## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Sec. 1	in the second	14	AN A													O Fermada Madrat Food		1		
Establishment Name		Mexiville Mexican Restaurant Type of Establishment Type of Establishment O Fermer's Merket Food Unit © Permanent O Mobile										r								
Add	ess				809 Market S	St.										O Temporary O Se				
City					Chattanooga	l	Time in	11	L:4	5 A	١M	_ A	M/P	и ті	me ou	ut <u>12:00</u> : <u>PM</u> A	M / PM			
Insp	ectic	n Da	ste		03/29/202	2 Establishment #	60525086	6			Emba	argoe	d 5							
Purp	ose	of In	spec	tion	ORoutine	篇 Follow-up	O Complaint			O Pr					Cor	nsuitation/Other				
Risk	Cat	egor	y		O 1	3022	03			<b>O</b> 4				Fo	low-	up Required O Yes	氨 No Number of	Seats	99	)
Γ		R	isk													to the Centers for Dise control measures to pro	ase Control and Preve			
						FOODBORN	E ILLNESS RI	SK F	ACT	ORS	AND	PU	BLIC	HEA	LTH	INTERVENTIONS				
IN	in c	(C) ompli		algna		(IN, OUT, NA, NO) for ea	NO=not observe		ltem							spection Rerepent (v	t points for category or subca violation of the same code provi		)	
	_	_	_			liance Status			R	WŤ	Ē	_				Compliance Stat	tus		R	WT
$\vdash$	_		NA	NO	Person in charge pr	Supervision esent, demonstrates kn	owledge, and					IN	ουτ	NA	NO	Cooking and Reheating Control For Safe	g of Time/Temperature ety (TCS) Foods			
	邕 IN	O	NA	NO	performs duties	Employee Health		0	0	5		<u>湯</u> 0	0	0		Proper cooking time and tem Proper reheating procedures		8	00	5
2	X	0	104	110	Management and fo	od employee awarenes	ss; reporting		0	5	۲.	IN	олт		NO	Cooling and Holding, Da		-		
$ \rightarrow $	_	_	N/A	10	Proper use of restric	tion and exclusion d Hyglenic Practices		0	0	Ľ						a Public He				
	1	0	NA			g. drinking, or tobacco		0	0		19	0	0	0		Proper cooling time and temp Proper hot holding temperatu		0	0	
5	2	0	NA	-		yes, nose, and mouth g Contamination by	Handa	0	0	Ľ		12	8	8	0	Proper cold holding temperat Proper date marking and dis		8	8	5
6	<u>×</u>	0			Hands clean and pr	operly washed		0	0	5	22	_	ō	×	ō	Time as a public health contr		0	ō	
	鬣	0	0	0	alternate presedure	ct with ready-to-eat foo s followed		0	0			IN	OUT	NA	NO	Consumer				
8		ᇞ	NA	NO	Handwashing sinks	properly supplied and a Approved Source	eccessible	0	0	2	23	×	0	0		Consumer advisory provided food	for raw and undercooked	0	0	4
9	8	0	~		Food obtained from Food obtained from Food in good condit Required records an destruction	approved source		0	0			IN	OUT		NO	Highly Suscepti	ble Populations			
10	×	ŏ	Ŭ		Food in good condit	ion, safe, and unadulter		ŏ	ŏ	5	24	0	0	X		Pasteurized foods used; prof	hibited foods not offered	0	0	5
12					Required records av destruction	vailable: shell stock tage	s, parasite	0	0			IN	ουτ			Chen	licals			
13	IN S	001	NA	NO	Protect Food separated and	tion from Contamina protected	tion	0	0	4	25	0 夏	8	X	ļ	Food additives: approved an Toxic substances properly id	- property - second	- Se	0	5
13 14 15	x	ŏ	ŏ	1		es: cleaned and sanitiz	bed	ŏ		5		IN	OUT	NA	NO		pproved Procedures			
15	2	0			Proper disposition o served	f unsafe food, returned	food not re-	0	0	2	27	0	0	×		Compliance with variance, sp HACCP plan	pecialized process, and	0	0	5
				Goo	d Retail Practice	a are preventive m	opposite to co	atro	l the	intr	oduc	tion	of	atho		s, chemicals, and physic	al objects into foods.			
╘				_						ETA						i on one of the party of the				
				00	T=not in compliance	iance Status	COS=corre	cted o	n-site	during							on of the same code provision)	Loos		WT
	_	OUT			Safe F	ood and Water				WT		0	UT			Compliance St Utensils and Equi	pment			
2	_				ed eggs used where i lice from approved s			8	0	1	4	5				infood-contact surfaces clean and used	able, properly designed,	0	0	1
3	_	0 OUT		ance		ed processing methods perature Control	;	Ó	0	1	4	6	0 V	Varew	ashin	g facilities, installed, maintain	ed, used, test strips	0	0	1
3		0	_	er co		adequate equipment fo	r temperature	0	0	2	4	_	-	lonfoo	d-cor	ntact surfaces clean		0	0	1
3		-	cont		properly cooked for	hot bolding					4		UT O ⊢	iot and	1 cold	Physical Facilit water available; adequate pr		0	0	2
- 3	3		App	roved	thawing methods use	ed		0	0	1	4	9	ΟP	lumbi	ng ins	stalled; proper backflow device	es	0	0	2
3		O OUT	The	mom	eters provided and a Food	identification		0	0	1	5		-			I waste water properly dispose es: properly constructed, supp		8	00	2
3	5	0	Foo	d prop	erly labeled; original	container; required reco	ords available	0	0	1	5	2	0	Sarbag	e/refi	use properly disposed; facilitie	es maintained	0	0	1
		OUT			Prevention of	Food Contamination	n		_		5	3	o P	hysica	al faci	ilities installed, maintained, an	d clean	0	0	1
3	3	0	Inse	cts, ro	dents, and animals r	ot present		0	0	2	5	4 3	🕱 A	dequa	ste ve	entilation and lighting; designa	ted areas used	0	0	1
3	r	X	Con	tamina	ation prevented durin	g food preparation, stor	rage & display	0	0	1		0	UT			Administrative in	tems			
3		-	-		cleanliness ths: properly used ar	nd stand		0	0	1	5					nit posted inspection posted		0	00	0
4	)	0	Was		ruits and vegetables			ŏ	ŏ		Ľ	* I ·	<u> </u>	1006.10	oen.	Compliance Sta				WT
4	_	OUT	_	se ute	Proper nsils; properly stored	Use of Utensils		0	0	1	5	7	-0	ompli	ance	Non-Smokers P with TN Non-Smoker Protect		X	0	
4		0	Uter	sils, e	quipment and linens	properly stored, dried, es; properly stored, use		0	0	1	5	8				ducts offered for sale roducts are sold, NSPA surver	< completed	0	0	0
4	_				ed properly	es, propeny stored, use	.u	ŏ	ŏ	1	6		1	lobac	co pr	oducts are sold, NoPA surve	y compresed	10		
																Repeated violation of an identic e. You are required to post the f				
		nd po	st the	most	recent inspection report		r. You have the rig	the to r	eque							fling a written request with the C				
-t		Ł	$\mathbf{x}$							<b>`</b>		(	$\square$	<b>~</b> ~	1-	$\gamma \leq (1)$		0.01		
Right	ater	10.04	Dee	ion la	Charac		03/2	29/2	-		C	apat	$\mathcal{V}$	End		ental Health Specialist		03/2	29/2	Date
agr	atul	eof	ren	ion in	Charge	Additional food and the	information and	hef		Date						ental Health Specialist realth/article/eh-foodservic				Date
au c	0.00		a			F									-	anty health department.				
INCOME. NO. OF	1011	cRev.	6-15	)		Please	-			2098						p for a class.			R	DA 629

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



#### Establishment Information

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Establishment Name: Mexiville Mexican Restaurant Establishment Number #: 605250866

	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.	
i		

Smoking observed where smoking is prohibited by the Act.

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							

Equipment Temperature							
Description	Temperature (Fahrenheit)						

escription	State of Food	Temperature ( Fahrenheit

Observed Violations		
Total # 4		
Repeated # ()		
37:		
39:		
59.		
41:		
54:		

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#### Establishment Information

Establishment Name: Mexiville Mexican Restaurant Establishment Number : 605250866

Comments/Other Observations		
:		
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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: Mexiville Mexican Restaurant Establishment Number : 605250866

Comments/Other Observations (cont'd)

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

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Sources		
Source Type:	Source:	

### Additional Comments

\*\*Priority items #21,26 corrected. See original report dated 3/29/22.\*\*