# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

																		ſ		
Fannel's			Soull	Food Experier	nce MT#11	L04				-				O Fermer's Market Food Unit	L					
Address		975 Main St						Type of Establishment     O Temporary     O Seasonal												
			Nashville			Time in	01	L:0	0 F	PM	A	M/P	а та	me o	ut 01:40; PM AM / PM					
,		- 0			04/04/2	024	Establishment #						_	d <u>0</u>						
Inspec					KRoutine 172		O Follow-up	O Complaint	<u> </u>		- O Pr					0.000	nsultation/Other		_	
				nout				_				earnar	iary					e	0	
Risk (	ate			Fact	O1 ors are food		ation practices a	O3 nd employee	beha	vior	04 3 mo	at c	omn	only			up Required I Yes O No Number of to the Centers for Disease Control and Preve		0	
																	control measures to prevent illness or injury.			
			uric de	nigne	ted compliance s	itatus (I											INTERVENTIONS each item as applicable. Deduct points for category or subc	tegory	a	
IN=ir	1 00		iance		OUT=not in com	pliance	NA=not applicable	NO=not observe	d		cc						spection R=repeat (violation of the same code prov	sion)		
	4 4	OUT	NA	NO	C.	omplia	Supervision		cos	R	WT						Compliance Status Cooking and Reheating of Time/Temperature	cos	R	WT
1 8	-	0	-	110	Person in char	ge pres	ent, demonstrates kno	wiedge, and	0	0	5		IN	OUT			Control For Safety (TCS) Foods			
	_		NA	NO	performs duties		mployee Health	-	-	0	-	16	0	00	00		Proper cooking time and temperatures Proper reheating procedures for hot holding	8	0	5
_	-	0				ind food	employee awareness	c reporting		0	5		IN	олт			Cooling and Holding, Date Marking, and Time as	_		
3 8	-	0	NA	NO			on and exclusion Hygienic Practices		0	0		18		0	0		a Public Health Control Proper cooling time and temperature		0	
48	8	0	1	0	Proper eating.	tasting.	drinking, or tobacco u	150	0	0	5	19	X	0	0	_	Proper hot holding temperatures	0	0	
		0	NA				es, nose, and mouth Contamination by	Hands	0	0	Ľ	20	12	00	00	0	Proper cold holding temperatures Proper date marking and disposition	8	8	5
6 (	2	黨			Hands clean ar	nd prop	erly washed		0	-	5	22		0	×		Time as a public health control: procedures and records	ō	o	
78	_	0	0	0	alternate proce	dures f			0	0			IN	OUT	NA	NO	Consumer Advisory			
10	4 4	Ж DUT	NA	NO		Â	operly supplied and ac proved Source	coessible	0	0	2	23	0	0	X		Consumer advisory provided for raw and undercooked food	0	0	4
9 X 10 C		00	0	152	Food obtained Food received				0	0			IN	OUT	NA	NO	Highly Susceptible Populations			
11 8		ŏ	Ĕ		Food in good c	ondition	n, safe, and unadultera		ŏ	0	5	24	0	0	×		Pasteurized foods used; prohibited foods not offered	0	0	5
12 C		0	22	0	destruction		lable: shell stock tags,		0	0			IN	OUT		NO				
13 (	_	DUT L	_	NO	Food separate		n from Contaminat rotected	ion	0	0	4	25	0 度	00	X	J	Food additives: approved and properly used Toxic substances properly identified, stored, used	8	0	5
			Ó	1	Food-contact s	urfaces	cleaned and sanitize	-	Ō	Ō	5		IN	OUT	NA	NO	Conformance with Approved Procedures			
15 🕅	8	o			Proper disposit served	tion of u	insafe food, returned f	ood not re-	0	0	2	27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5
				God	d Retail Prac	tices	are preventive m	essures to co	ntro	l the	intr	oduc	tion	of n	atho		, chemicals, and physical objects into foods.			
											ET/A						,			
				00	T=not in complian		nce Status	COS=corre		n-site	during						R-repeat (violation of the same code provision) Compliance Status			WT
		OUT			54	fe Fee	d and Water						0	UT			Utensils and Equipment			
28					d eggs used where required ice from approved source			8	0	1	4	5				profood-contact surfaces cleanable, properly designed, and used	0	0	1	
30	_	0		ance	btained for specialized processing methods Food Temperature Control			0	0	1	4	6	<b>o</b> 14	Varew	ashin	g facilities, installed, maintained, used, test strips	0	0	1	
31	Ť	0	Prop				equate equipment for	temperature	0	0	2	4	_	-	onfoo	d-cor	ntact surfaces clean	0	0	1
32	+	-	cont Plar		property cooke	d for ho	thoiding		-	0		4		UT O H	otan	1 cold	Physical Facilities I water available; adequate pressure	0	0	2
33		0	Арр	roved	thawing method	ds used			0	0	1	4					stalled; proper backflow devices	0	0	2
34	_	OUT		mom	eters provided a		entification		0	0	1	5					i waste water properly disposed es: properly constructed, supplied, cleaned		0	2
35		o	Foo	d prop	erly labeled; ori	ginal co	ntainer; required reco	rds available	0	0	1	5	2	<b>0</b> G	arbaç	e/refi	use properly disposed; facilities maintained	0	0	1
	4	OUT	_				ood Contamination	1				5		-			lities installed, maintained, and clean	0	0	1
36	4	0	Inse	cts, ro	dents, and anin	nals not	present		0	0	2	5	4	0 A	dequa	ite ve	entilation and lighting; designated areas used	0	0	1
37		0	Con	tamin	ation prevented	during f	food preparation, stora	ige & display	0	0	1		0	UT			Administrative items			
38	+	-			cleanliness ths; properly us	ed and	stored		0	0	1						nit posted inspection posted		0	0
40		0	Was		ruits and vegeta	ables				ŏ		É					Compliance Status			WT
41	_	001		se ute	Pro nsils; properly s		e of Utensils		0	0		5	7	- 0	ompli	ance	Non-Smokers Protection Act with TN Non-Smoker Protection Act	X	0	
42 43							roperly stored, dried, h ; properly stored, used		0	0		5	8				oducts offered for sale roducts are sold. NSPA survey completed	0	0	0
44					ed properly	arocrea	, property stored, used			ŏ		Ľ			10000	co pr	oddedrare sold, Hor Kathley completed			
																	Repeated violation of an identical risk factor may result in rev e. You are required to post the food service establishment per			
manne	r an	ed po	ost the	most	recent inspection	report is	n a conspicuous manner	You have the rid	ht to n	eques							filing a written request with the Commissioner within ten (10) da			
-	Į	2		C	en	_	18, 68-14-709, 68-14-711,	04/0	1/12	02	4		$\leftarrow$	1	-+	1	$\mathbf{P}$	04/0	יאר	2024
					Charge			04/0	141Z	-	4 Date	84	) anati	54		15	ental Health Specialist	04/(	J4/2	Date
orgina	e sali i	- 01	- cil	~~1 II		····· A.	ditional food cafety	information can	be fo								ealth/article/eh-foodservice ****			2000
PH 22	17.4	Per	6.45	a.			, ,									-	unty health department.			04.000
L 20	PH-2267 (Rev. 6-15) Please call ( ) 6153405620 to sign-up for a class. RDA 629																			

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



#### Establishment Information

Establishment Name: Fannel's SoulFood Experience MT#1104 Establishment Number #: 605320864

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)						
Manual	Chlorine	100							

Equipment Temperature						
Description	Temperature (Fahrenheit)					
Upright refrigerator	34					
Reach in cooler ( no tcs foods)	36					

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Pork shoulder on steam table	Hot Holding	176
Pork shoulder on steamtable	Hot Holding	180
Mac and cheese on steam table	Hot Holding	158
Green beans on steam table	Hot Holding	181
Raw chicken in upright refrigerator	Cold Holding	35
Salad mix in upright refrigerator	Cold Holding	34
Cook shoulder in warmer	Hot Holding	147
Cook chicken legs in warmer	Hot Holding	161
Potatoes salad on prep cooler	Cold Holding	34
Cole slaw on prep cooler	Cold Holding	37

Observed Vi	olations
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Total # 3

Repeated # 0

6: No hot wate at mobile unit to wash hands properly (CA) repair immediately 8: No hot water on the mobile unit for hand sink nir three compartment sink. ( CA) they are using grill to heat up water. The hot water mist be provided asap 13: Raw chicken in upright refrigerator above cook shulders (CA) pic removed cook shulder to another refrigerator

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#### Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

- 2: Have a health policy
- 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.

7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.

9: See food 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.
- 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 raw animal food is being cook on mobile unit st this time
- 17: (NO) No TCS foods reheated during inspection.
- 18: Cooling isdone in refrigerator. Mobile unit is plug in at home to get refrigerator temperature in compliance
- 19: See food temperature chart
- 20: See food temperature chart
- 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.

# Establishment Information

Establishment Name: Fannel's SoulFood Experience MT#1104 Establishment Number : 605320864

Comments/Other Observations (cont'd)

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

### Establishment Information

Establishment Name: Fannel's SoulFood Experience MT#1104

Establishment Number # 605320864

Sources			
Source Type:	Water	Source:	City
Source Type:	Food	Source:	Rest Depot, GFS, Kroger
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

# Additional Comments