

Address

Risk Category

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Clays Catering O Permanent MMobile Establishment Name Type of Establishment 199 Cedar Avenue O Temporary O Seasonal

07/14/2022 Establishment # 605304115 Inspection Date

Memphis

Embargoed 13

Time in 10:35 AM AM / PM Time out 11:25: AM AM / PM

Follow-up Required

O Follow-up Purpose of Inspection **K**Routine O Complaint O Preliminary O Consultation/Other О3

ase Control and Prevention

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

itus (IH, OUT, HA, HO) for ea

12	IN-in compliance			OUT=not in compliance NA=not applicable NO=not observ	ed		0	
					Compliance Status	COS	R	WT
	IN	OUT	NA	NO	Supervision			
1	0	異			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	0	100			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	*	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	0
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	0	0		3%	Hands clean and properly washed	0	0	
7	0	0	0	×	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×				Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	0	×			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN		NA	NO	Protection from Contamination			
13	黛	0	0		Food separated and protected	0	0	4
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

					Compliance Status	COS	R	WT
	IN	OUT	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	3%	0	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	X	0	Proper cooling time and temperature	0	0	
19	0	0	0	寒	Proper hot holding temperatures	0	0	
20	0	- X	0		Proper cold holding temperatures	0	0	5
21	0	250	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	×		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	菜	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

级 Yes O No

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

. PRACTICES

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	ľ
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	Ľ
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	:
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	1
34	X	Thermometers provided and accurate	0	0	г
	OUT	Food Identification			
35	×	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	0	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	Г
39	0	Wiping cloths; properly used and stored	0	0	Ī
40	0	Washing fruits and vegetables	0	0	Ţ
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	Ī
44	10	Gloves used properly	0	0	

pecti		R-repeat (violation of the same code provision) Compliance Status	cos	R	W
	OUT	Utensils and Equipment	_		
45	M	Food and norifood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	题	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	黨	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities	_		
48	0	Hot and cold water available; adequate pressure	ा	0	7
49	0	Plumbing installed; proper backflow devices	0	0	- 2
50	100	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	3%	Physical facilities installed, maintained, and clean	0	0	1
54	羅	Adequate ventilation and lighting; designated areas used	0	0	•
	OUT	Administrative Items			
55	0	Current permit posted	ा	0	T.
56	张	Most recent inspection posted	0	0	`
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	١
59		If tobacco products are sold, NSPA survey completed	- 0	0	

er and post the most recent inspection report in a conspicuous manner. You have the right to request a h-t. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. ten (10) days of the date of th

07/14/2022 07/14/2022 Signature of Person In Charge 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. PH-2267 (Rev. 6-15) RDA 629) 9012229200 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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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 (Fahrenhelt)				
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 # ()
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 throughput 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.
30. No recent inspection posted.

[&]quot;"See page at the end of this document for any violations that could not be displayed in this space.

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:

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.

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Establishment Information

Establishment Information								
Establishment Name: Cla	ys 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 Commen	ts							
				-				
				-				
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