



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

|       |
|-------|
| SCORE |
| 99    |

Establishment Name Tasty and Delicious MT#676 Type of Establishment  Farmer's Market Food Unit  
 Permanent  Mobile  
 Address 3716 NOLENSVILLE PIKE STE D  
 Temporary  Seasonal  
 City Nashville Time in 10:45 AM AM / PM Time out 11:45:AM AM / PM  
 Inspection Date 05/27/2022 Establishment # 605305132 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 \_\_\_\_\_

**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.)

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

  

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

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

### GOOD RETAIL PRACTICES

| Compliance Status   |                          |  |  |  | COS | R | WT |
|---|--------------------------|--|--|--|-----|---|----|
| OUT   |                          |  |  |  |     |   |    |
| <b>Safe Food and Water</b>  |                          |  |  |  |     |   |    |
| 28  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Pasteurized eggs used where required                                    |                          |  |  |  |     |   |    |
| 29  | <input type="checkbox"/> |  |  |  |     |   | 2  |
| Water and ice from approved source                                      |                          |  |  |  |     |   |    |
| 30  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Variance obtained for specialized processing methods                    |                          |  |  |  |     |   |    |
| <b>Food Temperature Control</b>   |                          |  |  |  |     |   |    |
| 31  | <input type="checkbox"/> |  |  |  |     |   | 2  |
| Proper cooling methods used; adequate equipment for temperature control |                          |  |  |  |     |   |    |
| 32  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Plant food properly cooked for hot holding                              |                          |  |  |  |     |   |    |
| 33  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Approved thawing methods used   |                          |  |  |  |     |   |    |
| 34  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Thermometers provided and accurate                                      |                          |  |  |  |     |   |    |
| <b>Food Identification</b>  |                          |  |  |  |     |   |    |
| 35  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Food properly labeled; original container; required records available   |                          |  |  |  |     |   |    |
| <b>Prevention of Food Contamination</b>                                 |                          |  |  |  |     |   |    |
| 36  | <input type="checkbox"/> |  |  |  |     |   | 2  |
| Insects, rodents, and animals not present                               |                          |  |  |  |     |   |    |
| 37  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Contamination prevented during food preparation, storage & display      |                          |  |  |  |     |   |    |
| 38  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Personal cleanliness  |                          |  |  |  |     |   |    |
| 39  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Wiping cloths: properly used and stored                                 |                          |  |  |  |     |   |    |
| 40  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Washing fruits and vegetables   |                          |  |  |  |     |   |    |
| <b>Proper Use of Utensils</b>   |                          |  |  |  |     |   |    |
| 41  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| In-use utensils; properly stored  |                          |  |  |  |     |   |    |
| 42  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Utensils, equipment and linens; properly stored, dried, handled         |                          |  |  |  |     |   |    |
| 43  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Single-use/single-service articles; properly stored, used               |                          |  |  |  |     |   |    |
| 44  | <input type="checkbox"/> |  |  |  |     |   | 1  |
| Gloves used properly  |                          |  |  |  |     |   |    |

  

| Compliance Status   |                                     |  |  |  | COS | R | WT |
|---|-------------------------------------|--|--|--|-----|---|----|
| OUT   |                                     |  |  |  |     |   |    |
| <b>Utensils and Equipment</b>   |                                     |  |  |  |     |   |    |
| 45  | <input type="checkbox"/>            |  |  |  |     |   | 1  |
| Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used |                                     |  |  |  |     |   |    |
| 46  | <input type="checkbox"/>            |  |  |  |     |   | 1  |
| Warewashing facilities, installed, maintained, used, test strips                      |                                     |  |  |  |     |   |    |
| 47  | <input type="checkbox"/>            |  |  |  |     |   | 1  |
| Nonfood-contact surfaces clean  |                                     |  |  |  |     |   |    |
| <b>Physical Facilities</b>  |                                     |  |  |  |     |   |    |
| 48  | <input type="checkbox"/>            |  |  |  |     |   | 2  |
| Hot and cold water available; adequate pressure                                       |                                     |  |  |  |     |   |    |
| 49  | <input type="checkbox"/>            |  |  |  |     |   | 2  |
| Plumbing installed; proper backflow devices   |                                     |  |  |  |     |   |    |
| 50  | <input type="checkbox"/>            |  |  |  |     |   | 2  |
| Sewage and waste water properly disposed  |                                     |  |  |  |     |   |    |
| 51  | <input type="checkbox"/>            |  |  |  |     |   | 1  |
| Toilet facilities: properly constructed, supplied, cleaned                            |                                     |  |  |  |     |   |    |
| 52  | <input type="checkbox"/>            |  |  |  |     |   | 1  |
| Garbage/refuse properly disposed; facilities maintained                               |                                     |  |  |  |     |   |    |
| 53  | <input checked="" type="checkbox"/> |  |  |  |     |   | 1  |
| Physical facilities installed, maintained, and clean                                  |                                     |  |  |  |     |   |    |
| 54  | <input type="checkbox"/>            |  |  |  |     |   | 1  |
| Adequate ventilation and lighting; designated areas used                              |                                     |  |  |  |     |   |    |
| <b>Administrative Items</b>   |                                     |  |  |  |     |   |    |
| 55  | <input type="checkbox"/>            |  |  |  |     |   | 0  |
| Current permit posted   |                                     |  |  |  |     |   |    |
| 56  | <input type="checkbox"/>            |  |  |  |     |   | 0  |
| Most recent inspection posted   |                                     |  |  |  |     |   |    |
| <b>Compliance Status</b>  |                                     |  |  |  |     |   |    |
| <b>Non-Smokers Protection Act</b>   |                                     |  |  |  |     |   |    |
| 57  | <input checked="" type="checkbox"/> |  |  |  |     |   | 0  |
| Compliance with TN Non-Smoker Protection Act  |                                     |  |  |  |     |   |    |
| 58  | <input type="checkbox"/>            |  |  |  |     |   | 0  |
| Tobacco products offered for sale   |                                     |  |  |  |     |   |    |
| 59  | <input type="checkbox"/>            |  |  |  |     |   | 0  |
| If tobacco products are sold, NSPA survey completed                                   |                                     |  |  |  |     |   |    |

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 health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment 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 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

Signature of Person In Charge [Signature] Date 05/27/2022 Signature of Environmental Health Specialist [Signature] Date 05/27/2022

\*\*\*\* 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**

Establishment Name: Tasty and Delicious MT#676  
 Establishment Number #: 605305132

**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 | Cl2            |     |                           |

**Equipment Temperature**

| Description          | Temperature ( Fahrenheit) |
|----------------------|---------------------------|
| Open top prep cooler | 40                        |
| Chest freezer        | 30                        |

**Food Temperature**

| Description                          | State of Food | Temperature ( Fahrenheit) |
|--------------------------------------|---------------|---------------------------|
| Feta cheese in open top prep cooler  | Cold Holding  | 43                        |
| Reaw chicken in open top prep cooler | Cold Holding  | 36                        |
| Gyro meat in open top prep cooler    | Cold Holding  | 42                        |
| Raw burger in chest freezer          | Cold Holding  | 36                        |
| Salad prepped on counter             | Cold Holding  | 42                        |
| Rice in hot box                      | Hot Holding   | 168                       |
| Burger cooked on grill               | Cooking       | 202                       |

**Observed Violations**

Total # 1

Repeated # 0

53: Excessive grease and food debris buildup under cooking equipment.



**Establishment Information**

Establishment Name: Tasty and Delicious MT#676

Establishment Number : 605305132

**Comments/Other Observations**

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: (IN): An employee health policy is available.
- 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:
- 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: Restaurant depot, sams
- 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:
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (IN) All raw animal foods cooked to proper temperatures.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.
- 19:
- 20:
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 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.

***Establishment Information***

Establishment Name: Tasty and Delicious MT#676

Establishment Number : 605305132

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

***Additional Comments (cont'd)***

***See last page for additional comments.***

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**Sources**

Source Type: Source:

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**Additional Comments**