

Address

Inspection Date

City

# TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit O Permanent MMobile

SCORE

R & C's Ocean Dive Mobile Food Est Establishment Name 3133 Jenkins Dr

Type of Establishment

O Temporary O Seasonal

Murfreesboro

Time in 11:00; AM AM/PM Time out 11:40; AM AM/PM

06/02/2021 Establishment # 605306538 Embargoed 0

O Follow-up Purpose of Inspection **E**Routine O Complaint O Preliminary O Consultation/Other

Number of Seats 0 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 O |                   |  |    |   |   |   |   |     |
|--|-------------------|--|----|---|---|---|---|-----|
| 匚  | Compliance Status |  |    |   |   |   |   | WT  |
|  | IN                | OUT  | NA | NO                                      | Supervision   |   |   |     |
| 1  | 氮                 | 0  |    |   | Person in charge present, demonstrates knowledge, and<br>performs duties                  | 0 | 0 | 5   |
|  | IN                | OUT  | NA | NO                                      | Employee Health   |   |   |     |
| 2  | $\exists X$       | 0  |    |   | Management and food employee awareness; reporting   | 0 | 0 |     |
| 3  | ×                 | Proper use of restriction and exclusion            |    | Proper use of restriction and exclusion | 0   | 0 | 5 |     |
|  | IN                | OUT  | NA | NO                                      | Good Hygienic Practices   |   |   |     |
| 4  | 0                 | 0  |    | X                                       | Proper eating, tasting, drinking, or tobacco use  | 0 | 0 | 5   |
| 5  | 0                 | 0  |    | 300                                     | No discharge from eyes, nose, and mouth   | 0 | 0 | l ° |
|  | IN                | OUT  | NA | NO                                      | Proventing Contamination by Hands   |   |   |     |
| 6  | 0                 | 0  |    | 300                                     | Hands clean and properly washed   | 0 | 0 |     |
| 7  | 0                 | 0  | 0  | ×                                       | No bare hand contact with ready-to-eat foods or approved<br>alternate procedures followed | 0 | 0 | 5   |
|  |                   | Handwashing sinks properly supplied and accessible | 0  | 0                                       | 2   |   |   |     |
|  | IN                | OUT  | NA | NO                                      | Approved Source   |   |   |     |
| 9  | 黨                 | 0  |    |   | Food obtained from approved source  | 0 | 0 |     |
| 10   | 0                 | 0  | 0  | ×                                       | Food received at proper temperature   | 0 | 0 | 1   |
| 11   | ×                 | 0  |    |   | Food in good condition, safe, and unadulterated   | 0 | 0 | 5   |
| 12   | 0                 | 0  | Ж  | 0                                       | Required records available: shell stock tags, parasite<br>destruction                     | 0 | 0 |     |
|  | IN                | OUT  | NA | NO                                      | Protection from Contamination   |   |   |     |
| 13   | X                 | 0  | 0  |   | Food separated and protected  | 0 | 0 | 4   |
| 14   | ×                 | 0  | 0  |   | Food-contact surfaces: cleaned and sanitized  | 0 | 0 | 5   |
| 15   | ×                 | 0  |    |   | Proper disposition of unsafe food, returned food not re-<br>served                        | 0 | 0 | 2   |

|    | Compliance Status   |     |     |    |   |   |   | WT  |
|----|---|-----|-----|----|---|---|---|-----|
|    | IN OUT NA NO Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods |     |     |    |   |   |   |     |
| 16 | 0   | 0   | 0   | 寒  | Proper cooking time and temperatures                                      | 0 | 0 | 5   |
| 17 | 0   | 0   | 300 | 0  | Proper reheating procedures for hot holding                               | 0 | 0 | ٠   |
|    | IN  | оит | NA  | NO | Cooling and Holding, Date Marking, and Time as<br>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   | 0   |    | Proper cold holding temperatures  | 0 | 0 | 5   |
| 21 | 0   | 0   | 282 | 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<br>food                | 0 | 0 | 4   |
|    | IN  | OUT | NA  | NO | Highly Susceptible Populations  |   |   |     |
| 24 | 0   | 0   | 335 |    | Pasteurized foods used; prohibited foods not offered                      | 0 | 0 | 5   |
|    | IN  | оит | NA  | NO | Chemicals   |   |   |     |
| 25 |   | 0   | 3%  |    | Food additives: approved and properly used                                | 0 | 0 | 5   |
| 26 | 黨   | 0   |     |    | oxic substances properly identified, stored, used                         |   | 0 | _ * |
|    | IN  | OUT | NA  | NO | Conformance with Approved Procedures                                      |   |   |     |
| 27 | 0   | 0   | ×   |    | Compliance with variance, specialized process, and<br>HACCP plan          | 0 | 0 | 5   |

#### trol the introduction of pathoge ns, chemicals, and physical objects into foods.

|    |     |  | GOO |   |   |
|----|-----|--|-----|---|---|
|    |     | OUT=not in compliance COS=con  |     |   |   |
|    |     | Compliance Status  | cos | R | W |
|    | OUT | Caro i con amo i i mori  |     |   | _ |
| 28 | 0   | Pasteurized eggs used where required                                       | 0   | 0 | 1 |
| 29 | 0   |  | 0   | 0 |   |
| 30 | 0   | Variance obtained for specialized processing methods                       | 0   | 0 | 1 |
|    | OUT | Food Temperature Control   |     |   |   |
| 31 | 0   | Proper cooling methods used; adequate equipment for temperature<br>control | 0   | 0 | : |
| 32 | 0   | Plant food properly cooked for hot holding                                 | 0   | 0 | r |
| 33 | 0   | Approved thawing methods used  | 0   | 0 | 7 |
| 34 | 0   | Thermometers provided and accurate   | 0   | 0 | Г |
|    | OUT | Food Identification  |     |   |   |
| 35 | 0   | Food properly labeled; original container; required records available      | 0   | 0 | ŀ |
|    | OUT | Prevention of Food Contamination   |     |   |   |
| 36 | 0   | Insects, rodents, and animals not present                                  | 0   | 0 | : |
| 37 | 0   | Contamination prevented during food preparation, storage & display         | 0   | 0 | ŀ |
| 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 | ' |
|    | OUT | Proper Use of Utensils   |     |   | Π |
| 41 | 0   | In-use utensils; properly stored   | 0   | 0 | г |
| 42 | 0   | Utensils, equipment and linens; properly stored, dried, handled            | 0   | 0 | Г |
| 43 | 0   |  | 0   | 0 | r |
| -  |     |  |     |   |   |

| rspection R-repeat (violation of the same code provision)  Compliance Status COS R WT |   |  |     |    |    |  |  |  |
|---|---|--|-----|----|----|--|--|--|
|   | Compliance Status  OUT Utensils and Equipment |  |     |    |    |  |  |  |
|   |   |  |     |    |    |  |  |  |
| 45  | 0   | ood and nonfood-contact surfaces cleanable, properly designed,<br>onstructed, and used |     | 0  | 1  |  |  |  |
| 46  | 0   | Warewashing facilities, installed, maintained, used, test strips                       | 0   | 0  | 1  |  |  |  |
| 47  | 17 O 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  | 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 O  |   | Adequate ventilation and lighting; designated areas used                               |     | 0  | 1  |  |  |  |
|   | OUT   | Administrative Items   | Т   |    |    |  |  |  |
| 55  | 0   | Current permit posted  | 0   | 0  | 0  |  |  |  |
| 56  | 0   | Most recent inspection posted  | 0   | 0  | ۰  |  |  |  |
|   |   | Compliance Status  | YES | NO | WT |  |  |  |
|   |   |  |     |    |    |  |  |  |
| 57  |   | Compliance with TN Non-Smoker Protection Act   | - X | 0  |    |  |  |  |
| 58  |   | Tobacco products offered for sale  | 0   | 0  | 0  |  |  |  |
| 59  |   | If tobacco products are sold, NSPA survey completed                                    | 0   | 0  |    |  |  |  |

You have the right to request a n (10) days of the date of the

06/02/2021

gnature of Person In Charge

06/02/2021 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 ) 6158987889 Please call ( to sign-up for a class.

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



| _     |      |        |         |          | _ |
|-------|------|--------|---------|----------|---|
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|       |      |        |         |          |   |

Establishment Name: R & C's Ocean Dive Mobile Food Est Establishment Number ≠: | 605306538

| 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.  |  |

| Warewashing Info         |                |     |                           |  |  |  |  |  |  |
|--------------------------|----------------|-----|---------------------------|--|--|--|--|--|--|
| Machine Name             | Sanitizer Type | PPM | Temperature ( Fahrenhelt) |  |  |  |  |  |  |
| 3 comp sink- not in use- | Quat           |     |                           |  |  |  |  |  |  |

| Equipment Temperature        |    |  |  |  |  |
|------------------------------|----|--|--|--|--|
| Description Temperature ( Fa |    |  |  |  |  |
| RIC                          | 39 |  |  |  |  |
| Cooler                       | 40 |  |  |  |  |
| Freezer                      | 10 |  |  |  |  |
|                              |    |  |  |  |  |

| Food Temperature  |               |                          |  |  |  |  |  |
|-------------------|---------------|--------------------------|--|--|--|--|--|
| Description       | State of Food | Temperature (Fahrenheit) |  |  |  |  |  |
| Shrimp in freezer | Cold Holding  | 10                       |  |  |  |  |  |
|                   |               |                          |  |  |  |  |  |
|                   |               |                          |  |  |  |  |  |
|                   |               |                          |  |  |  |  |  |
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|                   |               |                          |  |  |  |  |  |

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



### Establishment Information

Establishment Name: R & C's Ocean Dive Mobile Food Est

Establishment Number: 605306538

## 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. The policy is posted on the mobile unit.
- 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 information.
- 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. Fish is the only raw food on the unit; it is stored in the freezer.
- 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: (NO) No raw animal foods cooked during inspection. Discussed proper cooking temperature of fish with the PIC.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: (N.A.) 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: Foods in the freezer are at the proper temperatures.
- 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: "No Smoking" signs or the international "No Smoking" symbol are conspicuously posted at every entrance. 58:

# Additional Comments

See last page for 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: R & C's Ocean Dive Mobile Food Est |  |  |  |  |
|--|--|--|--|--|
| Establishment Number: 605306538                        |  |  |  |  |
|  |  |  |  |  |
| Comments/Other Observations (cont'd)                   |  |  |  |  |
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| Additional Comments (cont'd)                           |  |  |  |  |
| See last page for additional comments.                 |  |  |  |  |
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Establishment Information

| Establishment Information                              |                           |                                       |                                       |  |  |  |  |  |  |
|--|---------------------------|---------------------------------------|---------------------------------------|--|--|--|--|--|--|
| Establishment Name: R & C's Ocean Dive Mobile Food Est |                           |                                       |                                       |  |  |  |  |  |  |
| Establishment Number #: 605306538                      |                           |                                       |                                       |  |  |  |  |  |  |
|  |                           |                                       |                                       |  |  |  |  |  |  |
| Sources  |                           |                                       |                                       |  |  |  |  |  |  |
| Source Type:   | Water                     | Source:                               | RCUD                                  |  |  |  |  |  |  |
| Source Type:   | Food                      | Source:                               | Restaurant Depo, GFS, Sam's Club      |  |  |  |  |  |  |
| Source Type:   |                           | Source:                               |                                       |  |  |  |  |  |  |
| Source Type:   |                           | Source:                               |                                       |  |  |  |  |  |  |
| Source Type:   |                           | Source:                               |                                       |  |  |  |  |  |  |
| Additional Comm  | ents                      |                                       |                                       |  |  |  |  |  |  |
| The mobile unit is<br>The mobile unit pla              | ready to operate. The own | ner understands that payn<br>une 7th. | nent must be made prior to operating. |  |  |  |  |  |  |
|  |                           |                                       |                                       |  |  |  |  |  |  |
|  |                           |                                       |                                       |  |  |  |  |  |  |
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|  |                           |                                       |                                       |  |  |  |  |  |  |