# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

A State of the																			
Establishment Name			t Narr		Best of India O Fermer's Market Food Unit							6							
5815 -D Charlotte Pike								_	Тур	xe of E	Establi	shme	O Temporary O Seasonal	L					
Address					02	<u>۸</u> .	5 P						at 03:25; PM AM / PM						
City		- 0-	to.		12/21/202	3 Establishment #						_	d 0		ne o	AM7PM			
		n Da	spect		Routine	O Follow-up	OComplaint			- ' O Pre					0	nsuitation/Other			
					O 1	SIZ2	0 Compaint 0 3			04	ANTIN	ary				up Required IX Yes O No Number of S	Carata	29	
ros	Cat	egon R	isk F	acto	ors are food prepa	aration practices a	and employee		vior	s mo				repo	rtec	to the Centers for Disease Control and Prever	tion		
				as c	ontributing facto											control measures to prevent illness or injury.			
		(11)	ric des	lgnat	ed compliance status											INTERVENTIONS ach Item as applicable. Deduct points for category or subcat	egory.)	1	
IN	⊨in c	mpii	nce		OUT-not in compliance	NA=not applicable	NO=not observe				\$=cor	recte	d on-si	ite duri	ng ins	pection R=repeat (violation of the same code provis			WT
	IN	OUT	NA	NO	Compi	Supervision		cos	I K I	WI	h	IN	OUT	NA	NO	Compliance Status Cooking and Reheating of Time/Temperature	cus	ĸ	WT
1	展	0				sent, demonstrates kn	owledge, and	0	0	5	10					Control For Safety (TCS) Foods		~	
	IN	OUT	NA			Employee Health						00				Proper cooking time and temperatures Proper reheating procedures for hot holding	00	8	5
23	区区	8		- 1	Management and foo Proper use of restrict	od employee awarenes	is; reporting	0	0	5		IN	оυт	NA	NO	Cooling and Holding, Date Marking, and Time as			
		-	NA			Hygienic Practices		-		-	18	桜	0	0	0	Public Health Control Proper cooling time and temperature	0	0	_
4	巖	8				g. drinking, or tobacco yes, nose, and mouth	use	<u>o</u>	8	5		No.	0	0	0	Proper hot holding temperatures Proper cold holding temperatures	0	8	
	IN	OUT	NA	NO	Preventing	g Contamination by	Hands					100		ŏ	0	Proper cold houring temperatures Proper date marking and disposition	ŏ	ŏ	5
6 7	直区	0	0		Hands clean and pro No bare hand contac	perly washed t with ready-to-eat foo	ds or approved	0	0 0	5	22	X	0	0	0	Time as a public health control: procedures and records	0	0	
	0		•	Ŭ	alternate procedures Handwashing sinks p	followed properly supplied and a	ccessible	12		2		IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and undercooked		_	
			NA	NO		Approved Source			0		23	O IN	O OUT	XX NA	NO	food Highly Susceptible Populations	0	0	4
10	0	0	0		Food received at pro	per temperature		0	0		24	0	0	200	no	Pasteurized foods used: prohibited foods not offered	0	0	5
11 12	<u>×</u>	0	X	0		on, safe, and unadulter ailable: shell stock tage		0	0	5	-	IN	OUT		NO	Chemicals	-	-	•
12		-	NA	-	destruction Protect	ion from Contamina	tion	-		_	25	0	0	26		Food additives: approved and properly used	0	তা	
13	12	0	0		Food separated and				2		26	×	0	NA		Toxic substances properly identified, stored, used	ō	ō	5
	定員	0 0				es: cleaned and sanitiz unsafe food, returned		0	0	5 2	27		001		1.1.1	Conformance with Approved Procedures Compliance with variance, specialized process, and HACCP plan	0	0	5
	_	_	_	Goo			annume to co	etro	1 414-0	Inter		tion	of a	atho		, chemicals, and physical objects into foods.	_		
				_		e ale presentire i				a (A)			-			, chemican, and physical objects into room.			
				001	not in compliance	ana Status	COS=corre	cted o	n-site	during						R-repeat (violation of the same code provision)	Loos		WT
	_	OUT			Safe Fo	ance Status od and Water			R			0	UT			Compliance Status Utensiis and Equipment	COS	R	WI
2	8 9				d eggs used where re ice from approved so			8	0	1	4	5 (				nfood-contact surfaces cleanable, properly designed, and used	0	0	1
3	0	О 001	Varia	nce o		d processing methods perature Control		0	0	1	40	5 (	0 V	Varewa	ashin	g facilities, installed, maintained, used, test strips	0	0	1
3	_	0				dequate equipment fo	r temperature	0	0	2	47	_	-	lonfoo	d-cor	tact surfaces clean	0	0	1
	2	_	contro Plant		properly cooked for h	tot holding		0	0		41	_	UT O H	lot and	i cold	Physical Facilities water available; adequate pressure	0	0	2
3	3 4	悹	Appro	oved	thawing methods use eters provided and ac	d		0	0		49		0 P	lumbir	ng ins	stalled, proper backflow devices waste water properly disposed		8	2
	_	OUT	rineit	i kon ne		dentification		Ŭ		_	5	_	-			is: properly constructed, supplied, cleaned		ŏ	1
3	5	0	Food	prop	erly labeled; original o	container; required reco	ords available	0	0	1	53	2	<b>0</b>   G	larbag	e/refi	use properly disposed; facilities maintained	0	٥	1
_	_	OUT				Food Contaminatio	n	-			5	-+	_			lities installed, maintained, and clean	-	0	1
	6	_			dents, and animals no			0	0	2	54	+-	-	dequa	de ve	ntilation and lighting; designated areas used	0	0	1
3	_	_				g food preparation, stor	rage & display	0	0	1			UT			Administrative items			
	8 9				leanliness ths; properly used an	d stored		0	0	1	50	_				nit posted inspection posted		0	0
4	0	0 OUT	Wasł	ning fr	ruits and vegetables Proper L	Jse of Utensils		0	0	1	F	-				Compliance Status Non-Smokers Protection Act	YES	NO	WT
4	1	0	_		nsils; properly stored		handlad	<u>0</u>	8		51					with TN Non-Smoker Protection Act ducts offered for sale	0		0
- 4		0	Single	e-use	/single-service article	properly stored, dried, is; properly stored, use		0	0	1	55	ř.				ducts onered for sale oducts are sold, NSPA survey completed	8	0	9
4	44 O Gloves used properly O O 1																		
B-17					the second s	the second data and a second data and the	the state of the second second	allow of				A 100		and the second se		Repeated station of an identical side for the second state			
serv	ice et	tablis	hmen	t perm	sit. Items identified as o	onstituting imminent hea	ith hazards shall b	e corre	cted i	mmedi	ately (	or ope	eration	is shall	ceas	Repeated violation of an identical risk factor may result in revo e. You are required to post the food service establishment perm line a written research with the Commissions within tan (10) dec	it in a c	onspi	
serv	ice et	tablis	hmen	t perm most r	it. Items identified as o recent inspection report	onstituting imminent hea	Ith hazards shall b ir. You have the rig	ht to r	cted i eques	mmedi	ately (	or ope	eration	is shall is report	ceas rt by f	e. You are required to post the food service establishment permising a written request with the Commissioner within ten (10) day	it in a c	onspi	
serv	ice et	tablis	hmen	t perm most r	it. Items identified as o recent inspection report	onstituting imminent hea in a conspicuous manne	Ith hazards shall b ir. You have the rig	ht to r 16, 4-5	cted i eques -320,	mmedi t a hea	ately (	or ope	eration	is shall is report	ceas	e. You are required to post the food service establishment permission a written request with the Commissioner within ten (10) day	it in a c s of the	date	

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

PH-2267 (Rev. 6-15)	Free food safety training of	RDA 629		
(Nev. 0-10)	Please call (	) 6153405620	to sign-up for a class.	101025

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



#### Establishment Information

Establishment Name: Best of India Establishment Number #: 605229528

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.	1
moking observed where smoking is prohibited by the Act.	+

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)				
High-temperature dishwasher	Heat		171				

Equipment Temperature	
Description	Temperature (Fahrenheit)
Dough lowboy cooler	41
Reach-in cooler 1	34
Prep cooler 1	35
Walk-in cooler 1	38

Food Temperature		
Decoription	State of Food	Temperature (Fahrenheit)
Green yogurt sauce in reach-in cooler 1	Cold Holding	41
Yogurt sauce in reach-in cooler 1	Cold Holding	40
Basmati rice in rice warmer	Hot Holding	164
Cooked chicken on prep cooler 1	Cold Holding	39
Cooked lamb on prep cooler 1	Cold Holding	40
Creamy spinach in prep cooler 1	Cold Holding	38
Dahl lentils in walk-in cooler used 1 hour ago	Cooling	47
Cooked beef in walk-in cooler	Cold Holding	41
Chicken cooked 30 minutes ago on table	Cooling	98

Total # 3

Repeated # ()

8: Container of cooked shrimp in water stored in main kitchen hand washing sink. Corrective Action: Person in charge embargoed shrimp and was trained to store food elsewhere.

33: Observed cooked chicken thawing on table left overnight. Chicken at 32F. 53: Missing and damaged ceiling tiles and walls in main kitchen. Excessive debris on dishwashing machine. Bathroom doors are not self-closing.

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



### Establishment Information

Establishment Name: Best of India

Establishment Number : 605229528

#### Comments/Other Observations

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

- 2: An employee health policy is posted on-site. Staff is aware of reportable symptoms and 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: Observed employees washing their hands at appropriate times and with correct technique.

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

9: See source information.

- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (NÁ) 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: Proper cooking time and temperatures were not observed during the time of inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Observed proper cooling time and temperatures. Temperatures recorded on report.
- 19: Observed proper hot holding. Temperatures recorded on report.
- 20: Observed proper cold holding temperatures. Temperatures recorded on report.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: Observed proper TPHC procedures.
- 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: À "No Smoking" sign or the international symbol is not posted at every exterior entrance door.
- 58: Tobacco products are not sold.

\*\*\*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: Best of India

Establishment Number : 605229528

Comments/Other Observations (cont'd)

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

#### Establishment Information

Establishment Name: Best of India

Establishment Number # 605229528

Sources						
Source Type:	Food	Source:	Sysco, GFS, Restaurant Depot			
Source Type:		Source:				
Source Type:		Source:				
Source Type:		Source:				
Source Type:		Source:				

# Additional Comments