

Establishment Name

Inspection Date

Purpose of Inspection

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

Time in 12:05 PM AM / PM Time out 12:35: PM AM / PM

O Farmer's Market Food Unit

SCORE

O Permanent MMobile Type of Establishment

O Temporary O Seasonal

11/10/2022 Establishment # 605255987 Embargoed 0

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

Risk Category О3 04 Follow-up Required 级 Yes O No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

12	4=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observ	ed		0	O\$=0	ome	к
					Compliance Status	cos	R	WT] [
	IN	OUT	NA	NO	Supervision				П	I	11
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5] -	6 2	24
	IN	OUT	NA	NO	Employee Health				1 1	7 3	S
2	ЭK	0			Management and food employee awareness; reporting	0	0		1 🗆	Т	Ī
3	×	0			Proper use of restriction and exclusion	0	0	5	ш		11
	IN	OUT	NA	NO	Good Hygienic Practices					-	C
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5			C
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	l °	2	0	Ä
		OUT	NA	NO	Proventing Contamination by Hands] [2	1	ä
6	0	0		300	Hands clean and properly washed	0	0] [2	2	c
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5			I
8	0	26			Handwashing sinks properly supplied and accessible	0	0	2	1 🔽	3	c
	IN	OUT	NA	NO	Approved Source				1 Ľ	1	`
9	黨	0			Food obtained from approved source	0	0		1 🗆		I١
10	0	0	0	×	Food received at proper temperature	0	0		ΙĘ	4	c
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	ΙĽ	1	٠
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0				11
	IN	OUT	NA	NO	Protection from Contamination] [2		C
13	Ŕ	0	0		Food separated and protected	0	0	4] [2	6	ij
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5] [T	I١
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	2	7	C

CHIVANADA MT #378

4611 ALABAMA AVE

Nashville

	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	8	0	0	0	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	0	0	文	Proper hot holding temperatures	0	0	
20	145	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	-
22	0	羅	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	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	8	0			Toxic substances properly identified, stored, used	0	0	,
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

troduction of pathogens, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=corr			
		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	_ '
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	1
32	0	Plant food properly cooked for hot holding	0	0	_
33	0	Approved thawing methods used	0	0	Т
34	0	Thermometers provided and accurate	0	0	Т
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	ŀ
	OUT	Prevention of Feed Contamination			
36	涎	Insects, rodents, and animals not present	0	0	
37	0	Contamination prevented during food preparation, storage & display	0	0	1
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	$\overline{}$		T
41	0	In-use utensils; properly stored	0	0	
42	100	Utensils, equipment and linens; properly stored, dried, handled	0	0	г
43	0		0	0	Т
44		Gloves used properly	0	0	_

pect		R-repeat (violation of the same code provision Compliance Status	COS	R	W
	OUT	Utensiis and Equipment		-	
45	Ħ	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	-
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	-
47	355	Nonfood-contact surfaces clean	0	0	-
	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	- 3
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	١.
53	2%	Physical facilities installed, maintained, and clean	0	0	,
54	0	Adequate ventilation and lighting; designated areas used	0	0	-
	OUT	Administrative Items	Т		
55	類	Current permit posted	0	0	П
56	100	Most recent inspection posted	0	0	١,
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	
59		If tobacco products are sold, NSPA survey completed	0	0	

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

11/10/2022

**** 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) 6153405620 Please call (to sign-up for a class.

11/10/2022 Date

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 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.	
Smoking observed where smoking is prohibited by the Act.	

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)				
3 compartment sink (not set up)	Chlorine						

Equipment Temperature						
Description	Temperature (Fahrenheit)					
Reach in freezer	-8					
Prep cooler 1	33					
Reach in cooler 1	40					

Food Temperature Description	State of Food	Temperature (Fahrenheit
Sour cream in reach in cooler 1	Cold Holding	40
Avocado tomato salad in prep cooler	Cold Holding	37
Chicken empanada on slide rack	Cold Holding	20
Buneulo on stove rack (TPHC)	Cooling	72
Beef empanada out of fryer	Cooking	179

[&]quot;"See page at the end of this document for any violations that could not be displayed in this space.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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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: (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: (NO) No workers present during inspection.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 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.
- 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: (IN) All raw animal foods cooked to proper temperatures.
- 17: (IN) All TCS foods are properly reheated for hot holding.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: (NO) TCS food is not being held hot during inspection.
- 20: Observed proper cold-holding. See temperature log.
- 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: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57: Smoking is not observed where smoking is prohibited by the Act.
- 58: No tobacco products offered for sale.

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: CHIVANADA MT #378					
Establishment Number: 605255987					
Comments/Other Observations (cont'd)					
Additional Comments (cont'd)					
See last page for additional comments.					

Establishment Information

Establishment Infor Establishment Name:	HIVANADA MT #378		
Establishment Number #			
Sources			
Source Type:	Food	Source:	Creation Gardens, Restauant Depo
Source Type:	Water	Source:	Municipal water
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	
Additional Comme	ents		