

Establishment Name

Inspection Date

Risk Category

Address

# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ES

|   | DE  | FA  | М.  | MEM  | UF  | HEA  |      |        |  |
|---|-----|-----|-----|------|-----|------|------|--------|--|
| 3 | ΓΑΙ | BLI | SHI | MENT | INS | PECT | TION | REPORT |  |

O Farmer's Market Food Unit

Type of Establishment

Permanent O Mobile O Temporary O Seasonal

Chattanooga City

Time in 11:35; AM AM / PM Time out 12:05; PM AM / PM

07/22/2021 Establishment # 605064485

Embargoed 0 O Preliminary O Consultation/Other

Purpose of Inspection **K**Routine

1101 Hixson Pike, Suite H

O Follow-up

Las Margaritas

O Complaint О3

Follow-up Required

O Yes 疑 No

Number of Seats 101

SCORE

ase Control and Prevention

#### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

| 12 | IN-in compliance OUT-not in compliance NA-not applicable NO-not observed |     |    |    |   |     |   | C  |
|----|--|-----|----|----|---|-----|---|----|
|    |  |     |    |    | Compliance Status   | COS | R | WT |
|    | IN   | OUT | NA | NO | Supervision   |     |   |    |
| 1  | 氮  | 0   |    |    | Person in charge present, demonstrates knowledge, and<br>performs duties                  | 0   | 0 | 5  |
|    | IN OUT NA NO Employee Health   |     |    |    |   |     |   |    |
| 2  | -MC  | 0   |    |    | Management and food employee awareness; reporting   |     | 0 |    |
| 3  | 寒  | 0   |    |    | Proper use of restriction and exclusion   | 0   | 0 | 5  |
|    | IN   | OUT | NA | NO | Good Hygienic Practices   |     |   |    |
| 4  | X  | 0   |    | 0  | Proper eating, tasting, drinking, or tobacco use  | 0   | 0 |    |
| 5  | *  | 0   |    | 0  | No discharge from eyes, nose, and mouth   |     | 0 |    |
|    | IN   | OUT | NA |    | Proventing Contamination by Hands   |     |   |    |
| 6  | 100  | 0   |    | 0  | Hands clean and properly washed   |     | 0 |    |
| 7  | 왮  | 0   | 0  | 0  | No bare hand contact with ready-to-eat foods or approved<br>alternate procedures followed |     | 0 | 5  |
| 8  | ×  |     |    |    | Handwashing sinks properly supplied and accessible  | 0   | 0 | 2  |
|    | _  | 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<br>destruction                     | 0   | 0 |    |
|    | IN   |     |    |    |   |     |   |    |
| 13 | Ŕ  | 0   | 0  |    | Food separated and protected  | 0   | 0 | 4  |
| 14 | ×  | 0   | 0  |    | Food-contact surfaces: cleaned and sanitized  |     | 0 | 5  |
| 15 | ×  | 0   |    |    | Proper disposition of unsafe food, returned food not re-<br>served                        |     | 0 | 2  |

|    | Compliance Status   |     |    |     |   |   |   | WT |
|----|---|-----|----|-----|---|---|---|----|
|    | IN OUT NA NO Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods |     |    |     |   |   |   |    |
| 16 | 0   | 0   | 0  | 黨   | Proper cooking time and temperatures                                      | 0 | 0 | 5  |
| 17 | 0   | 0   | 0  | 300 | Proper reheating procedures for hot holding                               | 0 | 0 | ۰  |
|    | IN  | оит | NA | NO  | cooling and Holding, Date Marking, and Time as<br>a Public Health Control |   |   |    |
| 18 | 0   | 0   | 0  | 涎   | Proper cooling time and temperature                                       | 0 | 0 |    |
| 19 | ×   | 0   | 0  | 0   | Proper hot holding temperatures   | 0 | 0 |    |
| 20 | 243   | 0   | 0  |     | Proper cold holding temperatures  | 0 | 0 | 5  |
| 21 | *   | 0   | 0  | 0   | Proper date marking and disposition                                       | 0 | 0 | 1  |
| 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<br>food                | 0 | 0 | 4  |
|    | IN  | OUT | NA | NO  | Highly Susceptible Populations  |   |   |    |
| 24 | 0   | 0   | M  |     | Pasteurized foods used; prohibited foods not offered                      | 0 | 0 | 5  |
|    | IN  | оит | 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 | *  |
|    | IN  | OUT | NA | NO  | Conformance with Approved Procedures                                      |   |   |    |
| 27 | 0   | 0   | ×  |     | Compliance with variance, specialized process, and<br>HACCP plan          | 0 | 0 | 5  |

### s, chemicals, and physical objects into foods.

L 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 | 1  |
| 29 | 0   | Water and ice from approved source   | 0      | 0 | -  |
| 30 | 0   | Variance obtained for specialized processing methods                       | 0      | 0 | ١, |
|    | OUT | Food Temperature Control   |        |   |    |
| 31 | 0   | Proper cooling methods used; adequate equipment for temperature<br>control | 0      | 0 |    |
| 32 | 0   | Plant food properly cooked for hot holding                                 | 0      | 0 | Г  |
| 33 | 0   | Approved thawing methods used  | 0      | 0 |    |
| 34 | 0   | Thermometers provided and accurate   | 0      | 0 | Т  |
|    | OUT | Food Identification  |        |   |    |
| 35 | 0   | 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 |    |
| 38 | 0   | Personal cleanliness   | 0      | 0 | Г  |
| 39 | 0   | Wiping cloths; properly used and stored                                    | 0      | 0 |    |
| 40 | 0   | Washing fruits and vegetables  | 0      | 0 |    |
|    | OUT | Proper Use of Utensils   | $\top$ |   |    |
| 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 | Г  |
| 44 | 10  | Gloves used properly   | 0      | 0 |    |

200

Signature of Person In Charge

| pecti | on  | R-repeat (violation of the same code provision   |     | _  | _   |
|-------|-----|--|-----|----|-----|
|       |     | Compliance Status  | COS | R  | 8   |
|       | OUT | Utensils and Equipment   |     | _  | _   |
| 45    | 0   | Food and nonfood-contact surfaces cleanable, properly designed,<br>constructed, and used | 0   | 0  | Ľ   |
| 46    | 0   | Warewashing facilities, installed, maintained, used, test strips                         | 0   | 0  |     |
| 47    | 黨   | Nonfood-contact surfaces clean   | 0   | 0  |     |
|       | OUT | Physical Facilities  |     |    |     |
| 48    |     | Hot and cold water available; adequate pressure  | 0   | 0  |     |
| 49    | 0   | Plumbing installed; proper backflow devices  | 0   | 0  |     |
| 50    | 0   | Sewage and waste water properly disposed   | 0   | 0  | - : |
| 51    | 0   | 0  | 0   |    |     |
| 52    | 0   | Garbage/refuse properly disposed; facilities maintained                                  | 0   | 0  |     |
| 53    | 3%  | 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 | ٧   |
|       |     | 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  |     |

and post the most recent inspection report in a conspicuous manner. You have the right to request a he 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. n ten (10) days of the date of th

07/22/2021

Date Signature of Environmental Health Specialist

07/22/2021

\*\*\*\* 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 ) 4232098110 Please call ( to sign-up for a class.

Date

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



#### Establishment Information

Establishment Name: Las Margaritas
Establishment Number #: 605064485

#### 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) |  |  |  |
| Sanitizer bucket | Chlorine       | 80  |                           |  |  |  |
| Triple sink      | Chlorine       | 80  |                           |  |  |  |
| Dish machine     |                | 80  |                           |  |  |  |

| Equipment Temperature |                           |  |  |  |
|-----------------------|---------------------------|--|--|--|
| Description           | Temperature ( Fahrenheit) |  |  |  |
|                       |                           |  |  |  |
|                       |                           |  |  |  |
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| Food Temperature |               |                           |
|------------------|---------------|---------------------------|
| Description      | State of Food | Temperature ( Fahrenheit) |
| Raw chicken      | Cold Holding  | 37                        |
| Raw beef         | Cold Holding  | 38                        |
| Guacamole        | Cold Holding  | 40                        |
| Sliced tomatoes  | Cold Holding  | 37                        |
| Raw fish         | Cold Holding  | 37                        |
| Shredded lettuce | Cold Holding  | 38                        |
| Rice             | Hot Holding   | 165                       |
| Shredded chicken | Hot Holding   | 167                       |
| Queso            | Hot Holding   | 156                       |
| Queso            | Cold Holding  | 40                        |
|                  |               |                           |
|                  |               |                           |
|                  |               |                           |
|                  |               |                           |

| Observed Violations  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
| Total # 2  |  |  |  |  |  |  |  |
| Repeated # 0   |  |  |  |  |  |  |  |
| 47: Shelving dirty in walk in cooler.  |  |  |  |  |  |  |  |
| 53: Floor tiles in poor repair in kitchen.   |  |  |  |  |  |  |  |
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## TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



### Establishment Information

Establishment Name: Las Margaritas Establishment Number: 605064485

## Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: (IN): An employee health policy is available.
- 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: Proper handwashing observed.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: Food obtained from approved 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) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: Proper hot holding temperatures observed.
- 20: Proper cold holding temperatures observed.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NA) No food held under time as a public health control.
- 23: Consumer advisory located.
- 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.

<sup>\*\*\*</sup>See page at the end of this document for any violations that could not be displayed in this space.

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|   | Establishment Information              |  |
|---|--|--|
| Establishment Number:   605064485  Comments/Other Observations (cont'd)  Additional Comments (cont'd) |  |  |
| Additional Comments (cont'd)  | Establishment Number: 605064485        |  |
| Additional Comments (cont'd)  |  |  |
| Additional Comments (cont'd)  | Comments/Other Observations (cont'd)   |  |
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| Establishment Information                   |               |         |                                |  |  |  |  |
|---|---------------|---------|--------------------------------|--|--|--|--|
| Establishment Name: Establishment Number #: | as Margaritas |         |                                |  |  |  |  |
| Establishment (volitibe) #.                 | 605064485     |         |                                |  |  |  |  |
| Sources                                     |               |         |                                |  |  |  |  |
| Source Type:                                | Water         | Source: | Public                         |  |  |  |  |
| Source Type:                                | Food          | Source: | Atlantic, Tolteca Foods, Perez |  |  |  |  |
| Source Type:                                |               | Source: |                                |  |  |  |  |
| Source Type:                                |               | Source: |                                |  |  |  |  |
| Source Type:                                |               | Source: |                                |  |  |  |  |
| Additional Comme                            | ents          |         |                                |  |  |  |  |
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