TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

		HANN H	A.C.													0.5	Market From		1 (1	(1
Establishment Name		me	Kona Ice of Wilson County Truck #1							Fermer's Market Food Unit O Permanent 凝Mobile												
Addre	65				173 Village C	Cir										O Tempor	ary O Se	asonal	▏╺┻╸╰			
City					Lebanon		Time in	30	3:4	2 A	١M	A	/ / PI	м ті	me o	ut 08:50: A	M A	M / PM				
Inspe	ction	n Da	rte		03/08/202	2 Establishment # 6																
Purpo	se	of In	spec		Routine	O Follow-up	O Complaint				elimin		-		Cor	nsultation/Other						
Risk (Cate	igon	y		3831	02	03			O 4				Fo	ollow-	up Required	O Yes	氨 No	Number of \$	Seats	0	
		R	isk			aration practices an rs in foodborne illne													trol and Preven			
		(Me	irk de				ILLNESS RI	SK F/	ACT	ors	AND	PU	BLIC	HEA	ЦТН	INTERVENTIO	NS			ngary.)	
IN-i	n ca	mpīi	ance		OUT-not in compliance	e NA=not applicable	NO=not observe	d COS	E)\$=cor	recte	d on-s	ite dur	ing ins	spection	R=repeat (he same code provis		R	WT
	N	оит	NA	NO	comp	Supervision		000	-		h	IN	OUT	NA	NO				/Temperature	000	~	
1 8	ĸ	0		-	Person in charge pro	esent, demonstrates knov	vledge, and	0	0	5	16	0	0	0		Contr Proper cooking ti		ety (TCS)	Foods	0	о	
			NA	NO		Employee Health	reporting	0				ŏ	ŏ	ŏ		Proper reheating	procedures	s for hot hol		00	ŏ	5
23		ŏ			Proper use of restric	od employee awareness; tion and exclusion	reporting	ō	ŏ	5		IN	ουτ	NA	NO	-		ete Markin alth Cont	rol			
	NC		NA	NO		d Hygionic Practicos						0	0			Proper cooling tir		P		0	0	_
4 (러	8				g. drinking, or tobacco us yes, nose, and mouth	e	00	8	5	19 20	0	0	8	0	Proper hot holdin Proper cold holdi				8	0	
	NC		NA	NO	Preventin Hands clean and pro	g Contamination by H	ands	0				0	0	0		Proper date mari	ing and dis	position		0	0	÷
-	_	ŏ	0	8	No bare hand conta	ct with ready-to-eat foods	or approved	0	ŏ	5	22	-	0	0		Time as a public				0	0	
8 8	K	0				properly supplied and acc	essible		0	2	23	ĭ N	OUT	NA X	NO	Consumer advise		d for raw an		0	0	
9 8		0	NA	NO	Food obtained from	Approved Source approved source		0	0	-		IN	OUT		NO	food	Suscept	ible Popul	ations	Ŭ	-	•
10 (5	0	0	2	Food received at pro	oper temperature		0	0	5	24	2	0	0		Pasteurized food				0	0	5
11 ¥	_	0 0	x	0	Required records av	on, safe, and unadulterat ailable: shell stock tags, p		0	0 0	Ĭ	Н	IN	OUT	NA	NO		Cher	nicals				
	N			NO	destruction Protect	ion from Contaminati	on	-		_	25	0	0	25		Food additives: a			used	0	ा	
13 8	3	0			Food separated and				0		26	<u>≋</u> ∎	0		·	Toxic substances				0	0	•
14 8 15 9	8	0 0	0	1		es: cleaned and sanitized f unsafe food, returned fo		0	0	5 2	27	N O	OUT	NA VEZ	NO	Compliance with			procedures process, and	0	0	5
15 🖇	4	•			served			U	•	-	21	•	0	~		HACCP plan				<u> </u>	~	0
				Goo	d Retail Practice	s are preventive me	asures to co	ntrol	the	intr	oduc	tion	of p	atho	gens	s, chemicals, a	nd physic	cal objec	ts into foods.			
				0	T=not in compliance		COS=corre	G00					ICE	5		8			me code provision)			
	_		_		Compl	iance Status	000-0010	COS			Ē					Comp	liance St	atus	ine oode promaron)	COS	R	WT
28					ed eggs used where r			0	0	1	4		υτ D ^F	ood a	nd no	infood-contact sur	and Equi		rly designed,	0	0	1
29					ice from approved s obtained for specializ	ource ed processing methods		00	0	2		-	0	011-0-0-0		and used					+	
	_	DUT			Food Tem	perature Control					40	-	_			g facilities, installe		ned, used, t	est strips	0	0	1
31		0	cont		oling methods used;	adequate equipment for to	emperature	0	0	2	43	_	∧ C UT	onioo	a-cor	ntact surfaces clea Phys	ical Facili	ties		0	0	1
32	_				properly cooked for thawing methods use			8	8	1	41					water available; a stalled; proper bac				8	8	2
34	_	_			eters provided and a			ŏ	ŏ	1	50	_	_			waste water prop				ŏ	ŏ	2
	-	DUT				dentification					51	_	_			es: properly constr				0	0	1
35	_	O	Food	d prop		container; required record	ts available	0	0	1	53		-		·	use properly dispo	-		ed	0	0	1
36	Ŧ		Inse	cts.rc	dents, and animals r	Food Contamination		0	0	2	5	-	-			ilities installed, ma entilation and lighti			ised	0	0	1
37	+	-				g food preparation, storag	n R dicolau	0	0	1	F	-	UT				istrative i			-		
38	_	_			cleanliness	g rood preparation, arong	le a aispier	0	0	-	54		-	Sumeri	t nern	nit posted	isciacite i			0	0	
39	1	Ó	Wipi	ng cic	ths; properly used an	id stored		0	0	1	54	_				inspection posted		-		0	0	0
40	_	OUT	_	hing f	ruits and vegetables Proper	Use of Utensils		0	0	1	H		-	_			iance Sta imokers P	rotection	Act	YES	NO	WT
41 42	_		_		nsils; properly stored		hallad	00	8	1	5					with TN Non-Smo ducts offered for s		tion Act		8	읭	0
43		0	Sing	le-use	single-service article	es; properly stored, used	andieu	0	0	1	55	5				oducts are sold, N		y complete	d	ŏ	ŏ	Ů
44	-				ed properly	and the second second	and the second		0	_			1.0.0			Barris		والمراجع والمراجع				
service	e est	tablis	shmer	nt perm	nit. Items identified as (ns within ten (10) days may constituting imminent health	hazards shall be	e corre	cted is	mmed	iately o	or ope	ration	ns shal	l ceas	e. You are required	to post the	food service	establishment permi	it in a c	onsp	icuous
report	T.C	C.A.	sectio	ns 68-	14-703, 68-14-706, 68-14	t in a conspicuous manner. -708, 68-14-709, 68-14-711, 6	8-14-715, 68-14-7	16, 4-5-	320.	e a mei	ang n	ogard		is repo	a by I		nat which the C	-onenasione	a william cam (10) day	, or the	Gate	or this
Tenton 03/08/2022 Paier Lan 03/08									8/2	2022												
Signature of Person In Charge Date Signature of Environmental Health Specialist Date																						
						Additional food safety in	formation can	be fo	und	on ou	r web	site,	http	c//tn.g	jov/h	ealth/article/eh-	foodservi	ce ****				
PH-22	67 (8	Rev.	6-15)		Free food safety tra Please c										inty health dep p for a class.	artment.				R	XA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Kona Ice of Wilson County Truck #1 Establishment Number #: 605301781

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. Smoking observed where smoking is prohibited by the Act.

Warewashing Info Maohine Name Sanitizer Type PPM Temperature (Fahrenheit)

Equipment l'emperature	
Description	Temperature (Fahrenheit)

Decoription	State of Food	Temperature (Fahrenheit

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Establishment Information

Establishment Name: Kona Ice of Wilson County Truck #1

Establishment Number : 605301781

Comments/Other Observations

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

2: (IN): PIC has knowledge of symptoms and diseases of foodborne illnesses.

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) No workers present during inspection.

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

10: (NO): No food received during inspection.

11: (IN) All food was in good, sound condition at time of inspection.

- 12: (NÁ) 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) No raw animal foods cooked during inspection. (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: (NA) Establishment does not hot hold TCS foods.

20: Ice and syrup on the truck

- 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:

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:
- 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: Kona Ice of Wilson County Truck #1 Establishment Number : 605301781

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Kona Ice of Wilson County Truck #1 Establishment Number # 605301781

Sources			
Source Type:	Water	Source:	City
Source Type:	Food	Source:	Kona Home City Ice
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

Additional Comments