



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

76

Establishment Name Nonna Maria Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile

Address 6525 Memphis Arlington Rd ste 105 ☐ Temporary ☐ Seasonal

City Bartlett Time in 12:30 PM AM / PM Time out 01:35 PM AM / PM

Inspection Date 02/03/2023 Establishment # 605307971 Embargoed 000

Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other

Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☒ Yes ☐ No Number of Seats 75

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=In compliance					OUT=not in compliance					NA=not applicable					NO=not observed					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)				
Supervision																				COS	R	WT							
1	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Person in charge present, demonstrates knowledge, and performs duties.															<input type="radio"/>	<input type="radio"/>	5							
Employee Health																				COS	R	WT							
2	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Management and food employee awareness, reporting															<input type="radio"/>	<input type="radio"/>	5							
3	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper use of restriction and exclusion															<input type="radio"/>	<input type="radio"/>	5							
Good Hygienic Practices																				COS	R	WT							
4	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper eating, tasting, drinking, or tobacco use															<input type="radio"/>	<input type="radio"/>	5							
5	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	No discharge from eyes, nose, and mouth															<input type="radio"/>	<input type="radio"/>	5							
Preventing Contamination by Hands																				COS	R	WT							
6	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Hands clean and properly washed															<input type="radio"/>	<input type="radio"/>	5							
7	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed															<input type="radio"/>	<input type="radio"/>	5							
8	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Handwashing sinks properly supplied and accessible															<input type="radio"/>	<input type="radio"/>	2							
Approved Source																				COS	R	WT							
9	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food obtained from approved source															<input type="radio"/>	<input type="radio"/>	5							
10	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food received at proper temperature															<input type="radio"/>	<input type="radio"/>	5							
11	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food in good condition, safe, and unadulterated															<input type="radio"/>	<input type="radio"/>	5							
12	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Required records available: shell stock tags, parasite destruction															<input type="radio"/>	<input type="radio"/>	5							
Protection from Contamination																				COS	R	WT							
13	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food separated and protected															<input type="radio"/>	<input type="radio"/>	4							
14	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food-contact surfaces: cleaned and sanitized															<input type="radio"/>	<input type="radio"/>	5							
15	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper disposition of unsafe food, returned food not re-served															<input type="radio"/>	<input type="radio"/>	2							
Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods																				COS	R	WT							
16	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper cooking time and temperatures															<input type="radio"/>	<input type="radio"/>	5							
17	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper reheating procedures for hot holding															<input type="radio"/>	<input type="radio"/>	5							
Cooling and Holding, Date Marking, and Time as a Public Health Control																				COS	R	WT							
18	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper cooling time and temperature															<input type="radio"/>	<input type="radio"/>	5							
19	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper hot holding temperatures															<input type="radio"/>	<input type="radio"/>	5							
20	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper cold holding temperatures															<input type="radio"/>	<input type="radio"/>	5							
21	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper date marking and disposition															<input type="radio"/>	<input type="radio"/>	5							
22	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Time as a public health control: procedures and records															<input type="radio"/>	<input type="radio"/>	5							
Consumer Advisory																				COS	R	WT							
23	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Consumer advisory provided for raw and undercooked food															<input type="radio"/>	<input type="radio"/>	4							
Highly Susceptible Populations																				COS	R	WT							
24	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pasteurized foods used; prohibited foods not offered															<input type="radio"/>	<input type="radio"/>	5							
Chemicals																				COS	R	WT							
25	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food additives: approved and properly used															<input type="radio"/>	<input type="radio"/>	5							
26	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Toxic substances properly identified, stored, used															<input type="radio"/>	<input type="radio"/>	5							
Conformance with Approved Procedures																				COS	R	WT							
27	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Compliance with variance, specialized process, and HACCP plan															<input type="radio"/>	<input type="radio"/>	5							

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES

OUT=not in compliance					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)				
Safe Food and Water										COS	R	WT		
28	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pasteurized eggs used where required					<input type="radio"/>	<input type="radio"/>	1		
29	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Water and ice from approved source					<input type="radio"/>	<input type="radio"/>	2		
30	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Variance obtained for specialized processing methods					<input type="radio"/>	<input type="radio"/>	1		
Food Temperature Control										COS	R	WT		
31	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control					<input type="radio"/>	<input type="radio"/>	2		
32	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Plant food properly cooked for hot holding					<input type="radio"/>	<input type="radio"/>	1		
33	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Approved thawing methods used					<input type="radio"/>	<input type="radio"/>	1		
34	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Thermometers provided and accurate					<input type="radio"/>	<input type="radio"/>	1		
Food Identification										COS	R	WT		
35	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food properly labeled; original container; required records available					<input type="radio"/>	<input type="radio"/>	1		
Prevention of Food Contamination										COS	R	WT		
36	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Insects, rodents, and animals not present					<input type="radio"/>	<input type="radio"/>	2		
37	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Contamination prevented during food preparation, storage & display					<input type="radio"/>	<input type="radio"/>	1		
38	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Personal cleanliness					<input type="radio"/>	<input type="radio"/>	1		
39	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Wiping cloths: properly used and stored					<input type="radio"/>	<input type="radio"/>	1		
40	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Washing fruits and vegetables					<input type="radio"/>	<input type="radio"/>	1		
Proper Use of Utensils										COS	R	WT		
41	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	In-use utensils; properly stored					<input type="radio"/>	<input type="radio"/>	1		
42	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Utensils, equipment and linens; properly stored, dried, handled					<input type="radio"/>	<input type="radio"/>	1		
43	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Single-use/single-service articles; properly stored, used					<input type="radio"/>	<input type="radio"/>	1		
44	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Gloves used properly					<input type="radio"/>	<input type="radio"/>	1		
Utensils and Equipment										COS	R	WT		
45	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used					<input type="radio"/>	<input type="radio"/>	1		
46	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Warewashing facilities; installed, maintained, used, test strips					<input type="radio"/>	<input type="radio"/>	1		
47	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Nonfood-contact surfaces clean					<input type="radio"/>	<input type="radio"/>	1		
Physical Facilities										COS	R	WT		
48	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Hot and cold water available; adequate pressure					<input type="radio"/>	<input type="radio"/>	2		
49	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Plumbing installed; proper backflow devices					<input type="radio"/>	<input type="radio"/>	2		
50	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Sewage and waste water properly disposed					<input type="radio"/>	<input type="radio"/>	2		
51	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Toilet facilities: properly constructed, supplied, cleaned					<input type="radio"/>	<input type="radio"/>	1		
52	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Garbage/refuse properly disposed; facilities maintained					<input type="radio"/>	<input type="radio"/>	1		
53	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Physical facilities installed, maintained, and clean					<input type="radio"/>	<input type="radio"/>	1		
54	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Adequate ventilation and lighting; designated areas used					<input type="radio"/>	<input type="radio"/>	1		
Administrative Items										COS	R	WT		
55	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Current permit posted					<input type="radio"/>	<input type="radio"/>	0		
56	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Most recent inspection posted					<input type="radio"/>	<input type="radio"/>	0		
Compliance Status										YES	NO	WT		
Non-Smokers Protection Act										COS	R	WT		
57	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Compliance with TN Non-Smoker Protection Act					<input type="radio"/>	<input type="radio"/>	0		
58	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Tobacco products offered for sale					<input type="radio"/>	<input type="radio"/>	0		
59	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	If tobacco products are sold, NSPA survey completed					<input type="radio"/>	<input type="radio"/>	0		

Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous manner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this report. T.C.A. sections 14-203, 68-14-706, 68-14-708, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge [Signature] Date 02/03/2023 Signature of Environmental Health Specialist [Signature] Date 02/03/2023

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

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



Establishment Information

Establishment Name: Nonna Maria
Establishment Number #: 605307971

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)
3 compartment sink	Bleach		

Equipment Temperature

Description	Temperature (Fahrenheit)
Cold holding table	31
Prep cooler with 2drawers	54

Food Temperature

Description	State of Food	Temperature (Fahrenheit)
Meatballs	Hot Holding	112
Tomatoes	Cold Holding	38
Ham	Cold Holding	38

Observed Violations

Total # 11

Repeated # 0

- 1: Person in charge has no demonstration of knowledge
- 7: Touch ready to eat food with bare hands.
- 8: Hand sink does not have cold water and pipe underneath sink leaks when i turn cold water knob.
- 19: Improper hot holding. Food that is being hot held should be 135 degrees Fahrenheit or above.
- 21: No date marking on cooked chicken that was cooked over 24 hours ago. 7 days to discard food from cooked or prepped date.
- 35: Unlabeled food.
- 37: Uncovered food. Boxes of to-go items on the floor. Please store at least 6 inches above the floor.
- 38: Employees are not wearing hair restraint. Ex (hairnet or cap)
- 46: Sanitizer test strips are not available
- 49: Pipe leaks at handsink when cold water knob is turned.
- 54: Ventilation hood is dusty.

TENNESSEE DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
FOOD INSPECTION DATA



Establishment Information

Establishment Name: Nonna Maria

Establishment Number : 605307971

Comments/Other Observations

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***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.

***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: Nonna Maria

Establishment Number : 605307971

Comments/Other Observations (cont'd)**Additional Comments (cont'd)**

See last page for additional comments.

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Establishment Number #: 605307971

Sources

Source Type: Source:

Source Type: Source:

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Additional Comments

Current permit is not posted. Please pay for current health permit at 1826 sycamore view rd, or call 901-222-9200

Javonna Shelbia
901-581-0686