

Establishment Name

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Remanent O Mobile Type of Establishment

O Temporary O Seasonal

SCORE

Number of Seats 74

01/25/2022 Establishment # 605249465 Embargoed 0 Inspection Date

Moe's Southwest Grill

Mount Juliet

621 S Mt. Juliet Rd St 109

Time in 01:39 PM AM/PM Time out 02:33: PM AM/PM

O Follow-up O Preliminary **E**Routine

Purpose of Inspection O Complaint O Consultation/Other Risk Category О3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

| 10 | ¥=in c | compli | ance | | OUT=not in compliance NA=not applicable NO=not observe | ed | | CC | S=cor | recte | d on-si | te duri | ing in: | spection |
|----|--------|--------|------|-----|--|-----|---|---------------|----------|-------|---------|---------|---------|------------------------|
| | | | | | Compliance Status | cos | R | WT | | | | | | C |
| | IN | оит | NA | NO | Supervision | | | | | IN | оит | NA | NO | Cookin |
| 1 | 羅 | 0 | | | Person in charge present, demonstrates knowledge, and performs duties | 0 | 0 | 5 | 16 | 0 | 0 | 0 | 507 | Proper coo |
| | IN | OUT | NA | NO | Employee Health | | | | 17 | _ | ŏ | ŏ | 8 | Proper reh |
| 2 | W | | | | Management and food employee awareness, reporting | 0 | 0 | $\overline{}$ | <u> </u> | Ť | Ť | Ť | - | Cooling |
| 3 | × | 0 | | | Proper use of restriction and exclusion | 0 | 0 | 5 | | IN | ОUТ | NA | NO | Cooling |
| | IN | OUT | NA | NO | Good Hygienic Practices | | _ | | 18 | 巡 | 0 | 0 | 0 | Proper coo |
| 4 | X | 0 | | 0 | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | 5 | 19 | 黨 | 0 | 0 | 0 | Proper hot |
| 5 | * | 0 | | 0 | No discharge from eyes, nose, and mouth | 0 | 0 | 0 | 20 | 24 | 0 | 0 | | Proper cold |
| | IN | OUT | NA | NO | Preventing Contamination by Hands | | | | 21 | * | 0 | 0 | 0 | Proper dat |
| 6 | 100 | 0 | | 0 | Hands clean and properly washed | 0 | 0 | | 22 | 0 | 0 | × | 0 | Time as a |
| 7 | 級 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved | 0 | 0 | 5 | | | _ | | _ | 11110 00 0 |
| | - | | | _ | alternate procedures followed | - | 0 | _ | - | IN | OUT | NA | NO | Concumos |
| 8 | IN. | | NA | NO | Handwashing sinks properly supplied and accessible Approved Source | 0 | U | 2 | 23 | 0 | 0 | 麗 | | Consumer food |
| 9 | 300 | 0 | Ten. | NO. | Food obtained from approved source | 0 | 0 | \neg | | IN | OUT | NA | NO | 1000 |
| 10 | 8 | ŏ | ~ | 3 | Food received at proper temperature | ŏ | ŏ | | - | | 001 | - | NO. | _ |
| 11 | 100 | _ | _ | - | Food in good condition, safe, and unadulterated | ŏ | ŏ | 5 | 24 | 0 | 0 | 333 | | Pasteurize |
| | - | - | 9-2 | _ | Required records available: shell stock tags, parasite | - | | | | | OUT | | | |
| 12 | _ | 0 | × | 0 | destruction | 0 | 0 | | | IN | ОUТ | NA | NO | |
| | IN | OUT | NA | NO | Protection from Contamination | | | | 25 | | 0 | X | | Food addit |
| 13 | Ä | 0 | 0 | | Food separated and protected | 0 | 0 | 4 | 26 | 2 | 0 | | | Taxic subs |
| 14 | × | 0 | 0 | | Food-contact surfaces: cleaned and sanitized | 0 | 0 | 5 | | IN | OUT | NA | NO | Conf |
| 15 | × | 0 | | | Proper disposition of unsafe food, returned food not re- served | 0 | 0 | 2 | 27 | 0 | 0 | × | | Compliano HACCP pla |

| | | | | | Compliance Status | cos | R | WT |
|----|----|-----|----|-----|---|-----|---|----|
| | IN | OUT | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | |
| 16 | 0 | 0 | 0 | 黨 | Proper cooking time and temperatures | 0 | 0 | 5 |
| 17 | 0 | 0 | 0 | 300 | Proper reheating procedures for hot holding | 0 | 0 | |
| | IN | оит | NA | NO | Cooling and Holding, Date Marking, and Time as a Public Health Control | | | |
| 18 | × | 0 | 0 | 0 | Proper cooling time and temperature | 0 | 0 | |
| 19 | × | 0 | 0 | 0 | Proper hot holding temperatures | 0 | 0 | |
| 20 | 凝 | 0 | 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 | 0 | 0 | × | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Chemicals | | | |
| 25 | 0 | 0 | 3% | | Food additives: approved and properly used | 0 | 0 | 5 |
| 26 | 黨 | 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 |

Good Retail Practices are preventive m res to control the introduction of pathoge

L PRACTICES

| | | | GOO | | |
|----|-----|--|-----|---|---|
| | | OUT=not in compliance COS=corr | | | |
| | | Compliance Status | cos | R | W |
| | OUT | Caro i con amo i i mon | | | |
| 28 | 0 | Pasteurized eggs used where required | 0 | 0 | |
| 29 | 0 | Water and ice from approved source | 0 | 0 | |
| 30 | 0 | Variance obtained for specialized processing methods | 0 | 0 | |
| | OUT | Food Temperature Control | | _ | |
| 31 | 0 | Proper cooling methods used; adequate equipment for temperature control | 0 | 0 | |
| 32 | 0 | Plant food properly cooked for hot holding | 0 | 0 | г |
| 33 | 0 | Approved thawing methods used | 0 | 0 | г |
| 34 | 0 | 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 Feed Contamination | | | |
| 36 | 0 | Insects, rodents, and animals not present | 0 | 0 | |
| 37 | 0 | Contamination prevented during food preparation, storage & display | 0 | 0 | Г |
| 38 | 0 | Personal cleanliness | 0 | 0 | Г |
| 39 | 0 | Wiping cloths; properly used and stored | 0 | 0 | Г |
| 40 | 0 | Washing fruits and vegetables | 0 | 0 | Г |
| | OUT | Proper Use of Utensils | | | |
| 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 | Single-use/single-service articles; properly stored, used | 0 | 0 | Г |
| 44 | 0 | Gloves used properly | - | 0 | т |

| spect | | R-repeat (violation of the same code provision Compliance Status | COS | R | W |
|-------|-----|---|-------|------|-----|
| | OUT | Utensils and Equipment | 111 | - 11 | |
| 45 | 涎 | Food and norifood-contact surfaces cleanable, properly designed, constructed, and used | 0 | 0 | 1 |
| 46 | 0 | Warewashing facilities, installed, maintained, used, test strips | 0 | 0 | 1 |
| 47 | 0 | Nonfood-contact surfaces clean | 0 | 0 | 1 |
| | OUT | Physical Facilities | | | |
| 48 | 0 | Hot and cold water available; adequate pressure | 0 | 0 | _ : |
| 49 | 0 | Plumbing installed; proper backflow devices | 0 | 0 | -: |
| 50 | 0 | Sewage and waste water properly disposed | 0 | 0 | 2 |
| 51 | 0 | Toilet facilities: properly constructed, supplied, cleaned | 0 | 0 | |
| 52 | 0 | Garbage/refuse properly disposed; facilities maintained | 0 | 0 | ١. |
| 53 | 0 | Physical facilities installed, maintained, and clean | 0 | 0 | |
| 54 | 0 | Adequate ventilation and lighting; designated areas used | 0 | 0 | 1 |
| | OUT | Administrative Items | Т | | |
| 55 | 0 | Current permit posted | 0 | 0 | T (|
| 56 | 0 | Most recent inspection posted | 0 | 0 | , |
| | | Compliance Status | YES | NO | W |
| | | Non-Smokers Protection Act | | | |
| 57 | | Compliance with TN Non-Smoker Protection Act | - 100 | 0 | |
| 58 | | Tobacco products offered for sale | 0 | 0 | ١ (|
| 59 | | If tobacco products are sold, NSPA survey completed | 0 | 0 | |

on report in a conspicuous manner. You have the right to request a h 6, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. n (10) days of the date of the

01/25/2022

01/25/2022

**** 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) 6154445325 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Moe's Southwest Grill
Establishment Number # [605249465

| 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 (Fahrenheit) | | | |
| Bucket | QA | 300 | | | | |
| | | | | | | |

| Equipment Temperature | | | | |
|-----------------------|--------------------------|--|--|--|
| Description | Temperature (Fahrenheit) | | | |
| Wic | 38 | | | |
| Ric | 37 | | | |
| | | | | |
| | | | | |

| Hot Holding Hot Holding Hot Holding Hot Holding Cold Holding | 145 157 157 |
|--|--|
| Hot Holding Hot Holding | 157 |
| Hot Holding | |
| | 157 |
| Cold Holding | |
| Ocia i icianig | 40 |
| Hot Holding | 150 |
| Cold Holding | 41 |
| Cooling | 45 |
| Cold Holding | 38 |
| Cold Holding | 38 |
| Cold Holding | 35 |
| | |
| | |
| | |
| | |
| | Hot Holding Cold Holding Cooling Cold Holding Cold Holding |

| Observed Violations |
|---|
| Total # 1 |
| Repeated # () |
| 45: Severely grooved cutting boards |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Moe's Southwest Grill

Establishment Number: 605249465

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: (IN): An employee health policy is available.
- 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: Employee washed hands before putting on gloves to prepare food
- 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: 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: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: See food temps
- 19: See food temps
- 20: See food temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 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:

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: Moe's Southwest Grill | | | | |
|---|--|--|--|--|
| Establishment Number: 605249465 | | | | |
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| Comments/Other Observations (cont'd) | | | | |
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| Additional Comments (cont'd) | | | | |
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Establishment Information

| | loe's Southwest Grill | | |
|-----------------------|-----------------------|---------|----------------------------------|
| stablishment Number # | 605249465 | | |
| ources | | | |
| Source Type: | Food | Source: | Merchants food service, Creation |
| Source Type: | Water | Source: | City |
| Source Type: | | Source: | |
| Source Type: | | Source: | |
| Source Type: | | Source: | |
| Additional Comme | nts | | |
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