TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

	100	THE P															
Esta	stablishment Name Kona Ice of Wilson County Truck #3 Kona Ice of Wilson County Truck #3 Type of Establishment O Permanent Mobile																
Address 173 Village Cir O Temporary O Seasonal						•											
City					Lebanon Time in	30	8:58	8 A	M	AJ	4/P	A Tir	ne o	ut 09:10:AM AM/PM			
Inspection Date 09/22/2021 Establishment # 605304409 Embargoed 0																	
Purp	ose	of In	spec		Routine O Follow-up O Complaint			O Pre					Cor	nsultation/Other			_
Risk	Cat	egon	,		运1 O2 O 3			04				Fo	ilow-	up Required O Yes 🕱 No Number of S	eats		
		R	isk 1		ors are food preparation practices and employee b ontributing factors in foodborne illness outbreaks									to the Centers for Disease Control and Preven	tion	_	
					FOODBORNE ILLNESS RIS	-		_			_	_					
				algna	ed compliance status (IH, OUT, HA, HO) for each aumbered Item.		tems										
	in c	ompili	ance		OUT=not in compliance NA=not applicable NO=not observed Compliance Status	; COS	R		5=001	recte	a on-si	te dun	ng ins	pection R*repeat (violation of the same code provisi Compliance Status	cos	R	WT
	IN	ουτ	NA	NO	Supervision					IN	оυт	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
	黨	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5		0	0			Proper cooking time and temperatures	8	ा	
2			NA	NO	Employee Health Management and food employee awareness, reporting	0	0	_	17	0	0	×	0	Proper reheating procedures for hot holding	0	0	
	×	ō			Proper use of restriction and exclusion	0	0	5		IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
			NA		Good Hygienic Practices		_			0	0	×		Proper cooling time and temperature	0	<u> </u>	
4	8	0			Proper eating, tasting, drinking, or tobacco use No discharge from eyes, nose, and mouth	00	8	5	19 20	0		意	0	Proper hot holding temperatures Proper cold holding temperatures	0	ŝ	
			NA	NO	Preventing Contamination by Hands Hands clean and properly washed	0			21	0	0	225		Proper date marking and disposition	0	0	°
-	0	0	0	<u></u>	No bare hand contact with ready-to-eat foods or approved	0	0 0	5	22		0	×		Time as a public health control: procedures and records	0	0	
					alternate procedures followed Handwashing sinks properly supplied and accessible		0	2			_	NA	NO	Consumer Advisory Consumer advisory provided for raw and undercooked			
	IN	OUT	NA	NO	Approved Source	0			23	0	O OUT	NA	110	food	0	이	4
9	8	8	0		Handwashing sinks property supplied and accessible Approved Source Food obtained from approved source Food received at proper temperature	0	0		24	IN O		NA XX	NO	Highly Susceptible Populations		ਹ	-
11 12	×	0		_	Food in good condition, safe, and unadulterated Required records available: shell stock tags, parasite	0	0	5	24	0	0	-		Pasteurized foods used; prohibited foods not offered	0	이	<u> </u>
			×	0	destruction	0	0		~	IN	OUT			Chemicals	0		
13	N N	0	NA	NO	Protection from Contamination Food separated and protected	0	0	4	29	刻の	0	X		Food additives: approved and properly used Toxic substances properly identified, stored, used	0	허	5
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Conformance with Approved Procedures		_	
15	X	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	黨		Compliance with variance, specialized process, and HACCP plan	0	0	5
	Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.																
						600	D RE	TAI	. PR	АСТ	ICES	3					
				00	T=not in compliance COS=correc		i-site (Śuring						R-repeat (violation of the same code provision) Compliance Status	COS	ъТ	WT
	_	OUT			Safe Food and Water					0	UT			Utensils and Equipment	000	~1	
2					d eggs used where required lice from approved source	8	8	1	45	5 (nfood-contact surfaces cleanable, properly designed, and used	0	0	1
3	0	0			obtained for specialized processing methods	ŏ	ŏ	î	46	5 0	- <u>r</u>			g facilities, installed, maintained, used, test strips	0	0	1
	_	OUT	Prop	er co	Food Temperature Control Ding methods used; adequate equipment for temperature	-			47	, ,	_			tact surfaces clean		0	1
3		0	cont	ol		0	0	2		0	UT			Physical Facilities			
3	_				properly cooked for hot holding thawing methods used	00	0	1	48	_				I water available; adequate pressure stalled; proper backflow devices	8	응	2
3	4	0			eters provided and accurate	0	0	1	50) (o s	ewage	and	waste water properly disposed	0	0	2
H-	_		Feed		Food identification	0	0	1	51	_				es: properly constructed, supplied, cleaned		<u> </u>	1
3		O OUT	F-000	s prop	erly labeled; original container; required records available Prevention of Feed Contamination	0	9	-	53			-		use properly disposed; facilities maintained lities installed, maintained, and clean	0	응	1
3	_	0	Inse	ts, ro	dents, and animals not present	0	0	2	54	_		,		intilation and lighting; designated areas used	_	0	1
3	7	0	Cont	amin	ation prevented during food preparation, storage & display	0	0	1		0	υт			Administrative items		_	
3	8	0	Pers	onal o	leanliness	0	0	1	55		o 0	ument	pern	nit posted	0	া	
3	_			- N	ths; properly used and stored ruits and vegetables	0	0		56	5 (D M	lost re	cent	inspection posted Compliance Status	O YES	0	
F	-	OUT			Proper Use of Utensils									Non-Smokers Protection Act			
4	_				nsils; properly stored quipment and linens; properly stored, dried, handled	00	8		57 58					with TN Non-Smoker Protection Act ducts offered for sale	8	읭	0
4	3	0	Sing	e-use	/single-service articles; properly stored, used	0	0	1	53	5				oducts are sold, NSPA survey completed	ŏ		Ť
	44 O Gloves used property O O 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 that hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous that hazards shall be corrected immediately or operations shall cease.								cuous									
repo	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. Consections 60, 7703, 68-14-709, 68-14-709, 68-14-715, 88-14-715, 78-1																
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Signature of Person In Charge

09/22/2021	09	/22	/20)21	
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Date Signature of Environmental Health Specialist

SCORE

Date

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

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Kona Ice of Wilson County Truck #3 Establishment Number #: 605304409

NSPA Survey – To	be completed	if #57 is "No"
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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.

Smoking observed where smoking is prohibited by the Act.

Warewashing Info			
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)

Equipment l'emperature	
Description	Temperature (Fahrenheit)

Food Temperature	State of Food	Temperature (Fahrenheit

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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Establishment Number : 605304409

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: (N.O.) No food workers present.

5: (N.O.) No food workers present at the time of inspection.

6: (NO) No workers present during inspection.

7: (NO) No food workers present during the inspection.

8: (IN): All handsinks are properly equipped and conveniently located for food employee use.

9: See source info

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: (NÁ) No raw animal foods served.

17: (NA) No TCS foods reheated for hot holding.

18: (N.Á.) 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: (NA) Establishment does not hot hold TCS foods.

20: Food on unit is ice and syrups

21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 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.

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: 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: Kona Ice of Wilson County Truck #3 Establishment Number : 605304409

Comments/Other Observations (cont'd)

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

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Establishment Name: Kona Ice of Wilson County Truck #3 Establishment Number # 605304409

Sources			
Source Type:	Water	Source:	City
Source Type:	Food	Source:	Home City Ice, Kona Ice
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	
Additional Comm	ents		

Mobile unit not operating during inspection. 3 comp sink not setup