## **TENNESSEE DEPARTMENT OF HEALTH** FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

FOOD SERVICE EST				RVICE ESTA	ABLISHMENT INSPECTION REPORT						SCO	CORE								
N.		4			El Fogon			Type of Establishment     O Fermer's Merket Food Unit     St Permanent O Mobile							ſ	١				
Estab	lish	men	t Nan	ne				Type of Establishment Semanent O Mobile								<b>J</b> '		J		
Addre	65				8023 Hixso	on Pike		O Temporary O Seasonal												
City					Hixson		Time in	01:00 PM AM / PM Time out 01:40; PM AM / PM												
Inspe	pection Date <u>11/14/2023</u> Establishment # 6052562					ent # 60525620	3			Embe	irgoe	d 0	)							
Purpo	se	of In	spect		Routine	O Follow-up	O Complaint			- O Pro					<b>)</b> Cor	nsuitation/Other				
Risk (	Cate	acr			<b>O</b> 1	\$22	03			<b>O</b> 4				Fo	ollow-	up Required O Yes 🕱 No	Number of S	ieats	90	
			isk F	act	ors are food pr	eparation practi	ces and employee	beha	vior	s mo	st c	omn	nonly	y rep	ortec	to the Centers for Disease Cont	rol and Prevent	tion	_	
				<b>as</b> c	ontributing fa		ORNE ILLNESS RI									control measures to prevent illne	ass or injury.			
		(144	rk der	algaa	ted compliance sta											ach item as applicable. Deduct points for	category or subcate	gory.)		
IN-i	n co	mpii	ance			ance NA=not applic mpliance Status	able NO=not observe		R		\$=co	rrecte	d on-s	site dur	ing ins	spection R=repeat (violation of th Compliance Status		on) COS	R	WT
1	N	OUT	NA	NO		Supervision		000	-			IN	олт	NA	NO	Cooking and Reheating of Time/		000	~ 1	
1 8	8	0	_			present, demonstra	tes knowledge, and	0	0	5	10					Control For Safety (TCS)	Foods	_	~	
	NK	DUT	NA	NO	performs duties	Employee Hea	th					0			薆	Proper cocking time and temperatures Proper reheating procedures for hot hok	ding	0	8	5
2		_				d food employee awa		0		5		IN	оυт	NA	NO	Cooling and Holding, Date Marking				
	~	0	NA	10		striction and exclusio ood Hyglonic Prac		0	0	-	12	0	0	0	194	Public Health Centr Proper cooling time and temperature	6	0		_
4 8	R.	0	ne			sting, drinking, or tot		0	0	5	19	家	0	0		Proper hot holding temperatures		0	0	
5 8			NA	-		m eyes, nose, and m ting Contamination		0	0	<u> </u>	20	25	8		~	Proper cold holding temperatures Proper date marking and disposition		8	8	5
6 )		0	-			properly washed	on by names	0	0		22		6	×		Time as a public health control: procedu	res and records	0	ŏ	
7 8	ĸ	0	0	0	No bare hand co alternate proced		at foods or approved	0	0	5	-		OUT		NO			Ŭ	-	_
8 8	K	0	NA	105		iks properly supplied		0	0	2	23	_	0	0		Consumer advisory provided for raw and		0	0	4
	R		NA	NO	Food obtained fro	Approved Source orm approved source		0	0			IN	OUT	NA	NO	food Highly Susceptible Popula	rtions		_	_
10 (	2	8	0	×		proper temperature indition, safe, and una		8	8	5	24	0	0	83		Pasteurized foods used; prohibited foods	s not offered	0	0	5
11 ¥	_	0	×	0	Required records	s available: shell stor		6	ŏ	Ĩ	H	IN	OUT	NA	NO	Chemicals				
	NK	DUT	NA	-	destruction Prot	ection from Conta	mination	-		_	25	0		25		Food additives: approved and properly u	Jsed	0	তা	
13 8	3	0	0		Food separated		a laborat		0			黛	0		·	Toxic substances properly identified, sto	ored, used	0		•
14 8	-	_	0			faces: cleaned and s n of unsafe food, ret		0	0	5		IN	OUT	_	NO	Conformance with Approved F Compliance with variance, specialized p		-	_	
15 8	8	0			served			0	0	2	27	0	0	黨		HACCP plan		0	0	5
				Goo	d Retail Pract	ices are prevent	ive measures to co	ontro	l the	intre	oduc	tion	of p	atho	geni	s, chemicals, and physical object	s into foods.			
								GOO	DR	ar/Al	LPR	ACT	ICE	8						
				00	Tenot in compliance	npliance Status	COS=corre	icted o		during						R-repeat (violation of the san Compliance Status		COS	ы	WT
	_	OUT			Safe	Food and Water		0.00	- 1			0	UT			Utensils and Equipment		008	~ 1	
28 29					d eggs used whe lice from approve			8	0	1	4	5				infood-contact surfaces cleanable, proper and used	fly designed,	0	0	1
30		Õ			obtained for specia	alized processing me		ŏ	ŏ	1	4	6 1	- 1			g facilities, installed, maintained, used, te	est strips	0	0	1
	4	DUT	Prop	er co		emperature Conti d; adequate equipm					4		_			ntact surfaces clean		0	0	1
31		٥	contr	ol	-			0	0	2		0	UT			Physical Facilities				
32					properly cooked thawing methods			8	8		4					I water available; adequate pressure stalled; proper backflow devices		8	응	2
34		0	Then		eters provided and	d accurate		ŏ	ŏ	1	5	0	<b>o</b> [8	Sewag	e and	i waste water properly disposed		0	0	2
	-	DUT				d identification					-	_				es: properly constructed, supplied, cleane		0	0	1
35	_	_	Food	prop		nal container; require		0	0	1	5		_		·	use properly disposed; facilities maintaine	bd	0	0	1
36	-		Incor	Ac. e.		of Food Contami	nation	0	0	2	5		-			ilities installed, maintained, and clean entilation and lighting; designated areas u	e a d	0	0	1
	+	-		-	dents, and anima			-	$\mapsto$	-	F	-	-	voeque	sie ve		seq	0	9	'
37		_				uring food preparatio	n, storage & display	0	0	1			UT			Administrative items			6.1	
38	_	-	_		leanliness ths: properly used	d and stored		0	0	1		_				nit posted inspection posted		0	읭	0
40		0			ruits and vegetabl	les		ŏ			Ľ		- 14			Compliance Status		YES		WT
41	_	OUT	In-us	e ute	Prop nsils; properly sto	er Use of Utensils red		0	0	1	5	7	-	Sompli	ance	Non-Smokers Protection with TN Non-Smoker Protection Act	Act	×	01	_
42		0	Utens	sils, e	quipment and line	ens; properly stored,		0	0	1	5	8	T	obacc	o pro	ducts offered for sale		0	0	0
43 44					single-service ar ed properly	ticles; properly store	u, used		8		<u> </u>	Ø	1	10080	co pr	roducts are sold, NSPA survey completed		0	5	
																Repeated violation of an identical risk factor				
	r an	d po	st the	most	recent inspection re	port in a conspicuous	manner. You have the rig	the to r	eques							e. You are required to post the food service ( filing a written request with the Commissioner				
report	. T.C	:A.1	rection	ns 68-	14-703, 68-14-706, 6	8-14-708, 68-14-709, 68-	14-711, 68-14-715, 68-14-7	16, 4-5	-320.			-	1	~		RA .				
	-		(	) `	101	$\bigcirc$	11/1	4/2	023	3			<b>`</b> /	r!l	ン	T	1	1/1	4/2	023
Signa	itun	e of	Pers	on In	Charge				[	Date	Sic	natu	ire of	Envir	onme	ental Health Specialist				Date

_				
100		-	In Charge	1
- 500	ACCESSION AND AND	Verson	In Charles	•

Data	Signature		Enude
Crate	Signature	01	Envir

•	`	'	-		
	[	5	8	b	e

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

Free food safety training classes are available each month at the county health department. Please call ( ) 4232098110 to sign-up for a class. PH-2267 (Rev. 6-15)

RDA 629

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



### Establishment Information

Establishment Name: El Fogon Establishment Number #: 605256203

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)						
Dish machine	Chlorine	100							
Sani bucket	Chlorine	100							

Equipment Temperature							
Decoription	Temperature (Fahrenheit)						
Hot box	167						
Walkin	40						

Food Temperature		
Decoription	State of Food	Temperature (Fahrenheit)
Rawchx	Cold Holding	39
Raw shrimp	Cold Holding	38
Cuttoms	Cold Holding	40
Pico	Cold Holding	40
Beef	Hot Holding	176
Rice	Hot Holding	175
Beans	Hot Holding	162
Queso	Hot Holding	148
Raw chx	Cold Holding	38
Beans hot box	Hot Holding	167



### Establishment Information

Establishment Name: El Fogon

Establishment Number : 605256203

#### Comments/Other Observations

1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection. 2:

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: Observed hand washing

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: Approved

- 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: No cooking observed while on site
- 17: (NO) No TCS foods reheated during inspection.
- 18: No cooling observed
- 19: Adequate hot holding observed
- 20: Adequate cold holding observed
- 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: On menu with reminder statement
- 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.

# Establishment Information

Establishment Name: El Fogon

Establishment Number: 605256203

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

# Establishment Information Establishment Name: El Fogon Establishment Number #: 605256203

Sources				
Source Type:	Water	Source:	Hu	
Source Type:	Food	Source:	Us foods, talteca	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

# Additional Comments