



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

# 71

Establishment Name Clays Catering Type of Establishment ☐ Farmer's Market Food Unit ☐ Permanent ☒ Mobile  
Address 199 Cedar Avenue ☐ Temporary ☐ Seasonal  
City Memphis Time in 10:35 AM AM / PM Time out 11:25 AM AM / PM  
Inspection Date 07/14/2022 Establishment # 605304115 Embargoed 13  
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other  
Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☒ Yes ☐ No Number of Seats \_\_\_\_\_

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.

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance					OUT=not in compliance					NA=not applicable					NO=not observed					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)								
Compliance Status										COS			R		WT		Compliance Status										COS			R		WT	
	IN	OUT	NA	NO	Supervision											IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods													
1	<input type="radio"/>	<input checked="" type="radio"/>			Person in charge present, demonstrates knowledge, and performs duties					<input type="radio"/>	<input type="radio"/>	5		16	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Proper cooking time and temperatures					<input type="radio"/>	<input type="radio"/>	5							
	IN	OUT	NA	NO	Employee Health										17	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper reheating procedures for hot holding					<input type="radio"/>	<input type="radio"/>							
2	<input type="radio"/>	<input checked="" type="radio"/>			Management and food employee awareness, reporting					<input type="radio"/>	<input type="radio"/>	5			IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control														
3	<input checked="" type="radio"/>	<input type="radio"/>			Proper use of restriction and exclusion					<input type="radio"/>	<input type="radio"/>			18	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper cooling time and temperature					<input type="radio"/>	<input type="radio"/>								
	IN	OUT	NA	NO	Good Hygienic Practices										19	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Proper hot holding temperatures					<input type="radio"/>	<input type="radio"/>							
4	<input checked="" type="radio"/>	<input type="radio"/>			<input type="radio"/>	Proper eating, tasting, drinking, or tobacco use				<input type="radio"/>	<input type="radio"/>	5		20	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper cold holding temperatures					<input type="radio"/>	<input type="radio"/>	5								
5	<input checked="" type="radio"/>	<input type="radio"/>			<input type="radio"/>	No discharge from eyes, nose, and mouth				<input type="radio"/>	<input type="radio"/>			21	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper date marking and disposition					<input type="radio"/>	<input type="radio"/>								
	IN	OUT	NA	NO	Preventing Contamination by Hands										22	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Time as a public health control: procedures and records					<input type="radio"/>	<input type="radio"/>							
6	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	Hands clean and properly washed					<input type="radio"/>	<input type="radio"/>	5			IN	OUT	NA	NO	Consumer Advisory														
7	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed					<input type="radio"/>	<input type="radio"/>			23	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Consumer advisory provided for raw and undercooked food					<input type="radio"/>	<input type="radio"/>	4							
8	<input checked="" type="radio"/>	<input type="radio"/>			Handwashing sinks properly supplied and accessible					<input type="radio"/>	<input type="radio"/>	2			IN	OUT	NA	NO	Highly Susceptible Populations														
	IN	OUT	NA	NO	Approved Source										24	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Pasteurized foods used; prohibited foods not offered					<input type="radio"/>	<input type="radio"/>	5						
9	<input checked="" type="radio"/>	<input type="radio"/>			Food obtained from approved source					<input type="radio"/>	<input type="radio"/>				IN	OUT	NA	NO	Chemicals														
10	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Food received at proper temperature					<input type="radio"/>	<input type="radio"/>	5		25	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Food additives: approved and properly used					<input type="radio"/>	<input type="radio"/>	5							
11	<input type="radio"/>	<input checked="" type="radio"/>			Food in good condition, safe, and unadulterated					<input type="radio"/>	<input type="radio"/>			26	<input checked="" type="radio"/>	<input type="radio"/>			Toxic substances properly identified, stored, used					<input type="radio"/>	<input type="radio"/>								
12	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Required records available: shell stock tags, parasite destruction					<input type="radio"/>	<input type="radio"/>				IN	OUT	NA	NO	Conformance with Approved Procedures														
	IN	OUT	NA	NO	Protection from Contamination										27	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Compliance with variance, specialized process, and HACCP plan					<input type="radio"/>	<input type="radio"/>	5						
13	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Food separated and protected					<input type="radio"/>	<input type="radio"/>	4																					
14	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Food-contact surfaces: cleaned and sanitized					<input type="radio"/>	<input type="radio"/>	5																					
15	<input checked="" type="radio"/>	<input type="radio"/>			Proper disposition of unsafe food, returned food not re-served					<input type="radio"/>	<input type="radio"/>	2																					

**TENNESSEE DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD INSPECTION DATA**



<b>Establishment Information</b>	
Establishment Name:	Clays Catering
Establishment Number #:	605304115

<b>NSPA Survey – To be completed if #57 is "No"</b>	
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.	
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	
Smoking observed where smoking is prohibited by the Act.	

<b>Warewashing Info</b>			
<b>Machine Name</b>	<b>Sanitizer Type</b>	<b>PPM</b>	<b>Temperature ( Fahrenheit)</b>
3 comp. Sink	Bleach		

<b>Equipment Temperature</b>	
<b>Description</b>	<b>Temperature ( Fahrenheit)</b>
Freezer	22
Cooler	40
Cooler	50

<b>Food Temperature</b>		
<b>Description</b>	<b>State of Food</b>	<b>Temperature ( Fahrenheit)</b>
Yellow Rice	Cold Holding	52
Cooked Smoked Chicken Wings	Cold Holding	49
Grilled Cabbage	Cold Holding	52

## Observed Violations

Total # 14

Repeated # 0

- 1: Cooler found at 50 F with inside leftovers at 49F-52F. Food not labeled.
- 2: No employee illness policy present.
- 11: Food stored in unsafe temperature.
- 20: Food held outside safe temperatures range. See food temps
- 21: Several food containers in cooler not date marked.
- 34: No thermometer in freezer chest.
- 35:
- 45: Rusty equipment throughout mobile unit.
- 46: No sanitizing test strips.
- 47: Equipment exterior is dirty throughout mobile unit.
- 50: Water leakage from mobile unit to ground. I am unable to determine where it is coming from.
- 53: Ceiling is not smooth. Walls are dirty and damage.
- 54: Ventilation is missing parts.
- 56: No recent inspection posted.

TENNESSEE DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD INSPECTION DATA



**Establishment Information**

Establishment Name: Clays Catering

Establishment Number : 605304115

**Comments/Other Observations**

- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.  
4: (IN) Employee isn't drinking, eating, or using tobacco in a food preparation area.  
5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.  
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: Restaurant Depot  
10: (NO): No food received during 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) No raw animal foods cooked during inspection.  
17: (NA) No TCS foods reheated for hot holding.  
18: (N.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.  
19: (NO) TCS food is not being held hot during inspection.  
22: (NA) No food held under time as a public health control.  
23: On menu  
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.***

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

**Establishment Information**

Establishment Name: Clays Catering

Establishment Number : 605304115

**Comments/Other Observations (cont'd)****Additional Comments (cont'd)*****See last page for additional comments.***



Establishment Number #:	605304115
-------------------------	-----------

Source Type:	Source:
--------------	---------

### ***Additional Comments***