

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Sonic Permanent O Mobile Establishment Name Type of Establishment 4130 Kirby Pkwy O Temporary O Seasonal Memphis Time in 11:20; AM AM / PM Time out 12:20; PM AM / PM

06/17/2024 Establishment # 605071523 Embargoed 000 Inspection Date

O Follow-up Purpose of Inspection **K**Routine O Complaint O Preliminary O Consultation/Other Risk Category О3 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

IN-in compliance OUT-not in compliance NA-not applicable NO-not observed							0	
	Compliance Status							WT
	IN	OUT	NA	NO	Supervision			
1	Ħ	N O			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	TXC	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed	0	0	
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	嵩	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	Ŕ	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	Ħ	0			Proper disposition of unsafe food, returned food not re-		0	2

					Compliance Status	COS	R	WT
	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	×	0	0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	٠
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18		0	0	×	Proper cooling time and temperature	0	0	
19		0	文	0	Proper hot holding temperatures	0	0	
20		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	氮	0	0		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	2	0			Toxic substances properly identified, stored, used	0	0	9
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

s, chemicals, and physical objects into foods.

GOOD RET OUT not in compliance COS-corrected on-site du					
		Compliance Status	cos	ĸ	W
	OUT		-		_
28	0	Pasteurized eggs used where required	0	0	١.
29	0		0	0	
30	0	Variance obtained for specialized processing methods	0	0	Ľ
	OUT	Food Temperature Control		_	
31	ᄣ	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	Т
34	×	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	328	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 Utensils			Т
41	0	In-use utensils; properly stored	0	0	Г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г
43	100	Single-use/single-service articles; properly stored, used	0	0	Т
44		Gloves used properly	0	0	

pecti	on	R-repeat (violation of the same code provision)			
		Compliance Status	COS	R	¥
	OUT	Utensiis and Equipment			
45	麗	Food and norfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	羅	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	黨	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	窳	Hot and cold water available; adequate pressure	0	0	2
49	0	Plumbing installed; proper backflow devices	0	0	2
50	0	Sewage and waste water properly disposed	0	0	2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	1
54	羅	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items			
55	0	Current permit posted	0	0	6
56	0	Most recent inspection posted	0	0	Ľ
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	0		
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

(10) days of the date of the

Date

06/17/2024

Signature of Environmental Health Specialist

06/17/2024 Date

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

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629 9012229200 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Sonic

Establishment Number #: |605071523

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 wenty-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.	
Sarage 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.	\vdash
Smoking observed where smoking is prohibited by the Act.	_

Warewashing Info					
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)		
Sani bucket	Quat	300	87		
Three compartments sink	Quat NIU				
Mini three compartment sink					

Equipment Temperature				
Description	Temperature (Fahrenheit)			
Cold box cooler	37			
Reach in cooler deep fryer	49			
Reach in freezer L	-14			
Reach in freezer R	-6			

Food Temperature	Ship of Ford	Towns of the American
Description	State of Food	Temperature (Fahrenheit
Beef patty	Cooking	162

Observed Malariana					
Observed Violations					
Total # 15					
Repeated # ()					
31: The reach in cooler by the deep fryer is above 41°F.					
34: The reach in cooler has liquid inside of the thermometer.					
34: The coldbox cooler does not have a thermometer present.					
37: Food is lefted uncovered in the reach in freezers.					
43: Boxes of cups are on the floor .					
45: The Walk in freezer has sheets of ice present on the floor.					
45: Frost is present in the reach in freezer next to the deep fryer.					
45: A cooler and ice cream maker have out of order signs.					
46: The hose connection for the three compartment sink is leaking water.					
47: The nonfood contact surface of the ice machine has black residue present.					
48. The mini three compartment sink does not have cold water present or					
running.					
48: The Women's restroom faucet does not have water under pressure.					
54: Vents throughout the facility have brown/black residue present.					
54: The vent to the grill is making an extremely loud noise .					
54: The walk in cooler does not have adequate illumination present.					
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[&]quot;"See page at the end of this document for any violations that could not be displayed in this space.

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Establishment Information

Establishment Name: Sonic

Establishment Number: 605071523

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present. Sheran Bryson. 2/22/2026
- 2: The policy is posted.
- 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: The employee is aware of the proper handwashing procedure.
- 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: Ben E Keith
- 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: Please review the temperature log.
- 17: (NO) No TCS foods reheated during inspection.
- 18: No food was cooling down during the time of the inspection.
- 19: Time is a public health control.
- 20: Time as a public health control.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: The PIC made me aware of the policy and it is properly implemented.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 24: All pasteurized foods were in safe conditions.
- 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: Please provide no smoking signs at the entrance of your facility.

58:

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: Sonic	
Establishment Number: 605071523	
Comments/Other Observations (cont'd)	
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Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Information					
Establishment Name: So					
Establishment Number #:	605071523				
Sources					
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Additional Comme	nts				