### **TENNESSEE DEPARTMENT OF HEALTH** FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

FOOD SERVICE EST			ICE ESTA	BL	ISH	M	ENT	<b>F II</b>	NSI	PEC	TI	ON REPORT	SCO	RE						
1		11			Sunshine	House (Food)										O Farmer's Market Food Unit		C		
Est	ablisł	imen	t Nar			× 7						Тур	e of	Establi	ishme	ent Permanent O Mobile	$\mathbf{M}$			
Add	iress				1010 Gade	d Rd										O Temporary O Seasonal				
City	,				Hixson		Time in	10	):3	0 A	١M	_ A1	M/P	M Ti	me o	ut 10:35; AM AM / PM				
Insp	ectio	n Da	te		09/23/20	021 Establishment#	60524451	3		_	Emba	argoe	d C	)						
Pur	pose	of In	spect		ORoutine	一 續 Follow-up	O Complaint			O Pr					Co	nsuitation/Other				
Risi	k Cat	egon	,		01	882	<b>O</b> 3			<b>O</b> 4				Fo	low-	up Required O Yes 🕅 No	Number of Se	ats	99	
		R														to the Centers for Disease Contro control measures to prevent illnes	and Prevent	ion		
					oncrimening ra											INTERVENTIONS	is of injury.			
		(#*	rk de	algan		atus (IN, OUT, NA, HO) for e	ach numbered Iten	n. For		mark	ed 00	л, н	ark C	OS or R	t for e	ach item as applicable. Deduct points for ca				
IN	⊧in c	ompili	ance			iance NA=not applicable mpliance Status	NO=not observe	d COS	R		»s=co	rrecte	d on-t	site duri	ing ins	Spection R=repeat (violation of the Compliance Status			R	WT
	IN	ουτ	NA	NO		Supervision						IN	ουτ	NA	NO	Cooking and Roberting of Time/Te	emperature		_	
1	黨	0			Person in charge performs duties	e present, demonstrates k	nowledge, and	0	0	5	16	0	0	12	0	Control For Safety (TCS) For Proper cooking time and temperatures		0	σ	
			NA	NO		Employee Health d food employee awarene	er: mooting	~				Ó	Ó			Proper reheating procedures for hot holding		0 0	õ	5
3	XX	ŏ				striction and exclusion	iss, reporting	ŏ	ŏ	5		IN	ουτ	NA	NO	Cooling and Holding, Date Marking, a Public Health Contro				
	IN	OUT	NA	_		lood Hygionic Practice						0	0	0		Proper cooling time and temperature		0	0	_
4	X	8				sting, drinking, or tobacco meyes, nose, and mouth		0	0	5		0 13	0	8	0	Proper hot holding temperatures Proper cold holding temperatures		8	00	_
	IN	OUT	NA	NO	Preve	nting Contamination b					21	X			0	Proper date marking and disposition		ŏ	ŏ	5
6 7	<u>×</u>	0	•			d properly washed ontact with ready-to-eat fo	ods or approved	_	0	5	22	0	0	×	0	Time as a public health control: procedure	s and records	0	0	
Ľ.	区区	0	0	0	alternate proced			0	0	-		IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and	Indomesical	_	_	
	IN	OUT	NA	NO		Approved Source	accessible			_	23	0	0	X		food		0	0	4
		8	0	-		t proper temperature		8	0			IN	OUT	-	NO	Highly Susceptible Populat		-	- 1	
11	×	ŏ		~	Food in good co	ndition, safe, and unadult		ŏ	0	5	24	0	<u> </u>	×		Pasteurized foods used; prohibited foods	not offered	٥	0	5
12	0	0	×	0	destruction	is available: shell stock ta;		0	0			IN	ουτ			Chemicals				
13	IN X		NA	NO	Food separated	and protected	ation	0	0	4	25	0	0	X	J	Food additives: approved and properly us Toxic substances properly identified, store		0		5
	X				Food-contact su	rfaces: cleaned and sanit		ŏ	ŏ	5		IN	OUT	-	NO	Conformance with Approved Pr	ocedures	_		
15	黛	٥			Proper disposition served	on of unsafe food, returne	d food not re-	0	0	2	27	0	0	窝		Compliance with variance, specialized pro HACCP plan	cess, and	0	٥	5
				Goo	d Retail Pract	tices are preventive	measures to co	ntro	l the	intr	oduc	tion	of	atho	gens	, chemicals, and physical objects	into foods.			
				_				GOO												
				OU	T=not in complianc		COS=corre	cted o	n-site	during						R-repeat (violation of the same			- 1	11.07
		OUT				e Food and Water		cos	R	WT		0	UT			Compliance Status Utensils and Equipment		cos	к	WT
	28 19				d eggs used who lice from approve			8	8	1	4	5				infood-contact surfaces cleanable, properly and used	designed,	0	0	1
	10	0			obtained for speci	ialized processing method	5	ŏ	ŏ	1	4	6	- 1			g facilities, installed, maintained, used, tes	t strips	0	0	1
		OUT	Prop	er co		Comporature Control ed; adequate equipment f	or temperature	-			4	_	-			ntact surfaces clean		0	0	1
3	И	~	contr	ol	-		or compensione	0	0	2		0	UT			Physical Facilities				
	2 3				properly cooked thawing methods			8	8	1	4	_				f water available; adequate pressure stalled; proper backflow devices		8	응	2
	14	0			eters provided an	d accurate		ō	õ	1	5	0	o s	Sewag	e and	waste water properly disposed		0	0	2
_	-	OUT				od identification					5	_				es: properly constructed, supplied, cleaned			0	1
3	5	O OUT	Food	prop		inal container; required re- of Food Contamination		0	0	1	5		-	-	·	use properly disposed; facilities maintained littles installed, maintained, and clean	·	<u> </u>	0	1
1	6	0	Insec	ts. ro	dents, and anima		2n	0	0	2	5	_	-			intes installed, maintained, and clean intilation and lighting; designated areas use	ed be	0	0	1
⊢	17	-		-		luring food preparation, st	orane & display	0	0	1	F	-	UT	,		Administrative items		-	-	-
	8				leanliness	ang roos preparatan, an	noge a angliaj	0	0	1	5		_	Durrient	t pern	nit posted		0	0	
3	9	Ó	Wipi	ng cic	ths; properly use			0	0	1	5					inspection posted		0	0	0
Ľ	0	0 OUT	Was	ning f	ruits and vegetat Prop	ies or Use of Utensils		0	0	1						Compliance Status Non-Smokers Protection A		YES	NO	WT
	1	0			nsils; properly sto	bred			8		5					with TN Non-Smoker Protection Act		ह्य	읽	
	2	25	Singl	e-use	single-service a	ens; properly stored, dried rticles; properly stored, us		0	0	1	5	9 9				ducts offered for sale oducts are sold, NSPA survey completed		0	0	0
4	4	0	Glov	es us	ed properly				0		_									
																Repeated violation of an identical risk factor n e. You are required to post the food service es				
man	ner a	nd po	st the	most	recent inspection r		ver. You have the rig	fit to r	eques			egard			rt by I	fling a written request with the Commissioner w				
a selor			_																	

AP .	09/23/2021
onmental Health Specialist	Date

Signature of Person In Charge

09/23/	2021	
	Date	Sign

nature of Environme

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\*\*\*\* Additional food safety information can be found on our website, http://tn.gow/health/article/eh-foodservice \*\*\*\*

PH-2267 (Rev. 6-15)	Free food safety training cla	RDA (		
(192207 (1004. 0-10)	Please call (	) 4232098110	to sign-up for a class.	101 023

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



## Establishment Information

Establishment Name: Sunshine House (Food) Establishment Number # 605244513

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						
Decoription	Temperature (Fahrenheit)					

ecoription	State of Food	Temperature ( Fahrenheit

Observed Violations	
iotal # 2	
Repeated # 0	
3:	
54:	

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Comments/Other Observations		
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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.

Es	st	ab	lis	hment	Information
-	-		1.1		

Establishment Name: Sunshine House (Food) Establishment Number : 605244513

Comments/Other Observations (cont'd)

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

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Sources		
Source Type:	Source:	

# Additional Comments