TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Sec.		744	and the second																			
Est	abisi	hmen	t Nar		Mt. Pleas	sant (Grille										- to b E		O Farmer's Market Food Unit		ł	
Address City			100 S. Main St. O Temporary O Seasonal										L									
			Mount Pleasant Time in 10:36 AM AM / PM Time out 11:35: AM AM / PM																			
		on Da		i	04/15/2	202	4 Eats	hiskeent			_				-	<u>0</u>		110 04				
		of In			Routine		O Follow			mplaint		_	O Pro			_		Cor	nsultation/Other			
		tegor			O 1		107 0 101 1072	a.ob	03	- point			04	20011001	ary				up Required O Yes 🕱 No Number of S	Cante	14	.8
rus	K GB			facto	ors are food	prepa	ration		s and emp			vior	s mo				repo	rted	I to the Centers for Disease Control and Preven	tion	_	
				as c	ontributing	factor													control measures to prevent illness or injury.			
		(11	ırk de	algnat	ed compliance	e status (INTERVENTIONS ach liom as applicable. Deduct points for category or subcat	egory.		
12	≹=in c	ompii	ance		OUT=not in cor		NA=nx ance S		e NO-not	t observed	i COS	e I		\$=co	recte	t on-si	ite duri	ng ins	pection R=repeat (violation of the same code provis Compliance Status	ion) COS	PT	WT
	IN	OUT	NA	NO		sompti	Super			Ť		~ 1		h	IN	our	NA	NO	Cooking and Reheating of Time/Temperature	000	~1	
1	巖	0			Person in cha		sent, der	nonstrates	knowledge,	and	0	0	5	16	1	0	0		Control For Safety (TCS) Foods Proper cooking time and temperatures		~	
		OUT	NA	NO	performs dution	E		e Health						17	8	ŏ	ŏ		Proper reheating procedures for hot holding	00	ŏ	5
23	X				Management Proper use of				hess; reportir	ng	0	0	5		IN	оυт	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
	_	_	NA	NO				ic Practic	C 45	-		-			0	0	0	×	Proper cooling time and temperature	0		
4	道道	00			Proper eating No discharge					=	0	8	5	19	No.	0	0		Proper hot holding temperatures Proper cold holding temperatures	8		-
6			NA	NO		venting	Contar	mination	by Hands		0			21	X	ŏ	0		Proper date marking and disposition	0	0	5
7	20 20		0	0	No bare hand	d contact	t with rea	edy-to-eat f	loods or appr		0	0	5	22	0	0	×	-	Time as a public health control: procedures and records	0	٥	
8	25	0			alternate proc Handwashing	g sinks p	roperly s	supplied an		-		0	2	23	N	OUT	NA		Consumer Advisory Consumer advisory provided for raw and undercooked	0	0	4
9	IN 寫		NA	NO	Food obtained			d Source source			0	0		-	∽ IN	OUT		NO	food Highly Susceptible Populations	-	-	
	0		0		Food received Food in good				Iterated	=	00	00	5	24	0	0	×		Pasteurized foods used; prohibited foods not offered	0	0	5
12		ō	X		Required reco destruction					, – †	ō	ō			IN	OUT	NA	NO	Chemicais	—		
43				NO	P			Contam	ination	=	~			25	0	0	X		Food additives: approved and properly used	0	<u> </u>	5
14	*	0	0		Food separat Food-contact			-	itized	\rightarrow		0		20	N N	O OUT	NA	NO	Toxic substances properly identified, stored, used Conformance with Approved Procedures	-	0	
15	篾	0			Proper dispos served	sition of	unsafe fo	od, return	ed food not n	·e-	0	0	2	27	0	0	8		Compliance with variance, specialized process, and HACCP plan	0	0	5
_		_	_	Gaa	d Rotall Re					-	atrol	-	Inte	-	tion	-	atho		, chemicals, and physical objects into foods.	_		
						ICTIC I	, are pr		/				TAU			<u> </u>		gene	, chemicala, and physical objects into loods.			
				00	not in complia		ance St	-	cc	0\$=correct		i-site (śuring			104-50			R-repeat (violation of the same code provision)	COS		WT
	_	OUT			5	Safe Fo	od and			Ť					0	UT			Compliance Status Utensils and Equipment	008	~ 1	WI
	28 29				d eggs used v ice from appr						0	8	2	4	5 (nfood-contact surfaces cleanable, properly designed, and used	0	0	1
:	30	O OUT		ance o	btained for sp			sing metho Control			0	0	1	4	6 (o v	Varew	ashin	g facilities, installed, maintained, used, test strips	0	0	1
	31	0			ling methods					ture	0	0	2	4	_	_	lonfoo	d-con	tact surfaces clean	0	0	1
-	32	0	cont Plan		properly cook	ed for h	ot holdin	g		\rightarrow	0	0	1	4		UT D H	lot and	l cold	Physical Facilities water available; adequate pressure	0	0	2
	33 34				thawing metho ters provided					=	0	0	1	4	_	_			talled; proper backflow devices waste water properly disposed	0	_	2
		OUT					lentifica	ation				-	<u> </u>	5		-			s: properly constructed, supplied, cleaned	ŏ		1
3	35		Foo	d prop	erly labeled; o	-				able	0	0	1	5		- I	-		use properly disposed; facilities maintained	0	٥	1
	36	OUT	Inse	te ro	Prevent dents, and ani			ortamina	tion		0	0	2	5	_	_			lities installed, maintained, and clean ntilation and lighting; designated areas used	0	0	1
		-										-+	_	F	+	UT		ne ve		-	<u> </u>	<u> </u>
	37 38				tion prevented	a aunng	100d pre	paration, s	korage & dis	piay	0	0	1	5	_		himped	norm	Administrative items nit posted	0		
-	39	Ó	Wipi	ng clo	ths; properly u		stored			$ \rightarrow $	0	0	1	5	-				inspection posted	0	0	0
-	10	O OUT	_	hing fr	uits and vege Pr		se of U	tensils		\rightarrow	0	0	1	\vdash					Compliance Status Non-Smokers Protection Act	YES	NO	WT
_	11				nsils; properly	stored			ad handlad	=		8		5					with TN Non-Smoker Protection Act ducts offered for sale	8		0
4	13	0	Sing	le-use	quipment and /single-service ed properly					$ \rightarrow $	0	š	1	5	9				oducts are sold, NSPA survey completed	ŏ		Ť
			-			stor item	e within t	an (40) days	e mar result is		-	-	_			hilaba	nent n	-	Repeated violation of an identical risk factor may result in revor	entire .	al una	r foor
serv	Áce es	stablis	shme	t perm	it. Items identif	fied as co	onstituting	g imminent	health hazards	s shall be	corre	cted in	mmedi	ately	or ope	ration	is shall	cease	 Note and written required to post the food service establishment permit ling a written required with the Commissioner within ten (10) days 	it in a c	onsp	icuous
epe	ut. T	CA .			4-703, 68-14-70										/			0				
	\geq	\geq		2	<u> </u>					04/1	5/2	024	-	_		Λ	//	\mathcal{L}	2	04/1	5/2	2024
Sig	natu	re of	Pers	on In	Charge							C	Date	Si	natu	re of	Envir	onme	ental Health Specialist			Date
						A			<i>r</i>										ealth/article/eh-foodservice ****			
							E DOD 5	10010 52050	AV TRUDING /	1.00 5 5 6 6 6	20104	2010/001	100103-000	4123		anters i	ar real	0011	THE PROPERTY CONTRACTOR INCOMENT			

PH-2267 (Rev. 6-15)	Free food safety training ck	RDA 62		
1172201 (1001. 0-10)	Please call () 9315601182	to sign-up for a class.	104.02

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Mt. Pleasant Grille Establishment Number #: 605201002

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 Ware washer	Quart Chlor	100					

Equipment Temperature				
Decoription	Temperature (Fahrenheit)			
Under oven cooler	37			
Lowboy cooler 1	37			
Reach in cooler	0			
hotbox 1	160			

ood Temperature						
Description	State of Food	Temperature (Fahrenheit)				
Mashed potatoes	Reheating	85				
Cheesy grits	Reheating	92				
Cooked mushrooms	Cold Holding	39				
Raw shrimp	Cold Holding	39				
Raw salmon filet	Cold Holding	39				
Raw burger patty	Cold Holding	39				
Raw boneless chicken breast	Cold Holding	39				
Raw catfish filet	Cold Holding	38				
Sliced tomatoes	Cold Holding	39				
Bacon from raw	Cooking	165				
Meatloaf patty from raw	Cooking	174				
Bonein chicken wings cooked	Cold Holding	39				
Mashed potatoes	Cold Holding	39				

Observed Violations

Total # 2

Repeated # ()

37: Cell phone charging cable observed among clean dishes over main food prep line.

37: Employee drink above hot wells on topping line.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Mt. Pleasant Grille

Establishment Number : 605201002

Comments/Other Observations

1: (IN): ANSI Certified Manager present.

- 2: Pic aware of policies
- 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: Employees observed washing hands

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: GFS

- 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: Proper cooking and temperatures observed for cooked meat products from raw.
- 17: (IN) All TCS foods are properly reheated for hot holding.

18: NO: no active cooling foods during inspection. Observed bone in chicken wings in walkin cooler in shallow pan in single layer. Asked pic about cooling methods used.

- 19: Good hot holding observed equipment in establishment.
- 20: Good cold holding observed in equipment in kitchen.
- 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 food advisory available 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.

Establishment Information

Establishment Name: Mt. Pleasant Grille

Establishment Number : 605201002

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

Establishment Information Establishment Name: Mt. Pleasant Grille Establishment Number #: 605201002

Sources			
Source Type:	Water	Source:	City of Mt. Pleasant water
Source Type:		Source:	

Additional Comments