TENNESSEE DEPARTMENT OF HEALTH

1

AND NO.				FOOD SER	VICE ESTA	BL	ISH	IME	ENT	r II	NS	PEC	TI	ON REPORT	sco					
Establishment Name			Taco Bell #033643							10										
Add	ess				8522 Hixson Pike O Temporary O Seasonal										/					
City					Hixson Time in 09:45 AM AM / PM Time out 10:20; AM AM / PM															
		n Da			02/06/2024 Establishment # 605252239 Embargoed 0															
			spect		KRoutine	O Follow-up	O Complaint			- O Pr			a =		0.00	nsultation/Other				
					O 1	SE2	03			04	20011001	ary					Number of S		96	
POSK	Cat	egon R	·			0-0-	÷ •	beha			et c	omin	non			up Required O Yes 🗮 No d to the Centers for Disease Contr			50	
				as c	ontributing fac				_	_						control measures to prevent illne	ss or injury.			
		(11	rk der	ignet	ed compliance sta											INTERVENTIONS such item as applicable. Deduct points for c	ategory or subcate	gory.)	,	
IN	in co	mpīi	ance			ance NA=not applicable	NO=not observe				S=co	recte	d on-	site duri	ing ins	spection R=repeat (violation of the				
	IN	оит	NA	NO	Con	npliance Status Supervision		cos	R	WT						Compliance Status Coolding and Reheating of Time/		cos	ĸ	WT
1	_	0				present, demonstrates	knowledge, and	0	0	5		IN	001		NO	Control For Safety (TCS)	Foods	_	-	
-	_		NA	NO	performs duties	Employee Health		-		-	16	00	8	X		Proper cooking time and temperatures Proper reheating procedures for hot hold	ling	8	8	5
	X					d food employee awarer	ess; reporting		0	5		IN	ουι	T NA	NO	Cooling and Holding, Date Marking				
-	~ ~	0	NA			triction and exclusion ood Hygionic Practic		0	0		19	0	0	0		a Public Health Contro Proper cooling time and temperature	lo	0		
4	1	0	nun.	0	Proper eating, tas	sting, drinking, or tobacc	o use	0	0		19	家	0	0		Proper hot holding temperatures		0	0	
5		0 OUT	NA			m eyes, nose, and mout ting Contamination		0	0	-		100	8		0	Proper cold holding temperatures Proper date marking and disposition		8	00	5
6	×	0		0	Hands clean and	properly washed		0	-	5	22		ō			Time as a public health control: procedur	res and records	ō	0	
	邕	٥	0	0	alternate procedu			0	0			IN	out	T NA	NO					
8		애	NA	NO	Handwashing sin	ks properly supplied an Approved Source	d accessible	0	0	2	23	0	0	黛		Consumer advisory provided for raw and food	d undercooked	0	0	4
	8		0			proper temperature			2			IN	OUT		NO	Highly Susceptible Popula	rtions			
10		ŏ	0		Food in good con	dition, safe, and unadul		0	0	5	24	0	0	X		Pasteurized foods used; prohibited foods	s not offered	0	0	5
12	0	0	×	0	Required records destruction	available: shell stock to	egs, parasite	0	0			IN	ουι		NO	Chemicals				
13	IN I	OUT	NA 家	NO	Prote Food separated a	ection from Contami	nation	0		4	25	0 10	8	X	J	Food additives: approved and properly un Toxic substances properly identified, stor		8	0	5
14		ŏ			Food-contact sur	faces: cleaned and san		ŏ	ŏ	5		IN	OUT		NO	Conformance with Approved P	rocedures		_	
15	8	٥			Proper disposition served	n of unsafe food, returne	ed food not re-	0	0	2	27	0	0	8		Compliance with variance, specialized pr HACCP plan	rocess, and	0	0	5
	_	_		Gaa	d Rotall Practi		managements to co	atro	l the	Inte	adue	tion	of a	oatho		, chemicals, and physical objects	a lato fooda			
				600	a Netali Pract	ices are preventive	measures to co						_		gena	s, chemicals, and physical object	s into toods.			
				00	Penot in compliance		COS=corre	cted o	n-site	au . during				80 80		R-repeat (violation of the sam				
_		OUT				pliance Status Food and Water		COS	R	WT		10	UT			Compliance Status Utensils and Equipment		COS	R	WT
2	3	0	Paste		d eggs used when	re required		0	2	1	4	_				infood-contact surfaces cleanable, proper and used	1y designed,	0	0	1
3	>	0	Varia		btained for specia	alized processing metho	ds	ŏ	0	2	4	6 0	- 1			g facilities, installed, maintained, used, te	st strins.	0	0	1
	-	OUT	_	er cor		emperature Control d; adequate equipment	for temperature			_	4		-			ntact surfaces clean		0	0	1
3		~	contr	ol	-		ror componentine	0	0	2		0	UT			Physical Facilities				
3	_				properly cooked f thawing methods			8	8	1	4		-			f water available; adequate pressure stalled; proper backflow devices		8	0	2
3		0	Therr		eters provided and	d accurate		0	0	1	5	0 0	0	Sewage	e and	waste water properly disposed		0	0	2
3	_	OUT				d identification	odefe available	0	0	1	5	_	_			es: properly constructed, supplied, cleaner use properly disposed; facilities maintaine		0	0 0	1
3		OUT	F000	prop		of Food Contaminat			-	'	5		-	-	·	itities installed, maintained, and clean	10		0	1
		Insec	ts, rodents, and animals not present			0	0	2	5		-			entilation and lighting; designated areas us	sed	ŏ	õ	1		
3	,	0	Conta	amina	ition prevented du	uring food preparation, s	torage & display	0	0	1		0	υт			Administrative items		_		
3	3				leanliness			0	0	1	5		0	Current	t pern	nit posted		0	0	0
3	_			<u> </u>	ths; properly used ruits and vegetable			0			5	6 (0	Most re	cent	Compliance Status		0	0	WT
4		OUT			Prope	er Use of Utensils				1						Non-Smokers Protection	Act			m
4					nsils; properly stor guipment and line	red ms; properly stored, drie	d, handled	8	8	1	5	8				with TN Non-Smoker Protection Act ducts offered for sale		8	0	0
- 4	3	0	Singl	e-use		ticles; properly stored, u		0	8	1	5	9				oducts are sold, NSPA survey completed	1	ŏ	0	

iture 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 foor foor rive 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 conspicuou mer 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 thi ort. T.C.A. sections 68-14-703, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

(02/06/2024	Cove Aff	02/06/2024
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date

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

Free food safety training classes are available each month at the county health department. Please call () 4232098110 to sign-up for a class. PH-2267 (Rev. 6-15) RDA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Taco Bell #033643 Establishment Number #: 605252239

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 sink	Quat	300										

Equipment Temperature	ent l'emperature							
Description	Temperature (Fahrenheit)							
Walkin	36							

Food Temperature					
Decoription	State of Food	Temperature (Fahrenheit)			
Cuttoms	Cold Holding	38			
Cut lettuce	Cold Holding	40			
Potatoes	Hot Holding	160			
Chx	Hot Holding	168			
Beans	Hot Holding	145			
Rice	Hot Holding	165			
Beef	Hot Holding	168			
Nacho chz	Hot Holding	165			
Cut toms	Cold Holding	36			

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Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Employee health standard poster in break room
- 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: Hands wsjed as needed

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: Approved

- 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: No raw protein

- 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: Not observed
- 19: Adequate hot hokding available
- 20: Adequate cold holding available
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 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: Taco Bell #033643

Establishment Number : 605252239

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Taco Bell #033643

Establishment Number # 605252239

Sources				
Source Type:	Water	Source:	Public	
Source Type:	Food	Source:	Mclane	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

Additional Comments