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			O 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}							`		(\square	~ ~	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:		

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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.