TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

CHIVANADA MT #37			t Nar		CHIVANADA MT #378					-				O Fermer's Merket Food Unit O Permanent XMobile	L		
Address 461					4611 ALABAMA AVE					Тур	xe of E	Establi	shme	O Temporary O Seasonal			
					11	:3	5 A	M	AJ	4 / PI	и ти	ne oi	t 11:50:AM AM/PM				
Inspection Date 10/12/2023 Establishment # 605255987										-	d 0						
-			spect		Routine O Follow-up O Complaint		,	- O Pro			-		Cor	nsultation/Other			
		tegor			O1 102 O3			04		,				up Required 🕱 Yes O No Number of S	Seats		
10.00		-	isk I		ors are food preparation practices and employee b		vior	s mo				repo	rted	to the Centers for Disease Control and Preven		_	
as contributing factors in foodborne illness outbreaks. Public Health Interventions are control measures to prevent illness or injury.																	
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS (Wark designated compliance status (IK, OUT, HA, HO) for each aumbered liem. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)																	
IN	⊧in c	ompii	ance		OUT=not in compliance NA=not applicable NO=not observed Compliance Status		R	_	S=cor	recte	d on-si	ite duri	ng ins	pection R=repeat (violation of the same code provisi Compliance Status		RI	WT
	IN	OUT	NA	NO	Supervision	000	~ 1		h	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature	000	~ 1	
1	鬣	0		-	Person in charge present, demonstrates knowledge, and	0	0	5	16		0			Control For Safety (TCS) Foods Proper cooking time and temperatures	0		
	IN		NA	NO	Employee Health					ŏ		×		Proper reheating procedures for hot holding	0	ŏ	5
	区区	0			Management and food employee awareness: reporting Proper use of restriction and exclusion	0	0	5		IN	оυт	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
_	_		NA	NO	Good Hygienic Practices	-	-	-	18	0	0	ж	0	Proper cooling time and temperature	0	0	
4	X	0			Proper eating, tasting, drinking, or tobacco use	0	0	5	19	0)33	0	8	0	Proper hot holding temperatures	0	0	
	IN	OUT	NA	NO	No discharge from eyes, nose, and mouth Preventing Contamination by Hands	0			20	100	ŏ		0	Proper cold holding temperatures Proper date marking and disposition	8	ŏ	5
6	嵐			_	Hands clean and properly washed No bare hand contact with ready-to-eat foods or approved	0	_	5	22	0	黨	0	0	Time as a public health control: procedures and records	0	0	
7	×	0	0	0	alternate procedures followed	0	0	_		IN	OUT	_	NO	Consumer Advisory			
		0 OUT		NO	Handwashing sinks properly supplied and accessible Approved Source	0	0	2	23	0	0	×		Consumer advisory provided for raw and undercooked food	0	0	4
	8		0		Food obtained from approved source Food received at proper temperature	8	0			IN	OUT		NO	Highly Susceptible Populations		_	
11	×	ŏ			Food in good condition, safe, and unadulterated	ŏ	ŏ	5	24	0	0	×		Pasteurized foods used; prohibited foods not offered	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			IN	OUT			Chemicals			
		OUT		NO	Protection from Contamination Food separated and protected	0	0	4	25 26	0 刻	0	X		Food additives: approved and properly used Toxic substances properly identified, stored, used	0	응	5
		ŏ		1	Food-contact surfaces: cleaned and sanitized		ŏ					NA	10.00	Conformance with Approved Precedures			
15	2	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5
				Goo	d Retail Practices are preventive measures to con	ntrol	the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects into foods.			
				00	not in compliance COS=correct						1CE	3		R-repeat (violation of the same code provision)			
			_		Compliance Status		R		Ē					Compliance Status	COS	R	WT
2	8		Past		Safe Food and Water d eggs used where required	0	0	1	4		O F	ood ar	nd no	Utensils and Equipment nfood-contact surfaces cleanable, properly designed,	0	0	1
2	_				ice from approved source btained for specialized processing methods	00	8	2		-	0			and used			
		OUT			Food Temperature Control				40		-			g facilities, installed, maintained, used, test strips	0	0	1
3	1	0	contr		ling methods used; adequate equipment for temperature	0	0	2	47	_	O N UT	ontoo	3-con	tact surfaces clean Physical Facilities	0	0	1
3	_				properly cooked for hot holding	0		1	41	_	_			water available; adequate pressure	0		2
3	_				ters provided and accurate	0	0	1	49	_	_			talled; proper backflow devices waste water properly disposed		0	2
		OUT			Food Identification				51	1	0 T	oilet fa	cilitie	s: properly constructed, supplied, cleaned		0	1
3	-		Food	d prop	erly labeled; original container; required records available	0	0	1	53		-	-		use properly disposed; facilities maintained	0	0	1
_	_	OUT			Prevention of Food Contamination	-			53	-+	-			lities installed, maintained, and clean	0	0	1
3	-				dents, and animals not present	0	0	2	54		-	dedna	te ve	ntilation and lighting; designated areas used	0	0	1
3	_				tion prevented during food preparation, storage & display leanliness	0	0	1	-		UT	uncent	0.050	Administrative items	0		
3	_				ths; properly used and stored	ŏ	ŏ	1	54					nit posted inspection posted	0	0	0
4	-	O OUT	_	hing f	uits and vegetables Proper Use of Utensils	0	0	1			_			Compliance Status Non-Smokers Protection Act	YES	NO	WT
4	1	0	In-us		isils; properly stored		0		57	1				with TN Non-Smoker Protection Act	X		
4	_	0	Uten	isils, e le-use	quipment and linens; properly stored, dried, handled /single-service articles; properly stored, used	00	0	1	58 58	5				ducts offered for sale oducts are sold, NSPA survey completed	0	0	0
44 O Gloves used properly O O 1																	
					tions of risk factor items within ten (10) days may result in suspens it, items identified as constituting imminent health hazards shall be												
man				most	recent inspection report in a conspicuous manner. You have the right 4-703												
Ż		1	l	2)		1		7	/11		10/4	<u> </u>	2000
0	10/12/2023 10/12/2023 10/12/2023									× /	1/	hella -	2023				

Signature of Person In Charge

Date Signature of Environmental Health Specialist **** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice **** SCORE

Date

Free food safety training classes are available each month at the county health department. Please call () 6153405620 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: CHIVANADA MT #378 Establishment Number #: 605255987

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-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.	
	<u> </u>

Varewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						
3 comp sink not set up	Sanitizer available								

Equipment Temperature				
Description	Temperature (Fahrenheit)			
Prep cooler	40			
Reach in freezer	-10			

Food Temperature						
Description	State of Food	Temperature (Fahrenheit				
Sour cream in prep cooler	Cold Holding	42				
Empanadas on tray on tphc	Cold Holding	56				

Observed Violations
Total # 4
Repeated # 0
 22: No tphc(tilt) policy paper available on mobile unit Ca: gave tphc policy and filled out correctly 53: Residue buildup on floor behind fryers 55: Current permit not posted
56: Current inspection report not posted

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: CHIVANADA MT #378

Establishment Number : 605255987

Comments/Other Observations

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

2: Illness policy is known and practiced

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 good hygienic practices

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:

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: No raw animal products

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:

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

18:

19: (NA) Establishment does not hot hold TCS foods.

20:

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

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: (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: CHIVANADA MT #378 Establishment Number : 605255987

Comments/Other Observations (cont'd)

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

Establishment Information

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Establishment Number # 605255987

Sources			
Source Type:	Food	Source:	Rest depit, creation gardens
Source Type:		Source:	

Additional Comments