 | | | properly cooked for | or hot holding | | 0 | 0 | 1 | 4 | _ | | lot and | d cold | i water available; adequate pre | | 0 | 0 | 2 |
| 3 | _ | | | | thawing methods | | | 0 | 0 | 1 | 4 | | | | | stalled; proper backflow device | | | 0 | 2 |
| 3 | _ | 0 OUT | Then | nome | eters provided and | | | 0 | 0 | 1 | 5 | | - | | | waste water properly disposed | | 0 | 0 | 2 |
| - | _ | _ | Enco | | | d identification | and a second share | - | | _ | 5 | _ | | | | es: properly constructed, suppli | | | 0 | 1 |
| 3 | _ | | Food | prop | | al container; required rec | | 0 | 0 | 1 | 5 | | - | | | use properly disposed; facilities | | 0 | 0 | 1 |
| 3 | _ | OUT | Insec | te m | Prevention dents, and animal | of Food Contamination | in . | 0 | 0 | 2 | 5 | _ | - | | | ilities installed, maintained, and intilation and lighting; designate | | 0 | 0 | 1 |
| | - | - | | - | | | | | | _ | F | + | - | -seque | 110 VC | | | Ĕ | <u> </u> | |
| 3 | _ | _ | _ | | | ring food preparation, sto | rage & display | 0 | 0 | 1 | | | TUK | | | Administrative it | oms | | | |
| 3 | _ | | | | leanliness ths: properly used | and stored | | 0 | 0 | 1 | 5 | | | | - | nit posted inspection posted | | 0 | 0 | 0 |

 OUT
 Proper Use of Utensils

 41
 O
 In-use utensils; properly stored

 42
 O
 Utensils, equipment and linens; properly stored, dried, handled

 43
 O
 Single-use/single-service articles; properly stored, used

 44
 O
 Gloves used properly
0 0 1 0 0 1 0 0 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. Journal 68-14-703, 68-14-708, 68-14-709, 68-14-711, 68-14-716, 4-6-329.

57 58

59

YES NO WT

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Compliance Status

Compliance with TN Non-Smoker Protection Act Tobacco products offered for sale

If tobacco products are sold, NSPA survey completed

Non-Smokers Protection Act

0 0 1

0 0 1

40 O Washing fruits and vegetables

| AD. | 12/16/2021 | | 12/16/2021 | | | |
|-------------------------------|---|--|------------|--|--|--|
| Signature of Person In Charge | Date | Signature of Environmental Health Specialist | Date | | | |
| | **** Additional food safety information can be found on our website. http://tp.gov/health/article/eh-foodservice **** | | | | | |

| PH-2267 (Rev. 6-15) | Free food safety training cl | | th at the county health department. | RDA 629 |
|---------------------|------------------------------|--------------|-------------------------------------|---------|
| | Please call (|) 9315601182 | to sign-up for a class. | |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information Establishment Name: Amigo's Mexican Grill Establishment Number #: [605216724

| NSPA Survey – To be completed if #57 is "No" | |
|--|--|
| 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-Bmoking" 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. | |
| Smoking observed where smoking is prohibited by the Act. | |

| Warewashing Info | | | | | | | | | |
|------------------|----------------|-----|--------------------------|--|--|--|--|--|--|
| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenheit) | | | | | | |
| Warewasher | Chlor | 50 | | | | | | | |

| Equipment Temperature | | | |
|-----------------------|--------------------------|--|--|
| Description | Temperature (Fahrenheit) | | |
| Lowboy | 39 | | |
| Lowboy cooler | 3 | | |
| Chest freezers | 0 | | |
| Walkin cooler | 38 | | |

| Food Temperature | | | | | |
|-------------------|---------------|--------------------------|--|--|--|
| Description | State of Food | Temperature (Fahrenheit) | | | |
| Tilapia raw | Cold Holding | 39 | | | |
| | | | | | |
| Cooked rice | Hot Holding | 137 | | | |
| Refried beans | Hot Holding | 165 | | | |
| Chivken n peppers | Hot Holding | 155 | | | |
| Taco meat | Hot Holding | 150 | | | |
| Barbeque | Hot Holding | 150 | | | |
| Sour cream | Cold Holding | 38 | | | |
| Pico de gala | Cold Holding | 38 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| <u></u> |
|---------------------------------------|
| Observed Violations |
| Total # |
| Repeated # () |
| 37: Employee drink over open top prep |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Amigo's Mexican Grill

Establishment Number : 605216724

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2: (IN): PIC has knowledge of symptoms and diseases of foodborne illnesses.

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.

6: Employees observed washing hands

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: Sysco, DTM, mid south produce

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: (NO) No TCS foods reheated during inspection.

18: (N.O.) No cooling of TCS foods during inspection.

19: Good hot holding

20: Good cold holding

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

22: (NA) No food held under time as a public health control.

23: Consumer food advisory available on menu

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: (NÁ) 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: Amigo's Mexican Grill Establishment Number : 605216724

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Amigo's Mexican Grill

Establishment Number #: 605216724

| Sources | | | | |
|--------------|-------|---------|------------------------|--|
| Source Type: | Water | Source: | Spring hill city water | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| | | | | |

Additional Comments