



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE  
**75**

Establishment Name Formosa Type of Establishment  Farmer's Market Food Unit  Permanent  Mobile  
 Address 5425 Hwy 153 Suite 129  Temporary  Seasonal  
 City Hixson Time in 02:05 PM AM / PM Time out 03:15 PM AM / PM  
 Inspection Date 09/27/2021 Establishment # 605249329 Embargoed 0  
 Purpose of Inspection  Routine  Follow-up  Complaint  Preliminary  Consultation/Other  
 Risk Category  1  2  3  4 Follow-up Required  Yes  No Number of Seats 97

**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.)

Compliance Status					COS	R	WT
IN	OUT	NA	NO				
<b>Supervision</b>							
1	<input type="radio"/>	<input checked="" type="radio"/>					5
Person in charge present, demonstrates knowledge, and performs duties							
<b>Employee Health</b>							
2	<input checked="" type="radio"/>	<input type="radio"/>					5
Management and food employee awareness, reporting							
3	<input checked="" type="radio"/>	<input type="radio"/>					5
Proper use of restriction and exclusion							
<b>Good Hygienic Practices</b>							
4	<input checked="" type="radio"/>	<input type="radio"/>					5
Proper eating, tasting, drinking, or tobacco use							
5	<input checked="" type="radio"/>	<input type="radio"/>					5
No discharge from eyes, nose, and mouth							
<b>Preventing Contamination by Hands</b>							
6	<input checked="" type="radio"/>	<input type="radio"/>					5
Hands clean and properly washed							
7	<input checked="" type="radio"/>	<input type="radio"/>					5
No bare hand contact with ready-to-eat foods or approved alternate procedures followed							
8	<input checked="" type="radio"/>	<input type="radio"/>					2
Handwashing sinks properly supplied and accessible							
<b>Approved Source</b>							
9	<input checked="" type="radio"/>	<input type="radio"/>					5
Food obtained from approved source							
10	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				5
Food received at proper temperature							
11	<input checked="" type="radio"/>	<input type="radio"/>					5
Food in good condition, safe, and unadulterated							
12	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				5
Required records available: shell stock tags, parasite destruction							
<b>Protection from Contamination</b>							
13	<input type="radio"/>	<input checked="" type="radio"/>					4
Food separated and protected							
14	<input type="radio"/>	<input checked="" type="radio"/>					5
Food-contact surfaces: cleaned and sanitized							
15	<input checked="" type="radio"/>	<input type="radio"/>					2
Proper disposition of unsafe food, returned food not re-served							

  

Compliance Status					COS	R	WT
IN	OUT	NA	NO				
<b>Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods</b>							
16	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			5
Proper cooking time and temperatures							
17	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>			5
Proper reheating procedures for hot holding							
<b>Cooling and Holding, Date Marking, and Time as a Public Health Control</b>							
18	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>			5
Proper cooling time and temperature							
19	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			5
Proper hot holding temperatures							
20	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>			5
Proper cold holding temperatures							
21	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			5
Proper date marking and disposition							
22	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>			5
Time as a public health control: procedures and records							
<b>Consumer Advisory</b>							
23	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				4
Consumer advisory provided for raw and undercooked food							
<b>Highly Susceptible Populations</b>							
24	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				5
Pasteurized foods used; prohibited foods not offered							
<b>Chemicals</b>							
25	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				5
Food additives: approved and properly used							
26	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>				5
Toxic substances properly identified, stored, used							
<b>Conformance with Approved Procedures</b>							
27	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				5
Compliance with variance, specialized process, and HACCP plan							

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

### GOOD RETAIL PRACTICES

Compliance Status					COS	R	WT
OUT							
<b>Safe Food and Water</b>							
28	<input type="radio"/>						1
Pasteurized eggs used where required							
29	<input type="radio"/>						2
Water and ice from approved source							
30	<input type="radio"/>						1
Variance obtained for specialized processing methods							
<b>Food Temperature Control</b>							
31	<input checked="" type="radio"/>						2
Proper cooling methods used; adequate equipment for temperature control							
32	<input type="radio"/>						1
Plant food properly cooked for hot holding							
33	<input type="radio"/>						1
Approved thawing methods used							
34	<input type="radio"/>						1
Thermometers provided and accurate							
<b>Food Identification</b>							
35	<input type="radio"/>						1
Food properly labeled; original container; required records available							
<b>Prevention of Food Contamination</b>							
36	<input type="radio"/>						2
Insects, rodents, and animals not present							
37	<input type="radio"/>						1
Contamination prevented during food preparation, storage & display							
38	<input type="radio"/>						1
Personal cleanliness							
39	<input type="radio"/>						1
Wiping cloths: properly used and stored							
40	<input type="radio"/>						1
Washing fruits and vegetables							
<b>Proper Use of Utensils</b>							
41	<input checked="" type="radio"/>						1
In-use utensils; properly stored							
42	<input type="radio"/>						1
Utensils, equipment and linens; properly stored, dried, handled							
43	<input type="radio"/>						1
Single-use/single-service articles; properly stored, used							
44	<input type="radio"/>						1
Gloves used properly							

  

Compliance Status					COS	R	WT
OUT							
<b>Utensils and Equipment</b>							
45	<input checked="" type="radio"/>						1
Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used							
46	<input type="radio"/>						1
Warewashing facilities, installed, maintained, used, test strips							
47	<input type="radio"/>						1
Nonfood-contact surfaces clean							
<b>Physical Facilities</b>							
48	<input type="radio"/>						2
Hot and cold water available; adequate pressure							
49	<input type="radio"/>						2
Plumbing installed; proper backflow devices							
50	<input type="radio"/>						2
Sewage and waste water properly disposed							
51	<input type="radio"/>						1
Toilet facilities: properly constructed, supplied, cleaned							
52	<input type="radio"/>						1
Garbage/refuse properly disposed; facilities maintained							
53	<input checked="" type="radio"/>						1
Physical facilities installed, maintained, and clean							
54	<input checked="" type="radio"/>						1
Adequate ventilation and lighting; designated areas used							
<b>Administrative Items</b>							
55	<input type="radio"/>						0
Current permit posted							
56	<input type="radio"/>						0
Most recent inspection posted							
<b>Compliance Status</b>							
<b>Non-Smokers Protection Act</b>							
57	<input checked="" type="radio"/>						0
Compliance with TN Non-Smoker Protection Act							
58	<input type="radio"/>						0
Tobacco products offered for sale							
59	<input type="radio"/>						0
If tobacco products are sold, NSPA survey completed							

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 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

Signature of Person In Charge [Signature] Date 09/27/2021 Signature of Environmental Health Specialist [Signature] Date 09/27/2021

\*\*\*\* 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: Formosa  
 Establishment Number #: 605249329

**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)
Dish machine	Chlorine	0	

**Equipment Temperature**

Description	Temperature ( Fahrenheit)

**Food Temperature**

Description	State of Food	Temperature ( Fahrenheit)
Shrimp (Line cooler)	Cold Holding	45
Raw chx (line cooler)	Cold Holding	47
Chx Soup	Hot Holding	167
Hot and sour Soup	Hot Holding	169
Egg roll	Hot Holding	137
Noodles	Cold Holding	38
Raw chx	Cold Holding	39
Raw shrimp	Cold Holding	37
Egg roll	Cold Holding	40
Noodles	Cold Holding	40

**Observed Violations**

**Total # 9**

**Repeated # 0**

- 1: PIC lacking control over food safety risk factors.
- 13: Raw chicken stored over wontons. Raw chicken stored over raw beef, raw beef stored over raw
- 14: Dish machine at 0 ppm. No sanitizer bucket set up.
- 20: Line cooler holding at 43F-49F.
- 31: TCS food items items such as baby corn, mushrooms, and sprouts being held out of refrigeration.
- 41: Rice scoop held in room temp standing water.
- 45: Multiple pieces of equipment in poor repair - cracked gaskets, broken food containers, damaged lid.
- 53: Wall behind dish machine in poor repair. Build up under cook line.
- 54: Employee drink in food prep area. Employee food should be stored in a designated area.



**Establishment Information**

Establishment Name: Formosa

Establishment Number : 605249329

**Comments/Other Observations**

- 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: Hands washed
- 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: Approved
- 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.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (IN) All raw animal foods cooked to proper temperatures.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See recorded food temperatures
- 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:
- 27:
- 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.***

\*\*\*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: Formosa

Establishment Number : 605249329

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

***Additional Comments (cont'd)***

***See last page for additional comments.***

**Establishment Information**

Establishment Name: Formosa

Establishment Number #: 605249329

**Sources**

Source Type: Food Source: Sysco, us foods

Source Type: Water Source: HUD

Source Type: Source:

Source Type: Source:

Source Type: Source:

**Additional Comments**