## **TENNESSEE DEPARTMENT OF HEALTH** FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

í.	FOOD SERVICE ESTABLISHMENT INSPECTION REPORT SCORE																			
A CONTRACT OF A CONTRACT.																				
Phoenix Express				Type of Establishment Wermanent O Mobile									1							
Addre	65				1 Cumberlar	nd Square						тур	eore	-stabi	snme	O Temporary O Seasonal		L		
City					Lebanon		Time in	11	.:50	D A	M	A	1/P	и ти	me or	ut 12:12:PM AM/PM				
Inspe	ntin	n De	to.		03/01/202	22 Establishment #					Emba	-								
Purpo					KRoutine	O Follow-up	O Complaint			- O Pre			-		0.00	nsultation/Other				
					) 第1	02	03			04		,				up Required O Yes 🕱 No	Number of S	ante	20	
Risk (	-906		isk F	act	ors are food prep	aration practices	and employee	beha	vior	s mo	st co	mm	only	repo	ortec	to the Centers for Disease Cont	rol and Prevent	eacs tion	20	
				as c	ontributing facto											control measures to prevent illne	ss or injury.			
		(11	ırk de	algnat	ed compliance status	FOODBOR	NE ILLNESS Ris tach numbered item	SK F	GTO	mark	AND M OU	PU1	BLIC Ink CC	HEA 38 or R	LTH for e	I INTERVENTIONS such itom as applicable. Deduct points for e	ategory or subcate	gory.	)	
IN=i	n co	mpii	ance			ce NA=not applicable	NO=not observe				\$=con	recter	d on-s	ite duri	ng ins	spection R=repeat (violation of the				-
	N	оит	NA	NO	Comp	Supervision		COS	R	WT			0117			Compliance Status Cooking and Reheating of Time/		cos	R	WT
	-	0			Person in charge pr	esent, demonstrates k	nowledge, and	0	0	5				NA		Control For Safety (TCS)				
			NA	NO	performs duties	Employee Health		-		-	16 17	0	00	×		Proper cooking time and temperatures Proper reheating procedures for hot hold	ling	0	8	5
2 ]						ood employee awarene	ss; reporting		0	5			оит	NA	NO	Cooling and Holding, Date Marking	, and Time as			
	~	0	NA	10	Proper use of restric	ction and exclusion d Hygionic Practice		0	0	<u> </u>	48	0	0	0		a Public Health Contr	la	0		
4 2	R.	0	nua			ng, drinking, or tobacco		0	0		19	X	0	8		Proper cooling time and temperature Proper hot holding temperatures		0	8	
5 8	K	0		0	No discharge from e	eyes, nose, and mouth		0	0	5		25	0	0		Proper cold holding temperatures		0	0	5
		0	NA		Hands clean and pr	operly washed	y Hands	0	o	-		*	0	0		Proper date marking and disposition			0	
	_	ō	0	0	No bare hand conta	ct with ready-to-eat for	ods or approved	0	ō	5	22	0	0	×	-	Time as a public health control: procedu	res and records	0	0	
88			~	<u> </u>	alternate procedure Handwashing sinks	s followed properly supplied and	accessible		0	2		IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and	Lundercooked	-		
1	N	OUT	NA	NO		Approved Source				_	23	0	0	黛		food		0	0	4
	K		0	~	Food obtained from Food received at pr			0	0			IN	OUT		NO	Highly Susceptible Popula	tions		_	
11 8	X	ŏ	-	~	Food in good condit	tion, safe, and unadulte		ŏ	ŏ	5	24	0	0	X		Pasteurized foods used; prohibited foods	not offered	0	0	5
12 (	5	0	X	0	Required records av destruction	vailable: shell stock ta;	gs, parasite	0	0			IN	OUT	NA	NO	Chemicals				
			NA	NO		tion from Contamin	ation				25	0	0	X		Food additives: approved and properly u	sed		0	5
13 8	3	<u> </u>	<u> </u>		Food separated and	d protected ces: cleaned and saniti	mad		2		26	×		NA	10	Toxic substances properly identified, sto Conformance with Approved P		0	0	
14 8	_		-			of unsafe food, returned		0	0	5		_			NO	Compliance with variance, specialized p		-		
15 8	8	0			served			0	0	2	27	0	0	窝		HACCP plan		0	0	5
				Goo	d Retail Practice	es are preventive :	measures to co	ntro	the	intro	duc	tion	of p	atho	gens	s, chemicals, and physical object	s into foods.			
								GOO	D R	ar Al	. PR	АСТ	ICE	5						
				00	T+not in compliance		COS=corre	cted o	n-site	during			_			R-repeat (violation of the sam			_	
_		OUT				liance Status ood and Water		cos	R	WT	H	0	UT			Compliance Status Utensils and Equipment		COS	R	WT
28	T	0	Past		d eggs used where	required			0		45	_	o F			onfood-contact surfaces cleanable, proper	fy designed,	0	0	1
29 30	_				lice from approved s obtained for specializ	source and processing method	k	0	8	2	$\vdash$	+	0			, and used			+	·
	_	OUT				nperature Control			-		46		-			ig facilities, installed, maintained, used, te	st strips	0	0	1
31	T	0			oling methods used;	adequate equipment f	or temperature	0	0	2	47	_	-	lonfoo	d-cor	ntact surfaces clean		0	0	1
32	+	0	contr Plant		properly cooked for	hot holding		0	0	1	48		UT D ⊢	lot and	t cold	Physical Facilities i water available; adequate pressure		0	0	2
33		0	Appr	oved	thawing methods us	ed		0	0	1	49		ΟP	lumbir	ng ins	stalled; proper backflow devices		0	0	2
34	_	O		mom	eters provided and a	courate Identification		0	0	1	50	_				I waste water properly disposed es: properly constructed, supplied, cleane	4	00	0	2
35	ľ						and a stable	~			52	_							0	1
- 39		O	F000	prop		container; required re-		0	0	1			-	-		use properly disposed; facilities maintaine	0	0		
36	ľ		Incor	de ro	dents, and animals r	Food Contamination	ən	0	0	2	53	_	-			ilities installed, maintained, and clean entilation and lighting; designated areas ut	and .	0	0	1
	+	-		-	-				$\mapsto$	-	F	+-	-	weque	ne ve		20	•	<u> </u>	-
37						g food preparation, sto	orage & display	0	0	1			UT			Administrative Items				
38	_	-	-		leanliness ths: properly used ar	nd stared		0	0	1	55					nit posted inspection posted		0	2	0
40	_				ruits and vegetables				6		f	- 1 4	<u>o 14</u>	-201 10	enit	Compliance Status			NO	WT
	-	OUT			Proper	Use of Utensils			· · ·							Non-Smokers Protection	Act		-	
41 42					nsils; properly stored ouipment and linens	i ; properly stored, dried	1 handled		8	1	57					with TN Non-Smoker Protection Act oducts offered for sale		X	응	0
43		0	Singl	e-use	/single-service articl	es; properly stored, us		0	0	1	59	F				roducts are sold, NSPA survey completed		ŏ		
44		0	Glow	es us	ed properly			0	0	1										
																Repeated violation of an identical risk factor e. You are required to post the food service a				
manne	r an	nd po	st the	most	recent inspection repo		her. You have the rig	ht to r	eques							filing a written request with the Commissioner				
≻		)		<									$\mathbf{Y}_{\mathbf{z}}$	A		HAT)				
	Z	$\leq$		$\sum$			03/0	)1/2	022	<u></u>	_/		P		<u> </u>		C	)3/0	)1/2	2022
Signa	itun	e of	Pers	on In	Charge				C	Date	Sig	natu	re of	Envir	onme	ental Health Specialist				Date

Signature of Person In Charge

Date Signature of Environmental Health Specialist

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

PH-2267 (Rev. 6-15)	Free food safety training cla	isses are available each mor	th at the county health department.	RDA 629
1192201 (Nev. 0-10)	Please call (	) 6154445325	to sign-up for a class.	104.023

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



#### Establishment Information

Establishment Name: Phoenix Express Establishment Number #: 605229462

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)						
3 comp sink	QA	200							

Equipment Temperature	
Description	Temperature (Fahrenheit)
Ric	38

Food Temperature				
Decoription	State of Food	Temperature (Fahrenheit)		
Milk	Cold Holding	40		
Chicken sandwich	Hot Holding	140		

<u> </u>
Observed Violations
Total #
Repeated # ()
46: 3 comp sink missing drain board

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



#### Establishment Information

Establishment Name: Phoenix Express

Establishment Number : 605229462

#### 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 washing hands before preparing drink

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: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 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:

\*\*\*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.

# Establishment Information

Establishment Name: Phoenix Express

Establishment Number : 605229462

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

# Establishment Information

Establishment Name: Phoenix Express

Establishment Number #: 605229462

Sources			
Source Type:	Food	Source:	Sysco, tnt produce, tropical, prairie
Source Type:	Water	Source:	City
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

# Additional Comments