TENNESSEE DEPARTMENT OF HEALTH

No.			D			FOOD SER	VICE ESTA	BL	ISH	M	ENT	r II	151	PEC	тю	ON REPORT	sco	RE		
Esta	Sist	men	t Nan		Sonic Drive	e-In										Farmer's Market Food Unit Ø Permanent O Mobile	9	F		
Add					713 S Mt. J	Juliet Rd					_	Тур	xe of i	Establi	shme	O Temporary O Seasonal		L		
	035				Mount Julie	<u>ب</u> t		10	ר∙ר	2 1										
City									J.Z			-			me ou	ut 11:15:AIVI AM/PM				
Insp	ectio	n Da	rte		11/12/20	21 Establishment	60525736	3		-	Emba	irgoe	d O)		L				
Purp	ose	of In	spect	ion	Routine	O Follow-up	O Complaint			O Pr	elimin	ary		C	Cor	nsuitation/Other				
Risk	Cat	egon			O 1	3 22	O 3			O 4						up Required 🛛 Yes 🕱 No	Number of S	eats	12	
		R	isk F	acto as c	ors are food pr ontributing fac	eparation practice stors in foodborne	s and employee illness outbreak	beha s. P	vior. ublic	s mo : He	alth	omn Inte	nonh rven	repo tions	are	to the Centers for Disease Contro control measures to prevent illnes	and Preven	tion		
																INTERVENTIONS	a or aquiry.			
		(M	rk de	lgnat	ed compliance sta											ach liem as applicable. Deduct points for ce	tegory or subcate	gory.)		
IN	in co	ompili	ance			ance NA=not applicabl npliance Status	e NO=not observe		R		>S=cor	recte	d on-s	ite duri	ng ins	pection Rerepeat (violation of the Compliance Status			R	WT
Т	IN	OUT	NA	NO		Supervision						IN	олт	NA	NO	Cooking and Reheating of Time/T				
1	8	0				present, demonstrates	s knowledge, and	0	0	5	40					Control For Safety (TCS) F	ods	~	~	
	IN	OUT	NA	NO	performs duties	Employee Health	I					<u>凛</u> 0	0	0		Proper cooking time and temperatures Proper reheating procedures for hot holding	g	0	8	5
	X					food employee aware	ness; reporting		9	5		IN	оит	NA	NO	Cooling and Holding, Date Marking,				
		0	NA		,	triction and exclusion ood Hygionic Practs		0	0	_	12	0	0	0	14	a Public Health Contro Proper cooling time and temperature		0		
4	1	0	nin	_		sting, drinking, or tobac		0	0	5	19	X	0	0		Proper hot holding temperatures		0	0	
		0	NA	-		m eyes, nose, and mou ting Contamination		0	0	<u> </u>		20	8			Proper cold holding temperatures Proper date marking and disposition		8	8	5
	X	0	nun.		Hands clean and		by riands	0	0			0	0	8		Time as a public health control: procedure	e and monorde	0	0	
_	X	0	0	0	No bare hand cor alternate procedu	ntact with ready-to-eat t	foods or approved	0	0	5	"	IN	OUT		-	Consumer Advisory	s and records	~	<u> </u>	
8	X	0				iks properly supplied an	nd accessible	0	0	2	23	_	0	22	no	Consumer advisory provided for raw and	undercooked	0	0	4
	IN 嵐		NA	_	Food obtained fro	Approved Source om approved source		0	0	_	-	IN	OUT		NO	food Highly Susceptible Populat	lona	-	-	-
10	0	0	0	>	Food received at	proper temperature		0	0		24	-	0	88		Pasteurized foods used; prohibited foods		0	0	5
11	_			_		dition, safe, and unadu available: shell stock t		0	0	5	-			_			IN UNCLOS	~	-	-
		0	XX NA	<u> </u>	destruction	ection from Contam		0	0		25	IN O	OUT	NA		Chemicals		~	তা	
13				no	Food separated a		ination	0	0	4	25	×	ŏ	-		Food additives: approved and properly us Toxic substances properly identified, store		0		5
			0			faces: cleaned and san		0	0	5		IN	OUT	NA	NO	Conformance with Approved Pr			_	
15	2	0			Proper disposition served	n of unsafe food, return	ed food not re-	0	0	2	27	0	0	邕		Compliance with variance, specialized pro HACCP plan	cess, and	0	٥	5
				Goo	d Retail Practi	ices are preventive	measures to co	ntro	l the	intr	oduc	tion	ofp	atho	gens	, chemicals, and physical objects	into foods.			
													_							
				00	Prot in compliance		COS=corre	cted o	n-site	during						R-repeat (violation of the same	code provision)		- 1	
		OUT				Food and Water		cos	R	WT	H	0	UT			Compliance Status Utensils and Equipment		cos	R	WT
2					d eggs used when ice from approve				2		4	5 (nfood-contact surfaces cleanable, properly	designed,	0	0	1
3	>	0	Varia		btained for specia	alized processing method		ő	0	2	4		-			and used g facilities, installed, maintained, used, tes	etrice	0	0	1
		OUT	_			emperature Control				_	4		-			tact surfaces clean	suipe	0	0	1
3	ו י	0	contr		aing methods use	d; adequate equipment	t for temperature	0	이	2	F	_	UT	*011100	0-001	Physical Facilities			-	<u> </u>
3	_				properly cooked f				0	1	4	_				water available; adequate pressure		0		2
3	_				thawing methods eters provided and			0	0	1	4	_				stalled; proper backflow devices waste water properly disposed		0	0	2
_		OUT				d identification		-		_	5	_	-			s: properly constructed, supplied, cleaned			ŏ	1
3	5	0	Food	prop	erly labeled; origin	al container; required r	records available	0	0	1	5	2 (o o	Sarbag	e/refi	use properly disposed; facilities maintained		0	0	1
	_	OUT				of Food Contamina	tion				5	-+-				lities installed, maintained, and clean		0	0	1
3	3	٥	Insec	ts, ro	dents, and animal	is not present		0	0	2	5	4	0 /	\dequa	ite ve	ntilation and lighting; designated areas use	d	0	0	1
3	'	X	Cont	amina	ition prevented du	ring food preparation,	storage & display	0	0	1		0	UT			Administrative items				
3	_	-			leanliness ths; properly used	and stored		0	0	1	5					nit posted inspection posted		0	읭	0
4	_				uits and vegetabl				6		F	× 1 '	<u> </u>	1006.08	- ent	Compliance Status		YES		WT
4	_	OUT		a udar	Prope nsils; properly stor	or Use of Utensils					5	,		Samel	10.00	Non-Smokers Protection A with TN Non-Smoker Protection Act	rt	~	0	
4	2	20	Utens	sils, e	quipment and line	ins; properly stored, dri		0	0	1	5	8	T	obacc	o pro	ducts offered for sale		8	ŏ	0
4					/single-service art ed properly	ticles; properly stored,	used		8		5	9]	H	tobac	co pr	oducts are sold, NSPA survey completed		0	0	
_		-								<u> </u>										

folation of an identical risk factor may result in revocation of your foor required to post the food service establishment permit in a conspicuou ithin ten (10) d n of your fo od service all be corre ng i ards si ly or port in a conspicuous manner. You have the right to request a hearing reg >14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320. mmissioner within ten (10) days of the date of thi d post the m st recent insp on report in a const the Cr C A

Æ ia ., /

11/12/2021

NAN U vironmental Health Specialist

Signature of Person In Charge

11/12/2021

Date	Signature o	r Env

Date

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

H-2267 (Rev. 6-15)	Free food safety training clas	RDA 629		
192207 (Nev. 0-10)	Please call () 6154445325	to sign-up for a class.	ND4 023

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Sonic Drive-In Establishment Number #: [605257363]

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 (Fahrenhelt)						
3 comp sink	QA	200							

Equipment Temperature			
Description	Temperature (Fahrenheit)		
Ric	36		
Ric	35		
Rif	1		
Wic	34		

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Sausage and eggs	Hot Holding	159
Chili	Hot Holding	157
Sausage	Hot Holding	169
Burger	Hot Holding	148
Sliced tomatoes	Cold Holding	41
Chiken filet	Cold Holding	40
Ham	Cold Holding	40
Burger	Cooking	173
Popcorn chicken	Cooking	183

Observed Violations

Total # 4

Repeated # ()

- 37: Employee drink stored on prep table and above sandwich cooler
- 42: Pans stacked wet on shelf over 3 comp sink
- 47: Food debris build up in bottom of rif
- 53: Water standing on on floor by drive thru window

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Sonic Drive-In

Establishment Number : 605257363

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: Employee washed hands upon entering kitchen. Employee washed hands after cleaning

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: See source info

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: See food temps

17: (NO) No TCS foods reheated during inspection.

18: (N.O.) No cooling of TCS foods during inspection.

19: See food temps

20: See food temps

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: (NÁ) 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: Sonic Drive-In

Establishment Number: 605257363

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Sonic Drive-In

Establishment Number #: 605257363

Sources			
Source Type:	Food	Source:	Reinhart, Flowers Bakery
Source Type:	Water	Source:	City
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

Additional Comments