TENNESSEE DEPARTMENT OF HEALTH OD SERVICE ESTARI ISUMENT INSPECTION REPORT

14

No.						FOOD SER	VICE ESTA	BL	ISH	IM	ENT	- 11	ISI	PEC	TI	ON REPORT	CORE	-	
2		11	and the second second		Delias Me	exican Food										O Fermer's Market Food Unit)	
Est	ablist	nem	t Nar	ne								Тур	e of I	Establi	shme	ent Rermanent O Mobile	12	1	
Add	iress															O Temporary O Seasonal			
City						5									me o	ut <u>11:35</u> : <u>AM</u> AM/PM			
Insp	xectio	n Da	rte		09/14/2	021 Establishmen	t# <u>60524761</u>	.2		_	Emba	rgoe	d <u>C</u>)					
Puŋ	pose	of In	spec	tion	O Routine	搿 Follow-up	O Complaint			O Pr	elimin	ary		c	Cor	nsultation/Other			
Risi	k Cat	8363 Dayton Pike O Temporary O Seasonal Soddy Daisy Time in 11:25, AM AM / PM Time out 11:35; AM AM / PM action Date 09/14/2021 Establishment # 605247612 Embargoed 0 cose of Inspection Route Image: Soddy Daisy 0 Complaint O Preiminary O Consultation/Other Category 01 02 03 0.4 Follow-up Required O Yes N Number of Seats 57 Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Provention are control mascress to prevention and employee behaviors most commonly reported to the Centers for Disease Control and Prevention are control mascress to prevention and employee behaviors most commonly reported to the Centers for Disease Control and Prevention are control mascress to prevention and employee behaviors most commonly reported to the Centers for Disease Control and Prevention and employee them the reference of the Centers for Disease Control and Prevention and employee behavior for the control or site of Sector (CC) FA NO No No dohard belaverd COS R WT In our NA NO Compliance Status O I I I I I I I I I I I I I I I I I I I																	
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IN	⊨in c			algna					ltem									r.)	
	_	_	_			ompliance Status			R							Compliance Status	COS	\$R	WΤ
	_		NA	NO	Person in char		is knowledge and			_		IN	ουτ	NA	NO		•		
1			NA	NO		\$	÷ .	0	0	5							8	lo	5
	X	0	ne.	no		and food employee awar	eness; reporting	_			<i>"</i>								<u> </u>
3	8		NA	NO				0	0	Ŭ	19						_		
4	1	0	nu-A					0	0		19	黨	0	0		Proper hot holding temperatures	0	0	1
5			NA	-				0	0	-	20	20			0			8	- 5
	邕	0			Hands clean ar	nd properly washed		_	-								_	-	1
7			0	0	alternate proce	dures followed				Ů		IN	OUT		NO			-	<u></u>
	IN	OUT	NA	NO	Handwashing s			0	0	2	23	\approx	0	0			d O	0	4
			0	~											NO	Highly Susceptible Populations		-	_
11	×	0			Food in good o	condition, safe, and unad		Ō	0	5	24	0	0	_		Pasteurized foods used; prohibited foods not offered	0	0	5
12	0			-	destruction			0	0										
13	12	0	0	NO			nination	0	0	4	25	0 X	0	86					
	_	_	0					-	-			_	_	-	NO		_		
15	22	0						0	0	2	27	0	0	×			0	0	5
				God	d Retail Prac	ctices are preventiv	e measures to c	ontro	l the	intr	oduc	tion	of p	atho	geni	s, chemicals, and physical objects into food	s.		
											IL PR		1CB	3					
				ou	T=not in complian	ompliance Status	COS=com		R		2 inspe	ction				R-repeat (violation of the same code provis Compliance Status		S R	WT
,	8	001		0.052	Sa ed eggs used wi	fe Food and Water		0	0	4		_	UT	lood a	ad no	Utensils and Equipment infood-contact surfaces cleanable, properly designed,		1	_
2	9	0	Wate	er and	dice from appro	ved source		0	0	2	4	5 0				and used	0	0	1
3	0	OUT		ince		cialized processing meth Temperature Control		0	0	1	4	5 6	o v	Varew	ashin	g facilities, installed, maintained, used, test strips	0	0	1
3	11		Prop		oling methods u	ised; adequate equipmen	nt for temperature	0	0	2	4	_	л ∩ П	Vonfoo	d-cor	ntact surfaces clean Physical Facilities	0	0	1
3	2				properly cooke	d for hot holding		0	0	1	4			lot and	1 cold	i water available; adequate pressure	0	ТО	2
	3		<u> </u>		thawing method			0	0	1	4	_	_			stalled; proper backflow devices		_	
3	4	OUT		mom	eters provided a	and accurate ood identification		0	0	1	5					waste water properly disposed es: properly constructed, supplied, cleaned	0	-	
3	5		_	i prop		ginal container; required	records available	0	0	1	5	_				use properly disposed; facilities maintained	0	-	
		OUT			Preventio	on of Food Contamina	ation				5	5 0	o F	hysica	al fac	lities installed, maintained, and clean	0	0	1
3	6	0	Inse	ts, r	odents, and anin	nais not present		0	0	2	5	•	o /	\dequa	de ve	intilation and lighting; designated areas used	0	0	1
3	7	0	Cont	amin	ation prevented	during food preparation,	storage & display	0	0	1		0	UT			Administrative Items			
_	8	-	-		cleanliness	and and stored		0	0	1	5					nit posted inspection posted		0	
_	9 0				oths; properly us fruits and vegeta				0	1	1°	<u>, 14</u>	<u> 1</u>	NOST FE	cent	Compliance Status			wr
		OUT			Pro	per Use of Utensils			· · ·							Non-Smokers Protection Act			
	1 2				nsils; properly s equipment and li	tored inens; properly stored, d	ried handled	8	8	1	5					with TN Non-Smoker Protection Act ducts offered for sale		8	0
4	3	0	Sing	e-us	e/single-service	articles; properly stored, d		0	0	1	5	5				oducts are sold, NSPA survey completed	ŏ	ŏ	1
	4				sed properly				0										
serv	ice et	tablis	shmer	t per	mit. Items identifie	ed as constituting imminent	t health hazards shall b	e corre	cted i	mmed	liately (or ope	ratio	ns shall	ceas	Repeated violation of an identical risk factor may result in e. You are required to post the food service establishment	permit in a	cons	picuous
						report in a conspicuous m , 68-14-708, 68-14-709, 68-14				t a he	aring r	egard	ing th	es repo	rt by I	filing a written request with the Commissioner within ten (10) days of th	he dat	e of this

Mourit	L . 09/14/2021	1-th	09/14/2021
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date

	oditional lood salety mormation can be lound on our webs	ste, http://tri.gownearur/arucie/en-toodservi	ue
PH-2267 (Rev. 6-15)	Free food safety training classes are available each Please call () 4232098110		RDA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Delias Mexican Food Establishment Number # 605247612

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)				

quipment l'emperature							
Decoription	Temperature (Fahrenheit)						

ecoription	State of Food	Temperature (Fahrenheit

Observed Violations
Total # 1 Repeated # 0
Repeated # 0
39:

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Delias Mexican Food Establishment Number: 605247612

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 Info	rmation
Establishment Name:	Deline Mauine

Establishment Name: Delias Mexican Food Establishment Number: 605247612

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Delias Mexican Food Establishment Number #. 605247612

Sources		
Source Type:	Source:	

Additional Comments

#20 corrected.