



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



**Establishment Information**

Establishment Name: Moe's Southwest Grill  
Establishment Number #: 605193625

**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)

**Equipment Temperature**

Description	Temperature ( Fahrenheit)

**Food Temperature**

Description	State of Food	Temperature ( Fahrenheit)

**Observed Violations****Total #** 5**Repeated #** 0

41:

45:

47:

49:

53:

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**Comments/Other Observations**

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2:

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13:

14:

15:

16:

17:

18:

19: Rice holding at 135°F-145°F.

20: Walkin holding food between 39°F and 41°F. Ice also available.

21:

22:

23:

24:

25:

26:

27:

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.

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

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**Sources**

Source Type:	Source:
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**Additional Comments**