

City

Inspection Date

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit **DELICIAS COLOMBIANA RR MT #540** O Permanent MMobile Establishment Name Type of Establishment 2195 Nolensville Pk O Temporary O Seasonal Address Nashville Time in 08:45 AM AM / PM Time out 09:00; AM 04/19/2024 Establishment # 605262400 Embargoed 0

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

Number of Seats 0 Risk Category О3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

s (IH, OUT, HA, HO) for a

12	IN-in compliance OUT-not in compliance NA-not applicable NO-not obs							0	05=	con	recte	d on-si	te dur	'n
					Compliance Status	cos	R	WT] [_
	IN	OUT	NA	NO	Supervision				П		IN	оит	NA	I
1	×	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	1 ŀ	16	0	0	0	ł
	IN	OUT	NA	NO	Employee Health	-				17		0	0	t
2	300	0			Management and food employee awareness; reporting	0	0		11					Ì
3	×	0			Proper use of restriction and exclusion	0	0	5	П		IN	OUT	NA	ı
	IN	OUT	NA	NO	Good Hygienic Practices				1 [18	_	0	0	Ī
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	1 [19	0	0	0	Ī
5	*	0		0	No discharge from eyes, nose, and mouth	0	0		П	20	245	0	0	Ī
	IN	OUT	NA	NO	Proventing Contamination by Hands				1 [21	*	0	0	I
6	黨	0		0	Hands clean and properly washed	0	0		Ιſ	22	0	0	×	I
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	H		IN	OUT	NA.	ł
8	X	0			Handwashing sinks properly supplied and accessible	0	0	2	1 [23	0	0	×	ĺ
	IN	OUT	NA	NO	Approved Source				1 L	23	~			1
9	黨	0			Food obtained from approved source	0	0		П		IN	OUT	NA	l
10	0	0	0	×	Food received at proper temperature	0	0	_	Ιſ	24	0	0	M	Ī
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	ΙĽ		•	_	(80)	l
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0				IN	OUT	NA	I
	IN	OUT	NA	NO	Protection from Contamination					25	0	0	3%	Ī
13	×	0	0		Food separated and protected	0	0	4] [26	菜	0		Ì
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5] [IN	OUT	NA	ĺ
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2		27	0	0	×	ĺ

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	0	文	Proper hot holding temperatures	0	0	
20	243	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	*
22	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	335		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	80	0			Toxic substances properly identified, stored, used	0	0	9
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

troduction of pathoge ons, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	١.
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	Ľ
	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	1
34	X	Thermometers provided and accurate	0	0	г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	,
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	:
37	328	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	
40	0	Washing fruits and vegetables	0	0	ļ
	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	
43	0	Single-use/single-service articles; properly stored, used	0	0	Г
44	0	Gloves used properly	0	0	

pecti		R-repeat (violation of the same code provision Compliance Status	cos	R	W
	OUT	Utensils and Equipment	1000		
45	Ħ	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	٦
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	
47	0	Nonfood-contact surfaces clean	0	0	-
	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	
53	0	Physical facilities installed, maintained, and clean	0	0	
54	0	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items	Т		
55	0	Current permit posted	ि	0	П
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	٧
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	0	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	0	

cuous manner. You have the right to request a h en (10) days of the date of th

04/19/2024

Date Signature of Environmental Health Specialist

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04/19/2024

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										
Establishment Name: DELICIAS COLOMBIANA RR MT #540										
Establishment Number #: [605262400										
NSPA Survey - To be completed if				_						
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 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 infiltrating in	nto areas where smoking is p	rohibited.								
Smoking observed where smoking is prohibited	by the Act.									
				_						
Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fai	renhelt)						
Equipment Temperature										
Description			Temperature (Fah	renhelt)						
FIT										
Food Temperature		State of Food	Townson-town (Fab							
Description		State of Food	Temperature (Fah	renneit)						
I										

Observed Violations								
Total # B								
Repeated # 0								
34: Missing thermometer in reach in cooler								
37: Employee personal drink stored in reach in cooler next to TCS foods								
45: Ice buildup in reach in freezer								

[&]quot;"See page at the end of this document for any violations that could not be displayed in this space.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Information



Establishment Name: DELICIAS COLOMBIANA RR MT #540	
Establishment Number: 605262400	
Comments/Other Observations	
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Additional Comments	

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

Establishment Name: DELICIAS COLOMBIANA RR MT #540				
Establishment Number : 6	05262400			
Comments/Other Obse	nustions (cont'd)			
Comments/Other Obse	rvations (cont u)			
dditional Comments (cont'd)			
see last page for (additional commer	its.		

Establishment Information

Establishment Number #: 605262400	ANA RR MT #540	
Sources		7
Source Type:	Source:	-
Source Type:	Source:	
Additional Comments		
Mobile unit has working hot/cold water	and is approved to reopen for food service	

Establishment Information