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

	FOOD SERVICE ESTABLISHMENT INSPECTION REPORT																			
Monterrey Restaurant												O Farmer's Market Food Unit	9	C	)					
Establishment Name										L										
Audress				105 Cedar Lane.       O Temporary       O Seasonal         Knoxville       Time in       12:30 PM       AM / PM       Time out       12:40; PM       AM / PM																
City					-				2:3			_			ne ou	IZ:40; PIVI AM/PM				
Inspe	ction (	Date		04/05/2	2024	Establishm	ent# 60507521	.8		- '	Embe	argoe	d 0	)		l				
Purpo	urpose of Inspection O Routine 📓 Follow-up O Complaint O Preliminary O Consultation/Other																			
Risk	Risk Category 01 12 03 04 Follow-up Required 0 Yes 12 No Number of Seats 130										0									
	Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health Interventions are control measures to prevent illness or injury.																			
				ted compliance	a atatus (il	FOODE	ORNE ILLNESS R	SK F	AGTO	ORS		PU	BLIC	HEA	LTH	INTERVENTIONS ach litem as applicable. Deduct points for e	alasary or subcata			
IN-	n comp			OUT=not in co	mpliance	NA=not applic										pection R=repeat (violation of th				
F.	N OU	(T N/	NO			nce Status		COS	R	WT	F					Compliance Status Cooking and Reheating of Time/		cos	R	WT
$ \rightarrow $		-		Person in ch		Supervision ent. demonstra	tes knowledge, and			_		IN	OUT	NA	NO	Control For Safety (TCS)				
	O C N OU			performs dut	ies	mployee Hea		0	0	5		0	0	8		Proper cooking time and temperatures Proper reheating procedures for hot hold	ina	0	8	5
20	0 0	2			t and food	employee awa	areness; reporting	0		5	Ë	IN	олт		NO	Cooling and Holding, Date Marking		-	-	
			NO			on and exclusion Hygionic Practice		0	0	Ľ	18		0	0		a Public Health Centr Proper cooling time and temperature	bl	0	~	
4 0	5 0	,	0	Proper eating	g. tasting.	drinking, or tob	acco use		0	5	19	0	0	0	0	Proper hot holding temperatures		0	0	
	O C N OU	_	O NO			s, nose, and m Contamination		0	0	Ť	20 21		8			Proper cold holding temperatures Proper date marking and disposition		8	8	5
-	0 0	_	_	Hands clean	and prope	erly washed	at foods or approved	0	-	5	22		0	0	-	Time as a public health control: procedu	res and records	0	0	
			0	alternate pro	cedures fo	ollowed		0	0			IN	OUT	NA	NO	Consumer Advisory			_	
		IT NA	NO		Âp	proved Sour			0	<u> </u>	23	_	0	0		Consumer advisory provided for raw and food		0	0	4
9 0			10			proved source er temperature		8	0			IN	OUT	-	NO	Highly Susceptible Popula				
11 (	0 0	2	-	Food in good	condition	n, safe, and una	adulterated :k tags, parasite	0	0	5	24	-	0	0		Pasteurized foods used; prohibited foods	not offered	٥	0	5
			O NO	destruction		n from Conta		0	0		25	IN	OUT		NO	Chemicals	and a	0		
13 (	0 0	0		Food separat	ted and pr	rotected		-	0	4	29	0	0			Food additives: approved and properly u Toxic substances properly identified, sto	red, used	0	0	5
14 (	_	_				cleaned and s	sanitized urned food not re-	0		5		IN	-	NA	NO	Conformance with Approved F Compliance with variance, specialized p		_		
15	0	2		served				0	0	2	27	0	0	0		HACCP plan		0	٥	5
			Go	d Retail Pr	actices	are prevent	ive measures to c	ontro	l the	intro	duc	tion	of p	atho	gens	, chemicals, and physical object	s into foods.			
										ar/Al				5						
-			00	Tenot in comple		nce Status	COS=com		R		inspe	ction				R-repeat (violation of the san Compliance Status		COS	R	WT
28	00		deuríz	ed eggs used v		d and Water		0	0	1		_	UT	ood ar	ud no	Utensils and Equipment nfood-contact surfaces cleanable, proper	ly designed	-	-	
29	0	) Wa	ter an	d ice from app	roved sou		abode	0	0	2	4	5 2				and used	y accigned,	0	0	1
- 30	00		ance			erature Cont				<u> </u>	4		_			g facilities, installed, maintained, used, te	st strips	0	٥	1
31	0		per co trol	oling methods	used; ad	equate equipm	ent for temperature	0	0	2	4	_	i ∭ NUT	lonfoor	d-con	tact surfaces clean Physical Facilities		0	0	1
32		_		property cook					0	1		_				water available; adequate pressure		8	8	2
33	_	_		thawing meth eters provided				0	0	1	4	_	_			talled; proper backflow devices waste water properly disposed		0	0	2
	00	_				entification					-	_	_			s: properly constructed, supplied, cleane			0	1
35	0	_	od prog		-	ntainer; require	ed records available	0	0	1	5		-	-		use properly disposed; facilities maintaine ities installed, maintained, and clean	d	0	0	1
36	0	_	ects, n	dents, and an			hatton	0	0	2	5	_	_			ntilation and lighting; designated areas ut	sed	ŏ	ŏ	1
37	-	0 00	ntamin	ation prevente	d durina f	lood preparatio	n, storage & display	0	0	1	F	0	υт			Administrative Items			-	
38	-			cleanliness		ioos proportore	i, ererege a areproj	0	0	1	5			Jurrent	perm	nit posted		0	0	
39	0	) Wi	oing cli	oths; properly		stored		0	0	1		_				Compliance Status		O YES	0	0
40	OU	л			roper Us	e of Utensils	I		0							Non-Smokers Protection				WI
41 42				equipment and		roperly stored	dried, handled	8	8	1	5					with TN Non-Smoker Protection Act ducts offered for sale		8	읭	0
43	0	) Sin	gle-us			properly store		0	8	1	5	9				oducts are sold, NSPA survey completed		ŏ		-
	-	-			ctor items	within ten (50) d	fave may result in surces	1 -			tenvio		blish	ment or	ermit.	Repeated violation of an identical risk factor	may result in reven	ation	of you	r food
servic	Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous manner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this																			
							14-711, 68-14-715, 68-14-7						/	$\frown$						
	04/05/2024 04/05/2024																			

Signature of Person In Charge	Signat	ure of	Person	In Charge
-------------------------------	--------	--------	--------	-----------

Date	Signature of Environmental Health Specialist

Date

#### \*\*\*\* 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 clas	ses are available each mo	nth at the county health department.	RDA 629
(192201 (1997. 0-10)	Please call (	) 8652155200	to sign-up for a class.	101.025

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



#### Establishment Information Establishment Name: Monterrey Restaurant Establishment Number #: 605075218

**—** 

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	State of Food	Temperature ( Fahrenheit

Observed Violations	
Total # 2 Repeated # 0	
Repeated # 0	
45:	
47:	

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



#### Establishment Information

Establishment Name: Monterrey Restaurant Establishment Number : 605075218

### Comments/Other Observations

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.

## Establishment Information

Establishment Name: Monterrey Restaurant

Establishment Number: 605075218

Comments/Other Observations (cont'd)

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

## Establishment Information

Establishment Name: Monterrey Restaurant Establishment Number #: 605075218

Sources		
Source Type:	Source:	

### Additional Comments

Priority items corrected on the spot through coaching and immediate action by PIC/staff.