TENNESSEE DEPARTMENT OF HEALTH

(AND A					FOOD SEF	VICE ESTA	BL	ISH	IMI	EN	TI	NSI	PEC	TI	ON REPORT	SCO	RE		_	
Oakview Far			Oakview F	arm FMFU										Farmer's Market Food Unit	10		ſ)		
Establishment Name 11237 Jw Jordan Rd						_	Ту	pe of	Establ	ishme			J	L	/					
AGRESS				0	<u></u>	7/						O Temporary O Seasonal								
City															me o	ut 08:53; AM AM / PM				
Inspe	ctio	n Da	rte		04/12/20	24 Establishmer	t# <u>60532473</u>	1		-	Emb	argoe	ed C)		l				
Purpose of Inspection Routine O Follow-up O Complaint O Preliminary O Consultation/Other																				
Risk Category O1 🕱 O3 O4 Follow-up Required O Yes 🕄 No Number of Seats O									_											
	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.																			
																INTERVENTIONS				
IN	in cr	ompili		elĝine i		iance NA=not applicat			16 d - h							ach item as applicable. Deduct points for o spection Rerepent (violation of the				
	_	_				mpliance Status	110 111 1000111		R				-			Compliance Status		COS	R	WT
\rightarrow	-	-	NA	NO	Dessee is share	Supervision	s Inculation and			_		IN	ουτ	NA	NO	Cooking and Reheating of Time/ Control For Safety (TCS)				
		٥			performs duties	e present, demonstrate	÷ ·	0	0	5		0				Proper cooking time and temperatures		00	0	5
2			NA	NO	Management an	Employee Healt d food employee awar		0			17					Proper reheating procedures for hot hold Ceoling and Holding, Date Marking		0	0	
		0			Proper use of re	striction and exclusion		0	0	5		IN	OUT	NA	NO	a Public Health Contro				
	_	OUT O	NA			lood Hygionic Pract sting, drinking, or toba		0	0	_		0		_		Proper cooling time and temperature Proper hot holding temperatures		0	0	
5	0	0		24	No discharge fro	m eyes, nose, and mo	uth	ŏ	ŏ	5	20	25	0	0		Proper cold holding temperatures		0	0	5
		OUT O	NA			ting Contamination of properly washed	n by Hands	0	0	_		0	-	_		Proper date marking and disposition		0	0	
-	0	0	0	X	No bare hand co	intact with ready-to-eat	foods or approved	0	0	5	22	-	0	O NA		Time as a public health control: procedur Consumer Advisory	es and records	0	0	
8	X	0			alternate proced Handwashing si	nks properly supplied a		0	0	2	23	_	0	_	NO	Consumer advisory provided for raw and	undercooked	0	0	4
	IN II 家		NA		Food obtained fr	Approved Source om approved source	•	0	0		H	IN	OUT		NO	food Highly Susceptible Popula	tions	-	-	
	0		0		Food received a	t proper temperature ndition, safe, and unad	hitoratod	0	8	5	24	0	0	88		Pasteurized foods used; prohibited foods	a not offered	0	0	5
	_	0	×	0	Required record	s available: shell stock		6	6	Ť	H	IN	ουτ	-	NO	Chemicals				
H	IN I	OUT	NA	-	destruction Prot	ection from Contan	sination	-		_	25	0	0	28		Food additives: approved and properly u	sed	0	ত	
13					Food separated	The second s	- Nord	_	0		26	×	0		·	Toxic substances properly identified, stor		0	0	•
14 15		0	0			rfaces: cleaned and sa on of unsafe food, retur		0	0	5	27	IN O	001	X	NO	Compliance with variance, specialized pr		0	0	5
	~	•			served				U	•	Ľ	0	<u> </u>	~		HACCP plan		0	~	ů
				Goo	d Retail Pract	lices are preventiv	e measures to co	ontro	l the	intr	oduc	ction	n of p	patho	gens	s, chemicals, and physical objects	s into foods.			
													TICE	8						
				00	T=not in complianc Cor	e mpliance Status	COS=corre		R		; inspe	ection				R-repeat (violation of the sam Compliance Status		COS	R	WT
28	_	OUT	Dact		Safe ed eggs used whe	e Food and Water				-			JUT (and a	ad as	Utensils and Equipment properties cleanable, properties of the pro	by decigred			
- 29	-	0	Wate	er and	lice from approve	ed source		0	0	2	4	5				and used	ly designed,	0	0	1
30	_	O OUT		ince d		alized processing met comporature Contro		0	0	1	4	6	۰ŀ	Narew	ashin	g facilities, installed, maintained, used, te	st strips	0	0	1
31		0			oling methods us	ed; adequate equipme	nt for temperature	0	0	2	4	_	-	Vonfoo	d-cor	ntact surfaces clean		0	0	1
32	+	0	contr Plant		properly cooked	for hot holding		0	0	1	4	_	TUC O	Physical Facilities Hot and cold water available; adequate pressure				0	0	2
33	_	0	Appr	oved	thawing methods eters provided an	used		0	0	1		_	_			stalled; proper backflow devices		0	0	2
34		OUT		nome		od identification		0		1		Sewage and waste water properly disposed O Toilet facilities: properly constructed, supplied, cleaned				d	0	8	2	
35	;	0	Food	i prop	erly labeled; origi	nal container; required	records available	0	0	1	5	2	0	Sarbaç	je/refi	use properly disposed; facilities maintaine	d	0	0	1
		OUT			Prevention	of Food Contamin	ation		-		5	3	o F	Physica	al faci	ilities installed, maintained, and clean		0	0	1
36	:	0	Insec	ts, ro	dents, and anima	als not present		0	0	2	5	4	0 /	Adequa	ate ve	entilation and lighting; designated areas us	Jed	0	0	1
37	ſ	0	Cont	amina	ation prevented d	uring food preparation,	storage & display	0	0	1		0	TUC			Administrative items				
38		-	-		leanliness	d and stored		0	0	1			-		-	nit posted		0	0	0
39	_				ths; properly use ruits and vegetab				8		F	6	0	viost re	cent	Compliance Status		O YES		WT
41	OUT			a i de		Proper Use of Utensils			0	1	Non-Smokers Protection Act Compliance with TN Non-Smoker Protection Act									
42	2	0	Uten	sils, e	equipment and lin	ens; properly stored, d		0	0	1	5	8		Tobacc	o pro	ducts offered for sale		× 0	0	0
4					s/single-service a ed properly	rticles; properly stored	used		8		5	9	ł	f tobac	co pr	oducts are sold, NSPA survey completed		0	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																			
servio	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																			
repor	report. T.C.A. sections 68-14-703, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.																			
	2	/		ے ۔ 			04/2	L2/2	024	1	_	C	\nearrow	L	6	KAX Sol	C)4/1	2/2	024
Sign	atur	re of	Pers	on In	Charge				[Date	Si	gnati	ure of	Envir	onme	ental Health Specialist				Date

Signature of Person In Charge

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

Free food safety training classes are available each month at the county health department. Please call () 6158987889 to sign-up for a class. PH-2267 (Rev. 6-15) RDA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

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Establishment Information Establishment Name: Oakview Farm FMFU Establishment Number #: [605324731

Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						
3 comp buckets, not set	Qa tabs								

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Na					

Food Temperature	State of Food	Temperature (Fahrenheit
No tcs at this time		

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Oakview Farm FMFU

Establishment Number : 605324731

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

- 2: Policy in place
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (N.O.) No food workers present.
- 5: (N.O.) No food workers present at the time of inspection.
- 6: No workers present, no food prep or tasks worked.
- 7: (NO) No food workers present during the inspection.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: See sources verified approval: see plan review
- 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: No raw product at the time, has means to seperate at this time.
- 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 raw product present.
- 17: (NO) No TCS foods reheated during inspection.
- 18: No tcs foods on hand to require cooling
- 19: (NO) TCS food is not being held hot during inspection.
- 20: No tcs foods at time of insoection, equipment adequate, has thermometers for the coolers.
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 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:	Oakview Farm FMFU					
Establishment Number	605324731					

Comments/Other Observations (cont'd)

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

Establishment Information Establishment Name: Oakview Farm FMFU

Establishment Number #: 605324731

Sources						
Source Type:	Food	Source:	Triple L, Servant farms, FM venders			
Source Type:	Water	Source:	Rutherford co			
Source Type:		Source:				
Source Type:		Source:				
Source Type:		Source:				

Additional Comments

Verified payment and billing address on computer. As far as our department Is concerned, this establishment is approved to open and operate.

Will email relevant fact sheets and let operator know we are available to assist with any questions.