

Establishment Name

Inspection Date

Address

City

TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

O Permanent MMobile

O Temporary O Seasonal

SCORE

Time in 11:55; AM AM / PM Time out 12:20; PM AM / PM

04/11/2024 Establishment # 605324418 Embargoed 0

O Follow-up Purpose of Inspection **K**Routine O Complaint O Preliminary O Consultation/Other

Number of Seats 0 Risk Category О3 Follow-up Required O Yes 疑 No

Type of Establishment

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	e in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		0	05=c
					Compliance Status	cos	R	WT] [
	IN	OUT	NA	NO	Supervision				П
1	盔	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5] -
	IN	OUT	NA	NO	Employee Health				10
2	ЭK	0			Management and food employee awareness; reporting	0	0		1 [
3	×	0			Proper use of restriction and exclusion	0	0	5	ш
	IN	OUT	NA	NO	Good Hygienic Practices				1 17
4	0	0		X	Proper eating, tasting, drinking, or tobacco use	0	0	5	113
5	0	0		*	No discharge from eyes, nose, and mouth	0	0	l °	2 2
		OUT	NA	NO	Proventing Contamination by Hands] [2
6	100	0		0	Hands clean and properly washed	0	0] [2
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	ľ
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2	1 [2
	IN	OUT	NA	NO	Approved Source				ľ
9	200	0			Food obtained from approved source	0	0		П
10	0	0	0	×	Food received at proper temperature	0	0	1	1 2
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	Ιľ
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0		
		OUT		NO	Protection from Contamination				2 2
13	×	0	0		Food separated and protected	0	0	4] [2
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5] [
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	2

L.A.'s Bar BQ Smoke and Grill Mobile

1403 Rocky Ln

Murfreesboro

					Compliance Status	COS	R	WT
	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	寒	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	,
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	涎	Proper cooling time and temperature	0	0	
19	0	0	0	文	Proper hot holding temperatures	0	0	
20	凝	0	0	L.	Proper cold holding temperatures	0	0	5
21	0	0	0	200	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	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT	NA	NO	Chemicals			
25	0	0	3%		Food additives: approved and properly used	0	0	5
26	黨	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 pathoge ns, chemicals, and physical objects into foods.

L PRACTICES

			GOO	D R	ŦΑ
		OUT=not in compliance COS=com			
		Compliance Status	cos	R	WT
	OUT	Caro i con amo i i mon			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	2
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	2
32	0	Plant food properly cooked for hot holding	0	0	1
33	0	Approved thawing methods used	0	0	1
34	0	Thermometers provided and accurate	0	0	1
	OUT	Food Identification			
35	0	Food properly labeled; original container, required records available	0	0	1
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	2
37	0	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	1
39	0	Wiping cloths; properly used and stored	0	0	1
40	0	Washing fruits and vegetables	0	0	1
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	1
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1
43	0	Single-use/single-service articles; properly stored, used	0	0	1
44		Gloves used properly	0	0	1

pecti	on	R-repeat (violation of the same code provision		_	
		Compliance Status	cos	R	W
	OUT	Utensils and Equipment	Щ.	_	_
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	0	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	-
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	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	-
54	0	Adequate ventilation and lighting; designated areas used	0	0	'
	OUT	Administrative Items			
55	0	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 3%	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	0	

conspicuous manner. You have the right to request a h 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. n (10) days of the date of the

04/11/2024

Date Signature of Environmental Health Specialist

04/11/2024 Date

**** 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.) 6158987889 Please call (to sign-up for a class.

RDA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information				
	moke and Grill Mobile	<u> </u>		
Establishment Number #: 605324418				
003324410	,			
NSPA Survey - To be completed if	#57 is "No"			
Age-restricted venue does not affirmatively res		facilities at all times to p	ersons who are	
twenty-one (21) years of age or older. Age-restricted venue does not require each pe	rson attempting to gain entry	to submit acceptable for	m of identification.	
"No Smoking" signs or the international "Non-S	Smoking" symbol are not cons	picuously posted at ever	y entrance.	_
Garage type doors in non-enclosed areas are	not completely open.			_
Tents or awnings with removable sides or vent	ts in non-enclosed areas are r	not completely removed o	or open.	<u> </u>
Smoke from non-enclosed areas is infiltrating i	into areas where smoking is p	rohibited.		-
Smoking observed where smoking is prohibite	d by the Act.			
Warewashing Info				
Machine Name	Sanitizer Type	PPM	Temperature (Fah	renhelt)
Equipment Temperature				
Description			Temperature (Fah	renheit)
Description			Temperature (Fah	renheit)
			Temperature (Fah	renhelt)
Food Temperature				
		State of Food	Temperature (Fah	
Food Temperature		State of Food		
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: L.A.'s Bar BQ Smoke and Grill Mobile

Establishment Number: 605324418

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Pic has knowledge
- 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 tasks performed requiring it but discussed good hand washing practices.
- 7: No tasks performed requiring them but discussed examples of scenarious where they would be required.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: See Source
- 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: No cooking observed during inspection
- 17: (NO) No TCS foods reheated during inspection.
- 18: Observed no tcs foods in cooling process during inspection
- 19: (NO) TCS food is not being held hot during inspection.
- 20: No tcs foods held during inspection.
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 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:

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.

Establishment Name: L.A.'s Bar BQ Smoke and Grill Mobile	
Establishment Number: 605324418	
Commants/Other Observations (cont'd)	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Inform	nation	•		
Establishment Name: L.	A.'s Bar BQ Smoke ar	d Grill Mobile		
Establishment Number #:	605324418			
Sources				_
Source Type:	Food	Source:	Gfs, sams walmart	
Source Type:	Water	Source:	City	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comme	nts			
Ok to open. Verified	payment was made a	nd received.		