

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

RT SCORE

100

O Farmer's Market Food Unit CHIVANADA MT #378 O Permanent MMobile Establishment Name Type of Establishment **4611 ALABAMA AVE** O Temporary O Seasonal Address Nashville Time in 05:55 PM AM / PM Time out 06:00; PM AM / PM City 04/13/2023 Establishment # 605255987 Embargoed 0 Inspection Date 日本 Follow-up Routine O Complaint O Preliminary O Consultation/Other Purpose of Inspection

Risk Category O1 🞉 O3 O4 Follow-up Required O 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

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IM, OUT, MA, MO) 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							С	
	Compliance Status							WT
	IN	OUT	NA	NO	Supervision			
1	×	0			Person in charge present, demonstrates knowledge, and performs duties		0	5
	IN	OUT	NA	NO	Employee Health			
2	$\exists X$	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion		0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	-
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed	0	0	
7	拟	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	X	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT		NO	Protection from Contamination			
13	×	0	0		Food separated and protected	0	0	4
14	X	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	M	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	寒	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	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	文	0	Proper hot holding temperatures	0	0	
20	200	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	•
22	X	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	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	3%		Food additives: approved and properly used	0	0	5
26	菜	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

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

		AUV	G00		
		OUT=not in compliance COS=con			
	Tarre	Compliance Status	cos	K	Ľ
	OUT		-	_	_
28	0	Pasteurized eggs used where required	0	0	Ι.
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	L.
	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	Ι.
34	0	Thermometers provided and accurate	0	0	Г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	1
	OUT	Prevention of Food Contamination			
36	0	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	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	Ι,
43	0	Single-use/single-service articles; properly stored, used	0	0	r
44	0	Gloves used properly	0	0	

nature of Person In Charge

pecti	2011	R-repeat (violation of the same code provision) Compliance Status	cos	R	W
	OUT	Utensils and Equipment			
45	0	Food and nonfood-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	- 3
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	
	OUT	Administrative Items	П		
55	0	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	8
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	100	0	
58		Tobacco products offered for sale	9	0	١ ١
59		If tobacco products are sold, NSPA survey completed	0	0	\perp

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 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 (8/14-70), (8/14-

04/13/2023

Date Signature of Environmental Health Specialist

Date

04/13/2023

**** 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 classes are available each month at the county health department.
Please call () 6153405620 to sign-up for a class.

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								
Age-restricted venue does not affirmatively rest twenty-one (21) years of age or older.								
Age-restricted venue does not require each per	son attempting to gain entry	to submit acceptable for	m of identification.					
"No Smoking" signs or the international "Non-Sr	moking" symbol are not cons	picuously posted at ever	y entrance.					
Garage type doors in non-enclosed areas are n	ot completely open.							
Tents or awnings with removable sides or vents	In non-enclosed areas are r	not completely removed	or open.					
Smoke from non-enclosed areas is inflitrating in	nto areas where smoking is p	rohibited.						
Smoking observed where smoking is prohibited	by the Act.							
Warewashing Info			I					
Machine Name	Sanitizer Type	PPM	Temperature (Fah	renhelt)				
Equipment Temperature								
Description			Temperature (Fahr	enhelt)				
Food Tonnorman								
Food Temperature								
			T=					
Description		State of Food	Temperature (Fahr	enhelt)				

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stablishment Name: CHIVANADA MT #378	
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Comments/Other Observations	
(IN): PIC demonstrates knowledge by correctly answering question	ns regarding principles applicable to the food
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See last page for additional comments

Additional Comments

^{***}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

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Sources						
Source Type:	Source:					
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Source Type:	Source:					
Source Type:	Source:					
Additional Comments						