

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Number of Seats 0

O Farmer's Market Food Unit Sonic Permanent O Mobile Establishment Name Type of Establishment 4130 Kirby Pkwy O Temporary O Seasonal Address Memphis Time in 09:50 AM AM / PM Time out 10:50; AM AM / PM City 11/29/2022 Establishment # 605071523 Embargoed 4 Inspection Date Purpose of Inspection **K**Routine O Follow-up O Complaint O Preliminary O Consultation/Other

Follow-up Required

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

О3

IN-in compliance OUT-not in compliance NA-not applicable NO-not observed						ed		0
	Compliance Status							WT
	IN	OUT	NA	NO	Supervision			
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	TXC	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	*	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	·
5	*	0		0	No discharge from eyes, nose, and mouth		0	l °
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	黨	0		0	Hands clean and properly washed	0	0	
7	釵	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	X	0			Handwashing sinks properly supplied and accessible		0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source	0	0	\Box
10	0	0	0	×	Food received at proper temperature	0	0	1
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	×	0	0		Food separated and protected		0	4
14	0	X	0		Food-contact surfaces: cleaned and sanitized		0	5
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served		0	2

Compliance Status							R	WT	
	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods				
16	0	0	0	寒	Proper cooking time and temperatures	0	0	5	
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	٠	
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control				
18	0	0	0	×	Proper cooling time and temperature	0	0		
19	×	0	0	0	Proper hot holding temperatures	0	0		
20		×	0		Proper cold holding temperatures	0	0	5	
21	*	0	0	0	Proper date marking and disposition	0	0		
22	0	0	0	氮	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 food	0	0	4	
	IN	OUT	NA	NO	Highly Susceptible Populations				
24	氮	0	0		Pasteurized foods used; prohibited foods not offered	0	0	5	
	IN	OUT	NA	NO	Chemicals	Chemicals			
25		0	X		Food additives: approved and properly used	0	0	5	
26	黨	0			Toxic substances properly identified, stored, used		0	,	
	IN	OUT	NA	NO	Conformance with Approved Procedures	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5	

级 Yes O No

s, chemicals, and physical objects into foods.

L PRACTICES

		OUT=not in compliance COS=corr	COS					
	Compliance Status							
	OUT				_			
28	0	Pasteurized eggs used where required	0	0	1			
29	0		0	0	_;			
30	0	Variance obtained for specialized processing methods	0	0	1			
	OUT	Food Temperature Control		_				
31	氮	Proper cooling methods used; adequate equipment for temperature control	0	0	1			
32	0	Plant food properly cooked for hot holding	0	0	Г			
33	0	Approved thawing methods used	0	0				
34	X	Thermometers provided and accurate	0	0	г			
	OUT	Food Identification						
35	0	Food properly labeled; original container; required records available	0	0	ŀ			
	OUT	Prevention of Food Contamination						
36	0	Insects, rodents, and animals not present	0	0				
37	338	Contamination prevented during food preparation, storage & display	0	0	1			
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 Utensiis			Π			
41	0	In-use utensils; properly stored	0	0				
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г			
43	0		0	0	Т			
43								

spect	ion	R-repeat (violation of the same code provision			
	OUT	Compliance Status Utensils and Equipment	cos	R	WT
		_			
45	麗	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	0	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	2
49	0	Plumbing installed; proper backflow devices	0	0	2
50	0	Sewage and waste water properly disposed	0	0	2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	3%	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	Т		
55	0	Current permit posted	ि	0	0
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	WT
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 3%	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to requi

11/29/2022

Date Signature of Environmental Health Specialist

11/29/2022

**** 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) 9012229200 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



	hment		

Establishment Name: Sonic

Establishment Number #: |605071523

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)					
Three compartment sink	Quat							

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Prep cooler (candy)	40				
Traulsen Cooler	35				
Traulsen Freezer	10				

Food Temperature	Food Temperature						
Description	State of Food	Temperature (Fahrenheit					
Lettuce	Cold Holding	60					
Sliced tomatoes	Cold Holding	60					
Chili	Hot Holding	191					
Cheese	Cold Holding	41					

Observed Violations									
Total # 7									
Repeated # ()									
14: Black build up inside of ice machine									
20: TCS foods not maintained @ 41*									
31: Prep cooler not properly working, cooler temp@ 60*									
34: No thermometer observed in candy cooler or prep coolers									
37: Floor uncovered in freezer									
45: Ice build up inside of freezer									
53: Build up on equipment and walls									

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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

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Establishment Information								
Establishment Name: Sonic								
Establishment Number: 605071523								
Comments/Other Observations								
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2:								
3:								
4:								
1: 2: 3: 4: 5: 6: 7: 8: 9:								
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See last page for additional comments.

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

****Additional Comments

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Sonic				
Establishment Number: 605071523				
Comments/Other Observations (cont'd)				
Additional Commants (contist)				
Additional Comments (cont'd)				
See last page for additional comments.				

Establishment Information

Establishment Information				
Establishment Name: So				
Establishment Number #	605071523			
Sources				
Source Type:	Food	Source:	Ben E Keith	- 1
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comments				
Sheran.bryson@sonicpartnernet.com				
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