



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

99

Establishment Name Bucanas Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile
Address 3810 Nolensville Rd. ☐ Temporary ☐ Seasonal
City Nashville Time in 02:35 PM AM / PM Time out 03:20 PM AM / PM
Inspection Date 05/11/2023 Establishment # 605213227 Embargoed 0
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other
Risk Category ☒ 1 ☐ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats 180

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) 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					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)				
Compliance Status										COS					R					WT									
	IN	OUT	NA	NO	Supervision																								
1	☒	☐			Person in charge present, demonstrates knowledge, and performs duties					☐	☐	5																	
	IN	OUT	NA	NO	Employee Health																								
2	☒	☐			Management and food employee awareness, reporting					☐	☐	5																	
3	☒	☐			Proper use of restriction and exclusion					☐	☐																		
	IN	OUT	NA	NO	Good Hygienic Practices																								
4	☒	☐		☐	Proper eating, tasting, drinking, or tobacco use					☐	☐	5																	
5	☒	☐		☐	No discharge from eyes, nose, and mouth					☐	☐																		
	IN	OUT	NA	NO	Preventing Contamination by Hands																								
6	☒	☐		☐	Hands clean and properly washed					☐	☐	5																	
7	☒	☐	☐	☐	No bare hand contact with ready-to-eat foods or approved alternate procedures followed					☐	☐																		
8	☒	☐			Handwashing sinks properly supplied and accessible					☐	☐	2																	
	IN	OUT	NA	NO	Approved Source																								
9	☒	☐			Food obtained from approved source					☐	☐	5																	
10	☐	☐	☐	☒	Food received at proper temperature					☐	☐																		
11	☒	☐			Food in good condition, safe, and unadulterated					☐	☐																		
12	☐	☐	☒	☐	Required records available: shell stock tags, parasite destruction					☐	☐	2																	
	IN	OUT	NA	NO	Protection from Contamination																								
13	☒	☐	☐		Food separated and protected					☐	☐	4																	
14	☒	☐	☐		Food-contact surfaces: cleaned and sanitized					☐	☐																		
15	☒	☐			Proper disposition of unsafe food, returned food not re-served					☐	☐	2																	

Compliance Status										COS					R					WT				
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods																			
16	☐	☐	☒	☐	Proper cooking time and temperatures					☐	☐	5												
17	☐	☐	☒	☐	Proper reheating procedures for hot holding					☐	☐													
	IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control																			
18	☐	☐	☒	☐	Proper cooling time and temperature					☐	☐	5												
19	☐	☐	☒	☐	Proper hot holding temperatures					☐	☐													
20	☒	☐	☐		Proper cold holding temperatures					☐	☐													
21	☒	☐	☐	☐	Proper date marking and disposition					☐	☐													
22	☐	☐	☒	☐	Time as a public health control: procedures and records					☐	☐	4												
	IN	OUT	NA	NO	Consumer Advisory																			
23	☐	☐	☒		Consumer advisory provided for raw and undercooked food					☐	☐	5												
	IN	OUT	NA	NO	Highly Susceptible Populations																			
24	☐	☐	☒		Pasteurized foods used; prohibited foods not offered					☐	☐	5												
	IN	OUT	NA	NO	Chemicals																			
25	☐	☐	☒		Food additives: approved and properly used					☐	☐	5												
26	☒	☐			Toxic substances properly identified, stored, used					☐	☐													
	IN	OUT	NA	NO	Conformance with Approved Procedures																			
27	☐	☐	☒		Compliance with variance, specialized process, and HACCP plan					☐	☐	5												

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



Establishment Information	
Establishment Name:	Bucanas
Establishment Number #:	605213227

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 compartment sink	Chloine		

Equipment Temperature	
Description	Temperature (Fahrenheit)
Walk in cooler	40

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)

Observed Violations

Total # 1

Repeated # 0

37: A box has lemon stored on the floor in walk in cooler.

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Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Employee health policy is available.
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (IN) Employee drinking from an approved container which is stored properly.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.
- 6: Employees observed properly washing hands at appropriate points.
- 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
- 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: No tcs foods held for cooling.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: Temperatures recorded on report.
- 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.

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

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Comments/Other Observations (cont'd)**Additional Comments (cont'd)**

See last page for additional comments.

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Sources

Source Type:	Food	Source:	Sams
Source Type:	Water	Source:	City
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

Additional Comments