

Establishment Name

Inspection Date

Address

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

R*repeat (violation of the same code provisi

O Farmer's Market Food Unit Mangos Mexican Restaurant Remanent O Mobile Type of Establishment

1416 W Main St Ste C O Temporary O Seasonal

Lebanon Time in 01:47: PM AM / PM Time out 01:54: PM AM / PM City 06/12/2023 Establishment # 605247495 Embargoed 0

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

Number of Seats 150 Risk Category О3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

us (IK, OUT, HA, HO) for ea

IN	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		cc)\$=co	rrecte	d on-si	te dur	ing ins	pection
Compliance Status						cos	R	WT						Complia
	IN	оит	NA	NO	Supervision			\Box		IN	оит	NA	NO	Cooking and I
1	0	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	0	0	0	0	Proper cooking tim
	IN	IN OUT NA NO Employee Health					17	_	0	O	Ó	Proper reheating p		
2	0	0			Management and food employee awareness; reporting	0	0 0							Cooling and Ho
3	0	0			Proper use of restriction and exclusion	0	0	5		IN	OUT	NA	NO	a F
	IN	ОUТ	NA	NO	Good Hygienic Practices				18	0	0	0	0	Proper cooling time
4	0	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19	0	0	0	0	Proper hot holding
5	0	0		0	No discharge from eyes, nose, and mouth	0	0	l ° l	20	0	0	0		Proper cold holding
	IN	OUT	NA	NO	Preventing Contamination by Hands				21	0	0	0	0	Proper date markir
6	0	0		0	Hands clean and properly washed	0	0		22	0	0	0	0	Time as a public h
7	0	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5		IN	OUT	NA	_	Tanne do a pacine in
8	0	0			alternate procedures followed Handwashing sinks properly supplied and accessible	0	0	2	1	-			NO	Consumer advisor
Ť		OUT	NA	NO	Approved Source	Ť	_	Ť	23	0	0	0		food
9	0	0			Food obtained from approved source	0	0	\Box		IN	OUT	NA	NO	Highly
10	0	0	0	0	Food received at proper temperature	0	0	1 1	1			$\overline{}$		Destruction of four de
11	0	0			Food in good condition, safe, and unadulterated	0	0	5	24	0	0	0		Pasteurized foods
12	0	0	0	0	Required records available: shell stock tags, parasite destruction	0	0			IN	OUT	NA	NO	
	IN	OUT	NA	NO	Protection from Contamination				25	0	0	0		Food additives: ap
13	0	0	0		Food separated and protected	0	0	4	26	0	0			Toxic substances
14	0	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Conforman
15	0	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	0		Compliance with v HACCP plan

					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	0	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	0	0	Proper cooling time and temperature	0	0	
19		0	0	0	Proper hot holding temperatures	0	0	
20	0	0	0		Proper cold holding temperatures	0	0	5
21	0	0	0	0	Proper date marking and disposition	0	0	•
22	0	0	0	0	Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory			
23	0	0	0		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	0		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	0		Food additives: approved and properly used	0	0	5
26	0	0			Toxic substances properly identified, stored, used	0	0	,
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	0		Compliance with variance, specialized process, and HACCP plan	0	0	5

s to control the introduction of pathoge ns, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	W
	OUT	Caro reconstruction			
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 Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	238	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	Г
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils			_
41	120	In-use utensils; properly stored	0	0	Г
42	100	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г
43	0		0	0	
44	10	Gloves used properly	0	0	_

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Signature of Person In Charge

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	T:
49	0	Plumbing installed; proper backflow devices	0	0	-:
50	0	Sewage and waste water properly disposed	0	0	- 2
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	Г
56	0	Most recent inspection posted	0	0	L.
		Compliance Status	YES	NO	٧
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	0	$ \bot $

est recent inspection report in a conspicuous manner. You have the right to request a h ten (10) days of the date of the 14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320

06/12/2023

Date Signature of Environmental Health Specialist

06/12/2023

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

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629) 6154445325 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information										
Establishment Name: Mangos Mexican Restaurant										
Establishment Number #: 605247495										
MCDA Commun. To be completed if	4F7 := #N=#									
NSPA Survey – To be completed if: Age-restricted venue does not affirmatively rest		facilities at all times to ne	rsons 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 in	nto areas where smoking is p	rohibited.								
Smoking observed where smoking is prohibited	by the Act.									
Warewashing Info	- 4 -		1							
Machine Name	Sanitizer Type	PPM	Temperature (Fah	renhelt)						
Equipment Temperature										
Description			Temperature (Fahr	enhelt)						
-			•							
Food Temperature		Make at Freed								
Description		State of Food	Temperature (Fahr	ennent)						
l .										

bserved Violations	
tal # 3 peated # 0	
pealed # 0	
7. ·	
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One name at the end of this document for any violations that could not be displayed in this space.	

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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Name: Mangos Mexican Restaurant

Establishment Information



Establishment Number: 605247495			
Comments/Other Observations			
57: 58:			
***See page at the end of this document for a	ny violations that could not be displa	ayed in this space.	
Additional Comments			
See last page for addition	ai comments.		
***See page at the end of this document for a	ny extra Additional Comments that	could not be displayed in	this space.

Establishment Name: Mangos Mexican Restaurant				
Establishment Number: 605247495				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				

Establishment Information

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Sources	1						
Source Type:	Source:						
Source Type:	Source:						
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Source Type:	Source:						
O T	0						
Source Type:	Source:						
Course Type	Source:						
Source Type:	Source.						
Additional Comments							
Additional Comments							
Priority violations corrected at time of follow up inspec	ction						
Two Door RIC under grill top temperature at 37 degre							
Delfield RIC organized by internal cooking temp of ra							