



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

96

Establishment Name Sonic Drive-In Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile  
Address 3655 N Mt.Juliet Rd ☐ Temporary ☐ Seasonal  
City Mount Juliet Time in 10:30 AM AM / PM Time out 11:26:AM AM / PM  
Inspection Date 03/20/2024 Establishment # 605257367 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 10

**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)												
Compliance Status															COS	R	WT	Compliance Status															COS	R	WT		
IN	OUT	NA	NO	Supervision											COS	R	WT	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods											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	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
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	17	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Proper reheating procedures for hot holding											<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		IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control													
4	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Good Hygienic Practices														18	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Proper cooling time and temperature											<input type="radio"/>	<input type="radio"/>	
5	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Preventing Contamination by Hands														19	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper hot holding temperatures											<input type="radio"/>	<input type="radio"/>	
6	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Approved Source														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
7	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Protection from Contamination														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"/>	
8	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Consumer Advisory														22	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Time as a public health control: procedures and records											<input type="radio"/>	<input type="radio"/>	
9	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Highly Susceptible Populations														23	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Consumer advisory provided for raw and undercooked food											<input type="radio"/>	<input type="radio"/>	4
10	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Chemicals														24	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Pasteurized foods used; prohibited foods not offered											<input type="radio"/>	<input type="radio"/>	5
11	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food additives: approved and properly used															IN	OUT	NA	NO														
12	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Toxic substances properly identified, stored, used														25	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Food additives: approved and properly used											<input type="radio"/>	<input type="radio"/>	5
13	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Conformance with Approved Procedures														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"/>	
14	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>																IN	OUT	NA	NO	Conformance with Approved Procedures													
15	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>															27	<input type="radio"/>	<input type="radio"/>	<input checked="" 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.**

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

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, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge [Signature] Date 03/20/2024 Signature of Environmental Health Specialist [Signature] Date 03/20/2024

\*\*\*\* 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: Sonic Drive-In  
Establishment Number #: 605257367

***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)
Bucket	QA	200	

***Equipment Temperature***

Description	Temperature ( Fahrenheit)
Beverage air sandwich ric	38
Beverage air ric	39
Beverage air rif	6
Wic	39

***Food Temperature***

Description	State of Food	Temperature ( Fahrenheit)
Eggs	Cold Holding	42
Chicken tender	Hot Holding	153
Sausage	Hot Holding	149
Chili	Hot Holding	144
Scrambled eggs	Hot Holding	140
Sliced tomatoes	Cold Holding	35
Pulled pork	Cold Holding	41
Burger	Cooking	187
Whipped topping	Cold Holding	41

### Observed Violations

Total # 3

Repeated # 0

37: Black and tan substance in ice machine.

45: Styrofoam cup used as scoop in onions. Left in pan of onions in wic

50: Water leaking on floor from drain at front hand sink

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**Establishment Information**

Establishment Name: Sonic Drive-In

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**Comments/Other Observations**

- 1: (IN): ANSI Certified Manager present.
- 2: Discussed policy with pic
- 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: Employees washed hands when changing gloves. Employee washed hands when entering kitchen to start shift.
- 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: See source info
- 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: See food temps
- 17: (NO) No TCS foods reheated during inspection.
- 18: No food being cooled during inspection
- 19: See food temps
- 20: See food temps
- 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: (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.**

\*\*\*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: Sonic Drive-In

Establishment Number : 605257367

**Comments/Other Observations (cont'd)****Additional Comments (cont'd)*****See last page for additional comments.***



Establishment Name:	Sonic Drive-In
Establishment Number #:	605257367

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Source Type:	Water	Source:	City
Source Type:	Food	Source:	Reinhart
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

Source:	City
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Source: Reinhart

Source:

Source:

Source: