

Establishment Name

Nashville

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

| S | C | O | R | F |
|---|---|---|----|---|
| _ | · | · | •• | _ |

O Farmer's Market Food Unit El Forastero #1 MT #1254 Remanent O Mobile Type of Establishment 4732 Nolensville Pike O Temporary O Seasonal

Time in 01:10 PM AM / PM Time out 01:50: PM AM / PM 11/01/2021 Establishment # 605261409 Embargoed 0 Inspection Date

O Follow-up Purpose of Inspection MRoutine O Complaint O Preliminary O Consultation/Other

Risk Category О3 04 Follow-up Required 级 Yes O No rted to the Centers for Di

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

etus (IN, OUT, NA, NO) for ea

| 115 | ≱ -in c | ompli | ance | | OUT=not in compliance NA=not applicable NO=not observ | ed | | CC |)\$=co | recte | d on-si | te duri | ing ins | spection Rerepeat |
|-----|----------------|-------|------|----|--|-----|---|-------|--------|-------|---------|---------|---------|---|
| | | | | | Compliance Status | cos | R | WT | | | | | | Compliance St |
| | IN | оит | NA | NC | | | | | | IN | оит | NA | NO | Cooking and Reheat |
| 1 | 邕 | 0 | | | Person in charge present, demonstrates knowledge, and performs duties | 0 | 0 | 5 | 16 | 0 | 0 | 0 | 文 | Proper cooking time and te |
| | IN | OUT | NA | NC | Employee Health | | | | 17 | 0 | 0 | 0 | X | Proper reheating procedure |
| 2 | $\neg x$ | 0 | | | Management and food employee awareness; reporting | 0 | 0 | | | | | | | Cooling and Holding, D |
| 3 | × | 0 | | | Proper use of restriction and exclusion | 0 | 0 | 5 | | IN | OUT | NA | NO | a Public i |
| | IN | OUT | NA | NC | Good Hygienic Practices | | | | 18 | | 0 | X | | Proper cooling time and te |
| 4 | X | 0 | | 0 | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | 5 | 19 | | 0 | 0 | 0 | Proper hot holding tempera |
| 5 | * | 0 | | 0 | No discharge from eyes, nose, and mouth | 0 | 0 | l ° l | 20 | 24 | 0 | 0 | | Proper cold holding temper |
| | IN | OUT | NA | NC | Preventing Contamination by Hands | | | | 21 | * | 0 | 0 | 0 | Proper date marking and d |
| 6 | 0 | 黨 | | 0 | Hands clean and properly washed | 0 | 0 | | 22 | 0 | 0 | × | 0 | Time as a public health co |
| 7 | 巡 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved | 0 | 0 | 5 | 1 | | _ | | _ | Time as a public readir co. |
| • | 520 | | | Ľ | alternate procedures followed | _ | _ | | | IN | OUT | NA | NO | Consum |
| 8 | 3% | 0 | | | Handwashing sinks properly supplied and accessible | 0 | 0 | 2 | 23 | 0 | 0 | × | | Consumer advisory provid |
| | | OUT | NA | NC | Approved Source | | _ | = | | _ | _ | | | food |
| 9 | × | 0 | | | Food obtained from approved source | 0 | 0 | | | IN | OUT | NA | NO | Highly Suscep |
| 10 | 0 | 0 | 0 | 3 | Food received at proper temperature | 0 | 0 | 1 1 | 24 | 0 | 0 | 320 | | Pasteurized foods used; pr |
| 11 | × | 0 | | | Food in good condition, safe, and unadulterated | 0 | 0 | 5 | - | _ | | (40) | | Pasieurized roods used, pr |
| 12 | | 0 | × | 0 | Required records available: shell stock tags, parasite destruction | 0 | 0 | | | IN | OUT | NA | NO | Che |
| | | OUT | NA | NC | Protection from Contamination | | | | 25 | | 0 | 巡 | | Food additives: approved a |
| 13 | 黛 | 0 | 0 | | Food separated and protected | 0 | 0 | 4 | 26 | 0 | 滋 | | | Toxic substances properly |
| 14 | X | 0 | 0 | | Food-contact surfaces: cleaned and sanitized | 0 | 0 | 5 | | IN | OUT | NA | NO | Conformance with |
| 15 | × | 0 | | | Proper disposition of unsafe food, returned food not re- served | 0 | 0 | 2 | 27 | 0 | 0 | × | | Compliance with variance, HACCP plan |

| | Compliance Status | | | | | | | **: |
|----|-------------------|-----|----|-----|---|---|---|-----|
| | IN | OUT | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | |
| 16 | 0 | 0 | 0 | 20 | Proper cooking time and temperatures | 0 | 0 | 5 |
| 17 | 0 | 0 | 0 | 200 | Proper reheating procedures for hot holding | 0 | 0 | ۰ |
| | IN | оит | NA | NO | Cooling and Holding, Date Marking, and Time as a Public Health Control | | | |
| 18 | 0 | 0 | X | 0 | Proper cooling time and temperature | 0 | 0 | |
| 19 | × | 0 | 0 | 0 | Proper hot holding temperatures | 0 | 0 | |
| 20 | 24 | 0 | 0 | | Proper cold holding temperatures | 0 | 0 | 5 |
| 21 | * | 0 | 0 | 0 | Proper date marking and disposition | 0 | 0 | |
| 22 | 0 | 0 | × | 0 | Time as a public health control: procedures and records | 0 | 0 | |
| | IN | OUT | NA | NO | Consumer Advisory | | | |
| 23 | 0 | 0 | × | | Consumer advisory provided for raw and undercooked food | 0 | 0 | 4 |
| | IN | OUT | NA | NO | Highly Susceptible Populations | | | |
| 24 | 0 | 0 | × | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Chemicals | | | |
| 25 | 0 | 0 | X | | Food additives: approved and properly used | 0 | 0 | - 5 |
| 26 | 0 | 28 | | | Toxic substances properly identified, stored, used | 0 | 0 | , |
| | IN | OUT | NA | NO | Conformance with Approved Procedures | | | |
| 27 | 0 | 0 | × | | Compliance with variance, specialized process, and HACCP plan | 0 | 0 | 5 |

L PRACTICES

| | | | GOO | | |
|----|-----|--|-----|---|---|
| | | OUT=not in compliance COS=com | | | |
| | | Compliance Status | cos | R | W |
| | OUT | Caro i con amo i i mon | | | |
| 28 | 0 | Pasteurized eggs used where required | 0 | 0 | |
| 29 | 0 | Water and ice from approved source | 0 | 0 | |
| 30 | 0 | Variance obtained for specialized processing methods | 0 | 0 | Ľ |
| | OUT | Food Temperature Control | | | |
| 31 | 0 | Proper cooling methods used; adequate equipment for temperature control | 0 | 0 | : |
| 32 | 0 | Plant food properly cooked for hot holding | 0 | 0 | Г |
| 33 | 0 | Approved thawing methods used | 0 | 0 | |
| 34 | 0 | Thermometers provided and accurate | 0 | 0 | г |
| | OUT | Food Identification | | | |
| 35 | 0 | Food properly labeled; original container; required records available | 0 | 0 | - |
| | OUT | Prevention of Feed Contamination | | | |
| 36 | 0 | Insects, rodents, and animals not present | 0 | 0 | |
| 37 | 338 | Contamination prevented during food preparation, storage & display | 0 | 0 | |
| 38 | 0 | Personal cleanliness | 0 | 0 | Г |
| 39 | 0 | Wiping cloths; properly used and stored | 0 | 0 | |
| 40 | 0 | Washing fruits and vegetables | 0 | 0 | Г |
| | OUT | Proper Use of Utensiis | | | |
| 41 | 0 | In-use utensils; properly stored | 0 | 0 | Г |
| 42 | 0 | Utensils, equipment and linens; properly stored, dried, handled | 0 | 0 | Г |
| 43 | 0 | Single-use/single-service articles; properly stored, used | 0 | 0 | Т |
| 44 | 0 | Gloves used properly | 0 | 0 | |

| pecti | | R-repeat (violation of the same code provision) Compliance Status | cos | R | W |
|-------|-----|---|-----|----|-----|
| | OUT | Utensils and Equipment | | | |
| 45 | 0 | Food and norifood-contact surfaces cleanable, properly designed, constructed, and used | 0 | 0 | 1 |
| 46 | 题 | Warewashing facilities, installed, maintained, used, test strips | 0 | 0 | 1 |
| 47 | 0 | Nonfood-contact surfaces clean | 0 | 0 | 1 |
| | OUT | Physical Facilities | | | |
| 48 | 0 | Hot and cold water available; adequate pressure | 0 | 0 | - |
| 49 | 0 | Plumbing installed; proper backflow devices | 0 | 0 | -: |
| 50 | 0 | Sewage and waste water properly disposed | 0 | 0 | - 3 |
| 51 | 0 | Toilet facilities: properly constructed, supplied, cleaned | 0 | 0 | |
| 52 | 0 | Garbage/refuse properly disposed; facilities maintained | 0 | 0 | ٠ |
| 53 | 0 | Physical facilities installed, maintained, and clean | 0 | 0 | - |
| 54 | 羅 | Adequate ventilation and lighting; designated areas used | 0 | 0 | |
| | OUT | Administrative Items | П | | |
| 55 | 0 | Current permit posted | 0 | 0 | П |
| 56 | 0 | Most recent inspection posted | 0 | 0 | |
| | | Compliance Status | YES | NO | 8 |
| | | Non-Smokers Protection Act | | | |
| 57 | | Compliance with TN Non-Smoker Protection Act | 100 | 0 | |
| 58 | | Tobacco products offered for sale | 0 | 0 | ١ ١ |
| 59 | | If tobacco products are sold, NSPA survey completed | 0 | 0 | |

er and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing reg ten (10) days of the date of th 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

Lang 11/01/2021

Date Signature of

11/01/2021

Signature of Person In Charge

Date

**** 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



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|------|----|--------|---------|-----|----------|
| F-51 | 30 | i se i | nmont ! | 100 | ormation |
| | | | | | |

Establishment Name: El Forastero #1 MT #1254

Establishment Number #: |605261409

| 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 |
| huenhyone (21) years of age or older |

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 inflitrating into areas where smoking is prohibited.

Smoking observed where smoking is prohibited by the Act.

| Warewashing Info | | | | | | | | |
|--------------------|----------------|-----|---------------------------|--|--|--|--|--|
| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenheit) | | | | | |
| 3 compartment sink | Bleach | | | | | | | |

| Equipment Temperature | | | | | |
|-----------------------|---------------------------|--|--|--|--|
| Description | Temperature (Fahrenheit) | | | | |
| Prep cooler | 35 | | | | |
| Prep cooler | 32 | | | | |
| | | | | | |
| | | | | | |

| Food Temperature | | |
|----------------------------------|---------------|---------------------------|
| Description | State of Food | Temperature (Fahrenheit) |
| Sliced tomatoes in Prep cooler | Cold Holding | 41 |
| Mozzarella cheese in Prep cooler | Cold Holding | 41 |
| Cooked chicken in Prep cooler | Cold Holding | 37 |
| Refried beans on steam table | Hot Holding | 146 |
| Rice on steam table | Hot Holding | 139 |
| Beef on steam table | Hot Holding | 148 |
| Pork on steam table | Hot Holding | 147 |
| Cooked chicken in Prep cooler | Cold Holding | 35 |
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| Observed Violations | | | | | | |
|---|--|--|--|--|--|--|
| Observed Violations | | | | | | |
| Total # 5 Repeated # 0 | | | | | | |
| 6: Observed employee touching onions after touchin raw meat with the same gloves. Trained employee. | | | | | | |
| 26: Chemicals stored on the same shelf nest to box of tortillas and case of water | | | | | | |
| bottlles below drink machine. CA: chemicals were removed of the shelf. | | | | | | |
| 37: Employee drin(can) open stored on counter next to grill. | | | | | | |
| 46: No test strips for sanitizer at 3 compartment sink | | | | | | |
| 54: One of the cover light is broken | | | | | | |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: El Forastero #1 MT #1254

Establishment Number: 605261409

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 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 source
- 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.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.
- 19: Proper hot holding temperatures were observed
- 20: Proper cold holding temperatures were observed
- 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: (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.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57: "No Smoking" signs or the international "No Smoking" symbol are conspicuously posted at every entrance.
- 58: No

Additional Comments

See last page for additional comments.

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

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

| Establishment Name: El Forastero #1 MT #1254 | | | | | |
|--|--|--|--|--|--|
| Establishment Number: 605261409 | | | | | |
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| Comments/Other Observations (cont'd) | | | | | |
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| Additional Comments (cont'd) | | | | | |
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Establishment Information

| Establishment Name: El Forastero #1 MT #1254 Establishment Number #: 605261409 Sources | | | | | | | |
|---|------|---------|--|--------------|-------|---------|-------------------------------|
| | | | | Source Type: | Food | Source: | Los Amigos, k & S, Restaurant |
| | | | | Source Type: | Water | Source: | City |
| Source Type: | | Source: | | | | | |
| Source Type: | | Source: | | | | | |
| Source Type: | | Source: | | | | | |
| Additional Comme | ents | | | | | | |
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