

City

Risk Category

## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Number of Seats 74

O Farmer's Market Food Unit Moe's Southwest Grill Remanent O Mobile Establishment Name Type of Establishment 621 S Mt. Juliet Rd St 109 O Temporary O Seasonal Address **Mount Juliet** Time in 11:41; AM AM/PM Time out 11:52; AM AM/PM

07/17/2024 Establishment # 605249465 Embargoed 0 Inspection Date 日本 Follow-up Purpose of Inspection Routine O Complaint O Preliminary O Consultation/Other

**O**3

Follow-up Required

04

#### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	<b>e</b> in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		CC	)S=co	rrecte	d on-si	te di
					Compliance Status	cos	R	WT				
	IN	OUT	NA	NO	Supervision					IN	оит	NA
1	×	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	0	0	0
	IN	ОИТ	NA	NO	Employee Health		-		17		ŏ	ŏ
2	- NC	0			Management and food employee awareness; reporting	0	0		H	Ť	Ť	Ť
3	×	0			Proper use of restriction and exclusion	0	0	5		IN	OUT	N/
	IN	OUT	NA	NO	Good Hygienic Practices				18	0	0	0
4	30	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19	文	0	0
5	200	0		0	No discharge from eyes, nose, and mouth	0	0	l ° l	20	245	0	0
	IN	OUT	NA	NO	Proventing Contamination by Hands				21	*	0	0
6	1	0		0	Hands clean and properly washed	0	0		22	0	0	N
7	800	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5		_	_	_
	-				alternate procedures followed	_	_	$\perp$		IN	OUT	N/
8	350	0			Handwashing sinks properly supplied and accessible	0	0	_2	23	0	ΙoΙ	M
_		OUT	NA	NO	Approved Source		-	-		_		_
9	200	0			Food obtained from approved source	0	0			IN	OUT	N.
10	0	0	0	×	Food received at proper temperature	0	0	١. ١	24	0	l٥	32
11	×	0	_		Food in good condition, safe, and unadulterated	0	0	5	<u> </u>	_	ŭ	
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			IN	ОUТ	N
	IN	OUT	NA	NO	Protection from Contamination				25		0	100
13	×	0	0		Food separated and protected	0	0	4	26	窦	0	$\Box$
14	X	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	N/
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	×

					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	黨	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	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	0	×	Proper cooling time and temperature	0	0	
19	×	0	0	0	Proper hot holding temperatures	0	0	
20	凝	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	1
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	оит	NA	NO	Chemicals			
25	0	0	3%		Food additives: approved and properly used	0	0	5
26	黨	0			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

O Yes 疑 No

### res to control the introduction of pathogens, chemicals, and physical objects into foods.

		OUT=not in compliance COS=con	ected or	3-6(50	άı
		Compliance Status	COS		_
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	г
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	-
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	1
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 Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	:
37	326	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	г
40	0	Washing fruits and vegetables	0	0	г
	OUT	Proper Use of Utensils		_	
41	0	In-use utensils; properly stored	0	0	Ē
42	35	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	Ŀ
44	10	Gloves used properly	- 0	0	

pecti		R-repeat (violation of the same code provision)  Compliance Status	cos	R	W
	OUT	Utensils and Equipment			
45	羅	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	黨	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities	_		
48	0	Hot and cold water available; adequate pressure	0	0	- 2
49	0	Plumbing installed; proper backflow devices	0	0	- :
50	0	Sewage and waste water properly disposed	0	0	- 2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	-
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	
53	3%	Physical facilities installed, maintained, and clean	0	0	
54	0	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items	П		T
55	0	Current permit posted	0	0	_
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	100	0	
58		Tobacco products offered for sale	0	0	(
59		If tobacco products are sold, NSPA survey completed	0	0	

en (10) days of the date of the

07/17/2024

07/17/2024

Date

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

Date

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629 ) 6154445325 Please call ( to sign-up for a class.

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



Establishment Information							
Establishment Name: Moe's Southwest Grill							
Establishment Number #:  605249465							
NSPA Survey - To be completed if							
Age-restricted venue does not affirmatively rest twenty-one (21) years of age or older.							
Age-restricted venue does not require each per	son attempting to gain entry	to submit acceptable for	n of identification.				
"No Smoking" signs or the international "Non-Si	moking" symbol are not cons	picuously posted at ever	y entrance.				
Garage type doors in non-enclosed areas are n	ot completely open.						
Tents or awnings with removable sides or vents	in non-enclosed areas are n	not completely removed o	or open.				
Smoke from non-enclosed areas is inflitrating in	nto areas where smoking is p	rohibited.					
Smoking observed where smoking is prohibited	by the Act.						
Warewashing Info	- di -		1				
Machine Name	Sanitizer Type	PPM	Temperature ( Fah	renhelt)			
Equipment Temperature							
Description			Temperature ( Fahr	enhelt)			
Food Tomporature							
Food Temperature Description		State of Food	Temperature ( Fahr	anhalf)			
Decomption		state of Food	Temperature ( Fani	enneit)			

Observed Violations
Total # 5 Repeated # 0
Repeated # 0
37:
<b>12</b> :
<b>45</b> :
<b>17</b> :
53:
III Oan name at the and of this document for any violations that could not be disclosed in this space.

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

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

Establishment Information



Establishment Number: 605249465	
Lotabila interior : 0032+3+03	
Comments/Other Observations	
1: 2: 3: 4: 5: 6: 7: 8: 9: 10: 11: 12: 13: 14: 15: 16: 17: 18: 19: 20: Item corrected. See food temps 21: 22: 23: 24: 25: 26: 27: 57: 58:	
2:	
3:	
4:	
5:	
0. 7·	
8:	
9:	
10:	
11:	
12:	
13. $1\Lambda$	
15:	
16:	
17:	
18:	
19: 20: Item corrected See food temps	
21:	
22:	
23:	
24:	
25:	
20. 27 <sup>.</sup>	
57:	
58:	

See last page	for additional	comments
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Additional Comments

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

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

Establishment Name: Moe's Southwest Grill				
Establishment Number: 605249465				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				
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Establishment Information

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Establishment Name: Moe's Southwest Grill							
Establishment Number #: 605249465							
Sources							
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Additional Comments							
See routine inspection report for comments							