

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Sonic Drive-In Remanent O Mobile Establishment Name Type of Establishment 713 S Mt. Juliet Rd O Temporary O Seasonal

> **Mount Juliet** Time in 10:56 AM AM / PM Time out 11:16: AM AM / PM

04/22/2021 Establishment # 605257363 Embargoed 0 Inspection Date ∰ Follow-up Purpose of Inspection Routine O Complaint O Preliminary O Consultation/Other

Number of Seats 12 Risk Category О3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	4=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observ	ed		C)\$=cc	mecte	ed on-si	ite d
					Compliance Status	COS	R	WT				
	IN	OUT	NA	NO	Supervision					IN	оит	N
1	盔	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	100	0	-
	IN	OUT	NA	NO	Employee Health		-		17	O	ō	1
2	300	0	-		Management and food employee awareness; reporting	0	0					
3	×	0			Proper use of restriction and exclusion	0	0	5		IN	OUT	N
	IN	OUT	NA	NO	Good Hygienic Practices				18	0	0	7
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	15	宴	0	7
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	l °	20	125	0	7
	IN	OUT	NA	NO	Preventing Contamination by Hands				21	1 28	0	7
6	黨	0		0	Hands clean and properly washed	0	0		22	0	0	8
7	800	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5	Ľ	_	_	_
•	-	_	_		alternate procedures followed	_	_			IN	OUT	N
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2	23	0	0	8
		OUT	NA	NO	Approved Source		_	_		_	_	-
9	黨	0			Food obtained from approved source	0	0			IN	OUT	N
10	0	0	0	×	Food received at proper temperature	0	0		24	0	0	9
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	Ľ	1		ď
12	0	0	320	0	Required records available: shell stock tags, parasite	0	0			IN	оит	N
	-	_	0-0	_	destruction	ŭ	_	\perp				
		OUT		NO	Protection from Contamination	-			25	_	0	3
13	2	0	0		Food separated and protected	0	0	4	26	-	0	
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	N
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	8

					Compliance Status	cos	R	WT
	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	٠
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	×	Proper cooling time and temperature	0	0	
19	-	0	0	0	Proper hot holding temperatures	0	0	
20		0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	*
22	0	0	×	0	Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory			
23	0	0	×		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	335		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25		0	3%		Food additives: approved and properly used	0	0	5
26	0.0	0			Toxic substances properly identified, stored, used	0	0	Ů
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

s to control the introduction of pathogens, chemicals, and physical objects into foods.

		0.00	G00		
		OUT=not in compliance COS=com Compliance Status	COS		_
	OUT		000	Ι.Κ.	
28	0		0		
29	18	Pasteurized eggs used where required Water and ice from approved source	_	0	_
30	18	Variance obtained for specialized processing methods	8	8	H
30	OUT	Food Temperature Control			-
	001		_	_	_
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	1
32	0	Plant food properly cooked for hot holding	0	0	г
33	0	Approved thawing methods used	0	0	г
34	0	Thermometers provided and accurate	0	0	Г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	885	Contamination prevented during food preparation, storage & display	0	0	
38	0	Personal cleanliness	0	0	Г
39	0	Wiping cloths; properly used and stored	0	0	П
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils	-		
41	0	In-use utensils; properly stored	0	0	г
42	100	Utensils, equipment and linens; properly stored, dried, handled	0	0	г
43	0	Single-use/single-service articles; properly stored, used	0	0	Т
44	10	Gloves used properly	0	0	_

rspect	ion	R-repeat (violation of the same code provision)		
		Compliance Status	COS	R	WT
	OUT	Utensiis and Equipment			
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	凝	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	2
49	0	Plumbing installed; proper backflow devices	0	0	2
50	0	Sewage and waste water properly disposed	0	0	2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	2%	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	Т		
55	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	
\Box		Compliance Status	YES	NO	WT
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request a (10) days of the date of the

04/22/2021

Signature of Environmental Health Specialist

04/22/2021

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

Date

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629) 6154445325 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information								
Establishment Name: Sonic Drive-In								
Establishment Number # 605257363								
NSPA Survey - To be completed if								
Age-restricted venue does not affirmatively resi twenty-one (21) years of age or older.	trict access to its buildings or	facilities at all times to	persons who are					
Age-restricted venue does not require each per	rson attempting to gain entry	to submit acceptable fo	orm of identification.					
"No Smoking" signs or the international "Non-S	moking" symbol are not cons	picuously posted at eve	ery entrance.					
Garage type doors in non-enclosed areas are r	not completely open.							
			-					
Tents or awnings with removable sides or vent	s in non-enclosed areas are r	not completely removed	or open.					
Smoke from non-enclosed areas is inflitrating in	nto areas where smoking is p	rohibited.						
Smoking observed where smoking is prohibited	d by the Act.							
Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fat	renhelt)				
Equipment Temperature			I					
Description			Temperature (Fah	renheit)				
Food Temperature								
Description		State of Food	Temperature (Fah	renhelt)				
			1					

served Violations	
al# 4 peated# 0	
peated # 0	
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information	
Establishment Name: Sonic Drive-In	
Establishment Number: 605257363	
Comments/Other Observations	
1:	
1: 2: 3: 4: 5:	
3:	
4:	
5:	
7: Item corrected. Employees wearing gloves while preparing food	
8: Item corrected. Paper towels and soap at hand sinks	
9: 10:	
10:	
11. 12.	
12. 13·	
1Δ .	
11: 12: 13: 14: 15:	
16: 17: 18:	
17:	
18:	
19:	
20:	
21:	
[22:	
[23:	
19: 20: 21: 22: 23: 24: 25:	
25.	
20. 27.	
27: 57:	
D7.	

Additional Comments

See last page for additional comments.

^{***}See page at the end of this document for any violations that could not be displayed in this space.

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

stablishment Name: Sonic Drive-In stablishment Number: 605257363	Establishment Information	
Comments/Other Observations (cont'd) Idditional Comments (cont'd)	Establishment Name: Sonic Drive-In	
additional Comments (cont'd)	Establishment Number: 605257363	
additional Comments (cont'd)		
additional Comments (cont'd)	Comments/Other Observations (cont'd)	
	Additional Comments (contid)	
See last page for additional comments.		
	See last page for additional comments.	

Establishment Information	
Establishment Name: Sonic Drive-In	
Establishment Number #: 605257363	
Sources	
Sources	
Source Type:	Source:
Additional Comments	
See routine inspection for comments	