



TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
71

Establishment Name: Clays Catering
Address: 199 Cedar Avenue
City: Memphis
Inspection Date: 07/14/2022
Time in: 10:35 AM
Time out: 11:25 AM
Risk Category: 03
Purpose of Inspection: Routine

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.)

Table with 2 main columns: Supervision, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, Protection from Contamination, Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods, Cooling and Holding, Date Marking, and Time as a Public Health Control, Consumer Advisory, Highly Susceptible Populations, Chemicals, Conformance with Approved Procedures.

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES

Table with 2 main columns: Safe Food and Water, Food Temperature Control, Food Identification, Prevention of Food Contamination, Proper Use of Utensils, Utensils and Equipment, Physical Facilities, Administrative Items, Compliance Status, Non-Smokers Protection Act.

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 service establishment permit.

Signature of Person In Charge: [Signature] Date: 07/14/2022
Signature of Environmental Health Specialist: [Signature] Date: 07/14/2022

TENNESSEE DEPARTMENT OF HEALTH
 DIVISION OF ENVIRONMENTAL HEALTH
 FOOD INSPECTION DATA



Establishment Information

Establishment Name: Clays Catering
 Establishment Number #: 605304115

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.	
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	
Smoking observed where smoking is prohibited by the Act.	

Warewashing Info

Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
3 comp. Sink	Bleach		

Equipment Temperature

Description	Temperature (Fahrenheit)
Freezer	22
Cooler	40
Cooler	50

Food Temperature

Description	State of Food	Temperature (Fahrenheit)
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.



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 Information

Establishment Name: Clays Catering

Establishment Number #: 605304115

Sources

Source Type: Food Source: Restaurant Depot

Source Type: Water Source: City

Source Type: Source:

Source Type: Source:

Source Type: Source:

Additional Comments