



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

100

Establishment Name Kona Ice of Wilson County Truck #3 Type of Establishment ☐ Farmer's Market Food Unit ☐ Permanent ☒ Mobile  
Address 173 Village Cir ☐ Temporary ☐ Seasonal  
City Lebanon Time in 09:50 AM AM / PM Time out 10:05 AM AM / PM  
Inspection Date 06/03/2024 Establishment # 605304409 Embargoed 0  
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other  
Risk Category ☒ 1 ☐ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats \_\_\_\_\_

**Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention 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

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

| IN=In compliance                         |    |     |    |    | OUT=not in compliance                                                                  |  |  |  |  | NA=not applicable |                                       |     |     |    | NO=not observed                      |                                                         |    |                                                                                 |  | COS=corrected on-site during inspection |    |     |     |    | R=repeat (violation of the same code provision) |                                                                         |  |  |  |  |  |  |     |   |    |
|------------------------------------------|----|-----|----|----|----------------------------------------------------------------------------------------|--|--|--|--|-------------------|---------------------------------------|-----|-----|----|--------------------------------------|---------------------------------------------------------|----|---------------------------------------------------------------------------------|--|-----------------------------------------|----|-----|-----|----|-------------------------------------------------|-------------------------------------------------------------------------|--|--|--|--|--|--|-----|---|----|
| Compliance Status                        |    |     |    |    |                                                                                        |  |  |  |  |                   |                                       |     |     |    | COS                                  | R                                                       | WT | Compliance Status                                                               |  |                                         |    |     |     |    |                                                 |                                                                         |  |  |  |  |  |  | COS | R | WT |
| <b>Supervision</b>                       |    |     |    |    |                                                                                        |  |  |  |  |                   |                                       |     |     |    |                                      |                                                         |    | <b>Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods</b> |  |                                         |    |     |     |    |                                                 |                                                                         |  |  |  |  |  |  |     |   |    |
| 1                                        | IN | OUT | NA | NO | Person in charge present, demonstrates knowledge, and performs duties                  |  |  |  |  | 16                | IN                                    | OUT | NA  | NO | Proper cooking time and temperatures |                                                         |    |                                                                                 |  | 17                                      | IN | OUT | NA  | NO | Proper reheating procedures for hot holding     |                                                                         |  |  |  |  |  |  |     |   |    |
| 2                                        | IN | OUT | NA | NO | Management and food employee awareness, reporting                                      |  |  |  |  |                   | 18                                    | IN  | OUT | NA | NO                                   | Proper cooling time and temperature                     |    |                                                                                 |  |                                         | 19 | IN  | OUT | NA | NO                                              | Proper hot holding temperatures                                         |  |  |  |  |  |  |     |   |    |
| 3                                        | IN | OUT | NA | NO | Proper use of restriction and exclusion                                                |  |  |  |  |                   | 20                                    | IN  | OUT | NA | NO                                   | Proper cold holding temperatures                        |    |                                                                                 |  |                                         | 21 | IN  | OUT | NA | NO                                              | Proper date marking and disposition                                     |  |  |  |  |  |  |     |   |    |
| <b>Good Hygienic Practices</b>           |    |     |    |    |                                                                                        |  |  |  |  |                   |                                       |     |     |    |                                      |                                                         |    | <b>Cooling and Holding, Date Marking, and Time as a Public Health Control</b>   |  |                                         |    |     |     |    |                                                 |                                                                         |  |  |  |  |  |  |     |   |    |
| 4                                        | IN | OUT | NA | NO | Proper eating, tasting, drinking, or tobacco use                                       |  |  |  |  |                   | 22                                    | IN  | OUT | NA | NO                                   | Time as a public health control: procedures and records |    |                                                                                 |  |                                         | 23 | IN  | OUT | NA | NO                                              | Consumer advisory provided for raw and undercooked food                 |  |  |  |  |  |  |     |   |    |
| 5                                        | IN | OUT | NA | NO | No discharge from eyes, nose, and mouth                                                |  |  |  |  |                   | 24                                    | IN  | OUT | NA | NO                                   | Pasteurized foods used; prohibited foods not offered    |    |                                                                                 |  |                                         | 25 | IN  | OUT | NA | NO                                              | Food additives: approved and properly used                              |  |  |  |  |  |  |     |   |    |
| <b>Preventing Contamination by Hands</b> |    |     |    |    |                                                                                        |  |  |  |  |                   |                                       |     |     |    |                                      |                                                         |    | <b>Consumer Advisory</b>                                                        |  |                                         |    |     |     |    |                                                 |                                                                         |  |  |  |  |  |  |     |   |    |
| 6                                        | IN | OUT | NA | NO | Hands clean and properly washed                                                        |  |  |  |  |                   | 26                                    | IN  | OUT | NA | NO                                   | Toxic substances properly identified, stored, used      |    |                                                                                 |  |                                         | 27 | IN  | OUT | NA | NO                                              | Compliance with variance, specialized process, and HACCP plan           |  |  |  |  |  |  |     |   |    |
| 7                                        | IN | OUT | NA | NO | No bare hand contact with ready-to-eat foods or approved alternate procedures followed |  |  |  |  |                   | <b>Highly Susceptible Populations</b> |     |     |    |                                      |                                                         |    |                                                                                 |  |                                         |    |     |     |    |                                                 |                                                                         |  |  |  |  |  |  |     |   |    |
| 8                                        | IN | OUT | NA | NO | Handwashing sinks properly supplied and accessible                                     |  |  |  |  |                   | <b>Chemicals</b>                      |     |     |    |                                      |                                                         |    |                                                                                 |  |                                         |    |     |     |    |                                                 |                                                                         |  |  |  |  |  |  |     |   |    |
| <b>Approved Source</b>                   |    |     |    |    |                                                                                        |  |  |  |  |                   |                                       |     |     |    |                                      |                                                         |    | <b>Conformance with Approved Procedures</b>                                     |  |                                         |    |     |     |    |                                                 |                                                                         |  |  |  |  |  |  |     |   |    |
| 9                                        | IN | OUT | NA | NO | Food obtained from approved source                                                     |  |  |  |  |                   | 28                                    | OUT |     |    |                                      | Pasteurized eggs used where required                    |    |                                                                                 |  |                                         | 29 | OUT |     |    |                                                 | Water and ice from approved source                                      |  |  |  |  |  |  |     |   |    |
| 10                                       | IN | OUT | NA | NO | Food received at proper temperature                                                    |  |  |  |  |                   | 30                                    | OUT |     |    |                                      | Variance obtained for specialized processing methods    |    |                                                                                 |  |                                         | 31 | OUT |     |    |                                                 | Proper cooling methods used; adequate equipment for temperature control |  |  |  |  |  |  |     |   |    |
| 11                                       | IN | OUT | NA | NO | Food in good condition, safe, and unadulterated                                        |  |  |  |  |                   | 32                                    | OUT |     |    |                                      | Plant food properly cooked for hot holding              |    |                                                                                 |  |                                         | 33 | OUT |     |    |                                                 | Approved thawing methods used                                           |  |  |  |  |  |  |     |   |    |
| 12                                       | IN | OUT | NA | NO | Required records available: shell stock tags, parasite destruction                     |  |  |  |  |                   | 34                                    | OUT |     |    |                                      | Thermometers provided and accurate                      |    |                                                                                 |  |                                         | 35 | OUT |     |    |                                                 | Food properly labeled; original container; required records available   |  |  |  |  |  |  |     |   |    |
| <b>Protection from Contamination</b>     |    |     |    |    |                                                                                        |  |  |  |  |                   |                                       |     |     |    |                                      |                                                         |    | <b>Food Identification</b>                                                      |  |                                         |    |     |     |    |                                                 |                                                                         |  |  |  |  |  |  |     |   |    |
| 13                                       | IN | OUT | NA | NO | Food separated and protected                                                           |  |  |  |  |                   | 36                                    | OUT |     |    |                                      | Insects, rodents, and animals not present               |    |                                                                                 |  |                                         | 37 | OUT |     |    |                                                 | Contamination prevented during food preparation, storage & display      |  |  |  |  |  |  |     |   |    |
| 14                                       | IN | OUT | NA | NO | Food-contact surfaces: cleaned and sanitized                                           |  |  |  |  |                   | 38                                    | OUT |     |    |                                      | Personal cleanliness                                    |    |                                                                                 |  |                                         | 39 | OUT |     |    |                                                 | Wiping cloths: properly used and stored                                 |  |  |  |  |  |  |     |   |    |
| 15                                       | IN | OUT | NA | NO | Proper disposition of unsafe food, returned food not re-served                         |  |  |  |  |                   | 40                                    | OUT |     |    |                                      | Washing fruits and vegetables                           |    |                                                                                 |  |                                         | 41 | OUT |     |    |                                                 | In-use utensils; properly stored                                        |  |  |  |  |  |  |     |   |    |

**Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.**

## GOOD RETAIL PRACTICES

| OUT=not in compliance                   |     |  |  |  | COS=corrected on-site during inspection                                 |  |  |  |  | R=repeat (violation of the same code provision) |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
|-----------------------------------------|-----|--|--|--|-------------------------------------------------------------------------|--|--|--|--|-------------------------------------------------|-----|----|-------------------------------|-----|---------------------------------------------------------------------------------------|--|--|----------------------------------------------|--|----|-----|--|-----|-----|------------------------------------------------------------------|--|--|-----------------------------------|--|--|--|--|
| Compliance Status                       |     |  |  |  |                                                                         |  |  |  |  | COS                                             | R   | WT | Compliance Status             |     |                                                                                       |  |  |                                              |  |    |     |  | COS | R   | WT                                                               |  |  |                                   |  |  |  |  |
| <b>Safe Food and Water</b>              |     |  |  |  |                                                                         |  |  |  |  |                                                 |     |    | <b>Utensils and Equipment</b> |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 28                                      | OUT |  |  |  | Pasteurized eggs used where required                                    |  |  |  |  | 45                                              | OUT |    |                               |     | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used |  |  |                                              |  | 46 | OUT |  |     |     | Warewashing facilities, installed, maintained, used, test strips |  |  |                                   |  |  |  |  |
| 29                                      | OUT |  |  |  | Water and ice from approved source                                      |  |  |  |  | 47                                              | OUT |    |                               |     | Nonfood-contact surfaces clean                                                        |  |  |                                              |  | 48 | OUT |  |     |     | Hot and cold water available; adequate pressure                  |  |  |                                   |  |  |  |  |
| 30                                      | OUT |  |  |  | Variance obtained for specialized processing methods                    |  |  |  |  | 49                                              | OUT |    |                               |     | Plumbing installed; proper backflow devices                                           |  |  |                                              |  | 50 | OUT |  |     |     | Sewage and waste water properly disposed                         |  |  |                                   |  |  |  |  |
| <b>Food Temperature Control</b>         |     |  |  |  |                                                                         |  |  |  |  |                                                 |     |    | <b>Physical Facilities</b>    |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 31                                      | OUT |  |  |  | Proper cooling methods used; adequate equipment for temperature control |  |  |  |  | 51                                              | OUT |    |                               |     | Toilet facilities: properly constructed, supplied, cleaned                            |  |  |                                              |  | 52 | OUT |  |     |     | Garbage/refuse properly disposed; facilities maintained          |  |  |                                   |  |  |  |  |
| 32                                      | OUT |  |  |  | Plant food properly cooked for hot holding                              |  |  |  |  | 53                                              | OUT |    |                               |     | Physical facilities installed, maintained, and clean                                  |  |  |                                              |  | 54 | OUT |  |     |     | Adequate ventilation and lighting; designated areas used         |  |  |                                   |  |  |  |  |
| 33                                      | OUT |  |  |  | Approved thawing methods used                                           |  |  |  |  | <b>Administrative Items</b>                     |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 34                                      | OUT |  |  |  | Thermometers provided and accurate                                      |  |  |  |  | 55                                              | OUT |    |                               |     | Current permit posted                                                                 |  |  |                                              |  | 56 | OUT |  |     |     | Most recent inspection posted                                    |  |  |                                   |  |  |  |  |
| <b>Food Identification</b>              |     |  |  |  |                                                                         |  |  |  |  |                                                 |     |    | <b>Compliance Status</b>      |     |                                                                                       |  |  |                                              |  |    |     |  | YES | NO  | WT                                                               |  |  |                                   |  |  |  |  |
| 35                                      | OUT |  |  |  | Food properly labeled; original container; required records available   |  |  |  |  | <b>Non-Smokers Protection Act</b>               |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| <b>Prevention of Food Contamination</b> |     |  |  |  |                                                                         |  |  |  |  |                                                 |     |    | 57                            | OUT |                                                                                       |  |  | Compliance with TN Non-Smoker Protection Act |  |    |     |  | 58  | OUT |                                                                  |  |  | Tobacco products offered for sale |  |  |  |  |
| 36                                      | OUT |  |  |  | Insects, rodents, and animals not present                               |  |  |  |  | 59                                              | OUT |    |                               |     | If tobacco products are sold, NSPA survey completed                                   |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 37                                      | OUT |  |  |  | Contamination prevented during food preparation, storage & display      |  |  |  |  |                                                 |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 38                                      | OUT |  |  |  | Personal cleanliness                                                    |  |  |  |  |                                                 |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 39                                      | OUT |  |  |  | Wiping cloths: properly used and stored                                 |  |  |  |  |                                                 |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 40                                      | OUT |  |  |  | Washing fruits and vegetables                                           |  |  |  |  |                                                 |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| <b>Proper Use of Utensils</b>           |     |  |  |  |                                                                         |  |  |  |  |                                                 |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 41                                      | OUT |  |  |  | In-use utensils; properly stored                                        |  |  |  |  |                                                 |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 42                                      | OUT |  |  |  | Utensils, equipment and linens; properly stored, dried, handled         |  |  |  |  |                                                 |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 43                                      | OUT |  |  |  | Single-use/single-service articles; properly stored, used               |  |  |  |  |                                                 |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |
| 44                                      | OUT |  |  |  | Gloves used properly                                                    |  |  |  |  |                                                 |     |    |                               |     |                                                                                       |  |  |                                              |  |    |     |  |     |     |                                                                  |  |  |                                   |  |  |  |  |

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 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.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge BH Date 06/03/2024 Signature of Environmental Health Specialist [Signature] Date 06/03/2024

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

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



|                                  |                                    |
|----------------------------------|------------------------------------|
| <b>Establishment Information</b> |                                    |
| Establishment Name:              | Kona Ice of Wilson County Truck #3 |
| Establishment Number #:          | 605304409                          |

|                                                                                                                                                                   |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>NSPA Survey – To be completed if #57 is "No"</b>                                                                                                               |  |
| 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.                                                                                                          |  |

|                         |                |     |                           |
|-------------------------|----------------|-----|---------------------------|
| <b>Warewashing Info</b> |                |     |                           |
| Machine Name            | Sanitizer Type | PPM | Temperature ( Fahrenheit) |
|                         |                |     |                           |

|                              |                           |
|------------------------------|---------------------------|
| <b>Equipment Temperature</b> |                           |
| Description                  | Temperature ( Fahrenheit) |
|                              |                           |

|                         |               |                           |
|-------------------------|---------------|---------------------------|
| <b>Food Temperature</b> |               |                           |
| Description             | State of Food | Temperature ( Fahrenheit) |
|                         |               |                           |

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

**Comments/Other Observations**

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Discussed policy with pic
- 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 employee on unit 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: 3 comp sink not setup. Discussed proper setup with pic
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: No food cooled on unit
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: Unit only has 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.**

\*\*\*See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

**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.***

**Establishment Information**

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 Comments**

Mobile unit not operating during inspection. Unit only serves shaved ice