

Establishment Name

Inspection Date

Address

City

# TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

O Permanent MMobile Type of Establishment

Time in 11:53; AM AM / PM Time out 12:28; PM AM / PM

O Temporary O Seasonal

SCORE

12/28/2023 Establishment # 605323114 Embargoed 0

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

Risk Category О3 Follow-up Required O Yes 疑 No

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

12	<b>4</b> =in c	ompli	ence		OUT=not in compliance NA=not applicable NO=not observ	red		C
					Compliance Status	COS	R	WT
	IN	OUT	NA	NO	Supervisien			
1	糕	0			Person in charge present, demonstrates knowledge, and performs duties		0	5
	IN	OUT	NA	NO	Employee Health			
2	-MC	0			Management and food employee awareness; reporting	0	0	
3	寒	0			Proper use of restriction and exclusion		0	5
	IN	OUT	NA	NO	Good Hygienic Practices	$\top$		
4	0	0		X	Proper eating, tasting, drinking, or tobacco use	0	0	5
5	0	0		300	No discharge from eyes, nose, and mouth		0	l °
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	0	0		300	Hands clean and properly washed		0	
7	0	0	0	×	No bare hand contact with ready-to-eat foods or approved alternate procedures followed		0	5
8	X	0			Handwashing sinks properly supplied and accessible		0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source		0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	×	0	1		Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction		0	
	IN	OUT	NA	NO	Protection from Contamination			
13	Ä	0	0		Food separated and protected	0	0	4
14	X	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served		0	2

South East Feast LLC Mobile Unit

226 Hickory Point Drive

Lebanon

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	Proper hot holding temperatures	0	0	
20		0	0	L.	Proper cold holding temperatures	0	0	5
21	0	0	0	200	Proper date marking and disposition	0	0	•
22	0	0	0	氮	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	鼷	0	0		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25		0	X		Food additives: approved and properly used	0	0	5
26	0.0	0			Toxic substances properly identified, stored, used	0	0	v
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

#### s to control the introduction of pathogo s, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	W
	OUT	Caro i con amo i i mon			
28	0	Pasteurized eggs used where required	0	0	
29	0	Water and ice from approved source	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	
32	0	Plant food properly cooked for hot holding	0	0	г
33	0	Approved thawing methods used	0	0	г
34	0	Thermometers provided and accurate	0	0	Г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	Г
	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	
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	-		
41	0	In-use utensils; properly stored	0	0	Г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г
43	0	Single-use/single-service articles; properly stored, used	0	0	Г
44	0	Gloves used properly	-	0	г

pecti		R-repeat (violation of the same code provision)  Compliance Status	cos	R	W
	OUT	Utensiis and Equipment	000		
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	- :
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			
55	0	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	Ľ
		Compliance Status	YES	NO	٧
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- XK	0	
58		Tobacco products offered for sale	0	0	١
59		If tobacco products are sold, NSPA survey completed	0	0	_

vanner. You have the right to request a h n (10) days of the date of the

12/28/2023

Date Signature of Environmental Health Specialist

also

12/28/2023

Signature of Person In Charge

Date

\*\*\*\* 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



Establishment Information				
	st LLC Mobile Unit			
00500044				
Establishment Number #: [605323114	<b>•</b>			
NSPA Survey - To be completed if	F#57 is "No"			
Age-restricted venue does not affirmatively restricted venue for age or older.		r facilities at all times to	persons who are	
Age-restricted venue does not require each pe	erson attempting to gain entry	to submit acceptable for	orm of identification.	
"No Smoking" signs or the international "Non-S	Smoking" symbol are not con	spicuously posted at ev	ery entrance.	
Garage type doors in non-enclosed areas are	not completely open.			
Tents or awnings with removable sides or veni	ts in non-enclosed areas are	not completely removed	i or open.	
Smoke from non-enclosed areas is infiltrating	into areas where smoking is	prohibited.		
Smoking observed where smoking is prohibite	d by the Act.			
Warewashing Info				
Machine Name	Sanitizer Type	PPM	Temperature ( Fah	renhelfi
Three comp sink			- Competence ( ) Com	
Trifee comp sink	Quat and or			
		•	•	
Equipment Temperature				
Description			Temperature ( Fahr	renhelt)
Avantco Prep Table RIC			40	
Food Temperature				
Description		State of Food	Temperature ( Fahr	enhelt)
			10	
1				

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



#### Establishment Information

Establishment Name: South East Feast LLC Mobile Unit

Establishment Number: 605323114

#### Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Establishment has employee illness policy
- 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 food workers present 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 sources
- 10: (NO): No food received during inspection.
- 11: No food present during inspection
- 12: (NA) Shell stock not used and parasite destruction not required at this establishment.
- 13: No food present during inspection
- 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: No food present and no food cooked during inspection
- 17: (NO) No TCS foods reheated during inspection.
- 18: No foods present during inspection
- 19: (NO) TCS food is not being held hot during inspection.
- 20: See temps
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 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:

- 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:

#### Additional Comments

See last page for additional comments.

<sup>\*\*\*</sup>See page at the end of this document for any violations that could not be displayed in this space.

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

Establishment Name: South East Feast LLC Mobile Unit				
Establishment Number: 605323114				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				

Establishment Information

Establishment Information						
Establishment Number #:	outh East Feast LLC Mo	bile Unit				
stablishment (vumber #,	605323114					
Sources						
Source Type:	Water	Source:	City			
Source Type:	Food	Source:	Taylor Farms Restaurant Depot			
Source Type:		Source:				
Source Type:		Source:				
Source Type:		Source:				
Additional Comme	ents					
Three comp sink no No food present du	ot set up during inspectio ring inspection	n				