### TENNESSEE DEPARTMENT OF HEALTH TARLICUMENT INCREA

SCORE

YES NO WT

05/17/2023

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Date

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**Compliance Status** 

Compliance with TN Non-Smoker Protection Act. Tobacco products offered for sale

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Date Signature of Environmental Health Specialist

If tobacco products are sold, NSPA survey completed

Non-Smokers Protection Act

rmit. Repeated violation of an identical risk factor may result in revocation of your foor cease. You are required to post the food service establishment permit in a conspicuou

	AGRIC	$\mathcal{T}_{I}$	]清			FOOD SERV	ICE ESTA	BL	15 H	M			121	'EC	П	ON REPORT				
S.																				
E	- And	histor			Mr. Burrito											Farmer's Market Food Unit     Ø Permanent     O Mobile	7	C		
Ess	abiisi	nmen	t Nan		2601 Dayto						_	Тур	xe of E	istabli	shme	ent				
										_					O Temporary O Seasonal					
City					Chattanoog	a	Time in	11	.:1(	0 A	M	A	M/P	/ Tir	me ou	ut 12:10: PM AM / PM				
Insp	ectio	on Da	te		05/17/20	23 Establishment #	60531055	4			Emba	rgoe	d 2	0						
Puŋ	pose	of In	spect	ion	<b></b> Routine	O Follow-up	O Complaint			O Pr	elimin	ary		0	Cor	nsuitation/Other				
Rici	Cal	tegon	,		01	02	223			04				Fo		up Required 🕱 Yes <b>O</b> No	Number of S	eats	44	
1400	1.00				-	<b>4</b> n		beha		-	st co	min	nonly			to the Centers for Disease Cont			_	
				as c	ontributing fac											control measures to prevent illne	es or injury.			
			rk der	lanat	ed compliance stat											INTERVENTIONS such item an applicable. Deduct points for e	ategory or subcate	eerv.)		
IN	⊨in c	ompili				nce NA=not applicable	NO=not observe									spection R=repeat (violation of th				
		_	_			pliance Status		COS	R							Compliance Status			R	WT
	IN	OUT	NA	NO		Supervision						IN	OUT	NA	NO	Cooking and Reheating of Time/				
1	0	2			Person in charge performs duties	present, demonstrates kr	nowledge, and	0	0	5	16	0	0	0	×.	Control For Safety (TCS) I Proper cooking time and temperatures	0003	0	o	
	_		NA	NO		Employee Health			_			×	ŏ	ŏ		Proper reheating procedures for hot hold	ing	00	õ	5
23	<u>。</u> 笑	<u>8</u> 0				food employee awarene triction and exclusion	ss; reporting	0	0	5		IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as				
3		_	NA	NO	,	od Hygienic Practice		<u> </u>		_	18	0	×	0	0	Public Health Contr Proper cooling time and temperature	04	0		
4	X	0	-			ting, drinking, or tobacco		0	0	5	19	家	õ			Proper hot holding temperatures		0	0	
5	黨					n eyes, nose, and mouth	Handa	0	0	<u> </u>	20		0	0		Proper cold holding temperatures		0	0	5
6	N	001	NA		Hands clean and	ting Contamination by properly washed	Hands	0	0	-			*			Proper date marking and disposition			0	
7	X	0	0	0	No bare hand con	tact with ready-to-eat foo	ds or approved	0	ō	5	22		0	×	-	Time as a public health control: procedu	res and records	0	0	
8		X	-	-	alternate procedu	res followed is properly supplied and a	accessible		0	2		IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and	undercooked			
	IN	OUT	NA	NO		Approved Source	accession			<u> </u>	23	0	0	×		food	andercooked	0	0	4
	黨			3		m approved source proper temperature		0	0			IN	OUT	NA	NO	Highly Susceptible Popula	tions			
10	×	ŏ		<u> </u>	Food in good con	proper temperature dition, safe, and unadulte	rated	0	6	5	24	0	0	X		Pasteurized foods used; prohibited foods	not offered	0	이	5
12	0	0	X	0	Required records destruction	available: shell stock tag	s, parasite	0	0			IN	OUT	NA	NO	Chemicais				
			NA	NO	Prote	ction from Contamina	ation	_				0		X		Food additives: approved and properly u		0	0	5
13	2	00	읭		Food separated a	nd protected aces: cleaned and sanitiz	No.4		0		26	<u>s</u>		NA	NO	Toxic substances properly identified, sto Confermance with Approved P		0	0	
	_		_			of unsafe food, returned									no.	Compliance with variance, specialized p				5
15	2	0			served			0	0	2	27	0	0	黨		HACCP plan		0	٥	0
				Goo	d Retail Practi	ces are preventive n	neasures to co	ntro	the	intr	oduc	tion	of p	atho	gens	s, chemicals, and physical object	s into foods.			
								600	D R	a74	L PR	ACT	ICE							
				00	F=not in compliance		COS=corre	cled or	n-site	during						R-repeat (violation of the sam				
_	_	OUT				pliance Status Food and Water		COS	R	WT		10	UT			Compliance Status Utensils and Equipment		COS	R	WT
2	8		Paste	urize	d eggs used when			0	0	1	4		_	ood ar	nd no	onfood-contact surfaces cleanable, proper	ly designed,	0	0	
_	9	0	Wate	r and	ice from approved	source		0	0	2	4	· [ 1	× 0	onstru	cted,	and used		-	4	1
3	0	OUT	Varia	nce c	Food To Food To	lized processing method: mperature Control	5	0	0	-	4	5   (	0  v	/arews	ashin	g facilities, installed, maintained, used, te	st strips	0	0	1
,	1		Prop	er co		d; adequate equipment fo	r temperature	0	0	2	47	1	0 N	onfoo	d-con	ntact surfaces clean		0	0	1
		鬣	contr						I I			_	UT			Physical Facilities				
_	2				properly cooked for thawing methods (			0	0	$\frac{1}{1}$	42	_				f water available; adequate pressure stalled; proper backflow devices		8	윙	2
_	4				eters provided and			ŏ	ŏ	1	50	_	_			waste water properly disposed		0	0	2
		OUT				d identification					51	1	0 T	oilet fa	cilitie	es: properly constructed, supplied, cleane	d	0	0	1
3	5	0	Food	prop	erly labeled; origin	al container; required rec	ords available	ο	0	1	52	2   (	<b>0</b>   G	arbag	e/refi	use properly disposed; facilities maintaine	d	0	0	1
		OUT			Prevention	of Food Contaminatio	n				53	3 (	<b>0</b> P	hysica	I faci	lities installed, maintained, and clean		0	0	1
3	6	0	Insec	ts, ro	dents, and animal	s not present		0	0	2	54	•	0 A	dequa	te ve	entilation and lighting; designated areas up	ied	0	٥	1
3	7	X	Cont	amina	ation prevented du	ring food preparation, sto	rage & display	0	0	1		0	UT			Administrative items				
_	8				leanliness	and store t		0	0	1	55					mit posted		0	0	0
3	9	0	wipir	ng clo	ths; properly used	and stored		0	0	1	56	×   (	0 10	iost re	cent	inspection posted		0	0	11.00

	Additional food safety information	can be found on our website,	http://tn.gov/health/article/eh-foodservic	e ****
PH-2267 (Rev. 6-15)	Free food safety training cla	isses are available each mor	nth at the county health department.	RDA 629
rivezor (new. o-roy	Please call (	) 4232098110	to sign-up for a class.	hor des

ion of your food service establishe corrected immediately or operation

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he 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 by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of the filing a written request with the Commissioner within ten (10) days of the date of the filing a written request with the Commissioner within ten (10) days of the date of the filing a written request with the Commissioner within ten (10) days of the date of the filing a written request with the Commissioner within ten (10) days of the date of the filing a written request with the Commissioner within ten (10) days of the date of the filing a written request with the Commissioner within ten (10) days of the date of the filing a written request with the Commissioner within ten (10) days of the date of the filing a written request with the Commissioner within ten (10) days of the date of the filing a written request with ten (10) days of the date of the filing a written request with ten (10) days of the date of the filing a written request with ten (10) days of the date of the filing a written request with ten (10) days of the date of the filing a written request with ten (10) days of the date of the filing a written request with ten (10) da

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th hazards shall be corrected in

05/17/2023

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O Washing fruits and vegetables

44 O Gloves used properly

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ner and post the n T.C.A. secti

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Signature of Person In Charge

 OUT
 Proper Use of Utensils

 41
 O
 In-use utensils; properly stored

 42
 O
 Utensils, equipment and linens; properly stored, dried, handled

 43
 O
 Single-use/single-service articles; properly stored, used

Proper Use of Utensils

ions of risk factor items within ten (10) days may result in su it. Items identified as constituting imminent health hazards sh

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



#### Establishment Information

Establishment Name: Mr. Burrito Establishment Number #: 605310554

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 wenty-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.	
Sarage 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.	
moking observed where smoking is prohibited by the Act.	

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)				
Three compartment sink Sani bucket	Chlorine Chlorine	100					

Equipment Temperature	
Description	Temperature (Fahrenheit)
3 dr tall	40

eheating ot Holding old Holding old Holding old Holding	150 179 146 41 41 400 64
ot Holding old Holding old Holding old Holding	146 41 41 400
old Holding old Holding old Holding	41 41 400
old Holding	41 400
old Holding	400
J	
old Holding	64
old Holding	41
old Holding	41
old Holding 🛛 4	41
כ	Id Holding

Total # 9

Repeated # 0

1: Employees present today during inspection do not demonstrate managerial control over kitchen. Cook is not familiar with date marking requirements or temperature control. Ensure a person in charge is present at the facility at all times to oversee food safety.

2: No health policy is posted and employees onsite are not familiar with policy. Spoke to manager over the phone who stated it will be laminated and posted later today.

8: Handwash sink in kitchen is out of soap. Provide soap and paper towels at handwash sink at all times.

18: Three door tall unit is cold holding at 40F, with raw beef inside at 40F. Cooked beef and rice inside prepared yesterday per cook is holding at 64F. Properly cool food as required. Discard food that is not properly cooled to prevent illness.

21: Multiple items in 3 door tall refrigerator unit prepared over 24 hours ago per cook are not properly date marked. In addition, cooked chicken in the same unit is date marked 5/7/23 which is 10 days ago and past the allowance to serve. Review date marking procedures and follow requirements.

31: Upon arrival, the three door refrigerator is overstocked and the door will not properly close. This was corrected during inspection. Ensure doors to refrigerators are closed when not in use for proper cooling.

37: Tortillas and serving trays are stored under paper towel dispenser at front handwash sink. Store food away from paper towel dispenser and potential water drip onto food to prevent contamination.

37: Discontinue storing food on floor in kitchen to prevent contamination. Store six inches off floor (vegetables, boxes of tortillas, etc)

45: Replace sugar scoop that is damaged/cracked.



## Establishment Information

Establishment Name: Mr. Burrito

Establishment Number : 605310554

#### Comments/Other Observations

- 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: (IN) Observed proper handwashing by employees.

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

9: (IN) Food obtained from approved 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.
- 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: No cooking of TCS foods observed during inspection
- 17: (IN) All TCS foods are properly reheated for hot holding.
- 19: (IN) Hot holding temperatures are held at 135F or above
- 20: (IN) Cold holding temperatures are held at 41F or below
- 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: Mr. Burrito

Establishment Number : 605310554

Comments/Other Observations (cont'd)

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

Establishment Inform	nation	
Establishment Name: M	. Burrito	
Establishment Number #:	605310554	

Sources			
Source Type:	Food	Source:	Performance
Source Type:	Water	Source:	Water is from approved source
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

# Additional Comments