



TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

76

Establishment Name Kobe Japanese Cuisine Type of Establishment ☒ Permanent ☐ Mobile
 Address 8510 Wilkinsville Rd. ☐ Temporary ☐ Seasonal
 City Millington Time in 11:50 AM AM / PM Time out 03:00 PM AM / PM
 Inspection Date 07/12/2023 Establishment # 605220061 Embargoed 00000
 Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other
 Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☒ Yes ☐ No Number of Seats 80

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.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

| IN=in compliance | | | | | OUT=not in compliance | | | | | NA=not applicable | | | | | NO=not observed | | | | | COS=corrected on-site during inspection | | | | | R=repeat (violation of the same code provision) | | | | |
|-------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|--|--|--|--|--|--------------------------|--------------------------|---|--|--|-----------------|--|--|--|--|---|--|--|--|--|---|--|--|--|--|
| Compliance Status | | | | | | | | | | COS | | | | | R | | | | | WT | | | | | | | | | |
| | IN | OUT | NA | NO | Supervision | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Person in charge present, demonstrates knowledge, and performs duties | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | | | | | | |
| | IN | OUT | NA | NO | Employee Health | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Management and food employee awareness, reporting | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | | | | | | |
| 3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Proper use of restriction and exclusion | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | |
| | IN | OUT | NA | NO | Good Hygienic Practices | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | Proper eating, tasting, drinking, or tobacco use | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | | | | | | |
| 5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | No discharge from eyes, nose, and mouth | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | |
| | IN | OUT | NA | NO | Preventing Contamination by Hands | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | <input type="checkbox"/> | Hands clean and properly washed | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | | | | | | |
| 7 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No bare hand contact with ready-to-eat foods or approved alternate procedures followed | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | |
| 8 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Handwashing sinks properly supplied and accessible | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 2 | | | | | | | | | | | | | | | | | |
| | IN | OUT | NA | NO | Approved Source | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Food obtained from approved source | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | | | | | | |
| 10 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Food received at proper temperature | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | |
| 11 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Food in good condition, safe, and unadulterated | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | |
| 12 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Required records available: shell stock tags, parasite destruction | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | | | | | | |
| | IN | OUT | NA | NO | Protection from Contamination | | | | | | | | | | | | | | | | | | | | | | | | |
| 13 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | Food separated and protected | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 4 | | | | | | | | | | | | | | | | | |
| 14 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | Food-contact surfaces: cleaned and sanitized | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | |
| 15 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Proper disposition of unsafe food, returned food not re-served | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 2 | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| Compliance Status | | | | | | | | | | COS | | | | | R | | | | | WT | | | | |
|-------------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|--|--|--|--|--|--------------------------|--------------------------|---|--|--|---|--|--|--|--|----|--|--|--|--|
| | IN | OUT | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | | | | | | | | | | | | | | | | | |
| 16 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cooking time and temperatures | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | |
| 17 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper reheating procedures for hot holding | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | |
| | IN | OUT | NA | NO | Cooling and Holding, Date Marking, and Time as a Public Health Control | | | | | | | | | | | | | | | | | | | |
| 18 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cooling time and temperature | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | |
| 19 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper hot holding temperatures | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | |
| 20 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | Proper cold holding temperatures | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | |
| 21 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper date marking and disposition | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | |
| 22 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Time as a public health control: procedures and records | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | |
| | IN | OUT | NA | NO | Consumer Advisory | | | | | | | | | | | | | | | | | | | |
| 23 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | Consumer advisory provided for raw and undercooked food | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 4 | | | | | | | | | | | | |
| | IN | OUT | NA | NO | Highly Susceptible Populations | | | | | | | | | | | | | | | | | | | |
| 24 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | Pasteurized foods used; prohibited foods not offered | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | |
| | IN | OUT | NA | NO | Chemicals | | | | | | | | | | | | | | | | | | | |
| 25 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | Food additives: approved and properly used | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | |
| 26 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Toxic substances properly identified, stored, used | | | | | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | |
| | IN | OUT | NA | NO | Conformance with Approved Procedures | | | | | | | | | | | | | | | | | | | |
| 27 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | Compliance with variance, specialized process, and HACCP plan | | | | | <input type="checkbox"/> | <input type="checkbox"/> | 5 | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |

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FOOD INSPECTION DATA**



Establishment Information

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Establishment Number #: 605220061

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. | No |
| Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification. | No |
| "No Smoking" signs or the International "Non-Smoking" symbol are not conspicuously posted at every entrance. | No |
| Garage type doors in non-enclosed areas are not completely open. | No |
| Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open. | No |
| Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited. | No |
| Smoking observed where smoking is prohibited by the Act. | No |

Warewashing Info

| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenheit) |
|--------------|----------------|-----|---------------------------|
| Auto Chlor | Chlorine | 100 | |

Equipment Temperature

| Description | Temperature (Fahrenheit) |
|---------------------|---------------------------|
| RIC (cook station) | 38 |
| WIC | 38 |
| WIF | 0 |
| RIC (sushi station) | 40 |

Food Temperature

| Description | State of Food | Temperature (Fahrenheit) |
|--------------------------------|---------------|---------------------------|
| White rice | Hot Holding | 185 |
| Fried rice | Hot Holding | 155 |
| Shrimp, raw | Cold Holding | 45 |
| Chicken, raw | Cold Holding | 47 |
| Beef, raw | Cold Holding | 46 |
| Beef, raw 2 | Cold Holding | 46 |
| Scallops | Cold Holding | 43 |
| Zucchini, mushrooms, & onion | Cold Holding | 41 |
| Zucchini, mushrooms, & onion 2 | Cold Holding | 43 |
| Broccoli | Cold Holding | 46 |
| Zucchini & onion | Cold Holding | 46 |
| Sweet potato, sliced | Cold Holding | 41 |
| Carrots & celery | Cold Holding | 38 |
| Cucumber | Cold Holding | 43 |
| Mushroom | Cold Holding | 48 |

Observed Violations

Total # 11

Repeated # 0

6: Hand washing is not practiced between changing stations and changing tasks. Hands were not washed after cutting raw chicken. One employee returned to work station after handling raw chicken. Please adequately and properly wash hands between different stations and different tasks.

14: Cutting boards were not cleaned and sanitized after chopping raw chicken. Cutting board on main station and sushi station are deeply stained and grooved individual cutting boards as well. Please clean and sanitize food contact surfaces after each use, and replace or clean cutting boards.

20: Several foods on cold holding station are above 41 degrees. Please maintain cold foods at 41 degrees or below.

21: Date marking system is not present. Please implement a date marking system. 7 day maximum hold via label by discard date: 7/12-7/18.

22: Written procedures are not completely adequate. Written are missing holding time and discard procedures. Please update written procedures for time as a public health.

23: Consumer advisory is present for both reminder and disclosure. Both are present on dine-in menu and takeout menu. The only items that are disclosed are fish. Beef products are not disclosed. Beef products must be disclosed via an asterisk or notation as well.

35: Food bins are not labeled according to contents. Please label food bins according to contents. (Flour, sugar, and rice)

37: Food items are on floor in both walk-in freezer and refrigerator. Items are not covered in cooler. Bowls are on top of meats in cold holding station. Please remove items from floor on freezer and cooler. Place on shelves. Please remove bowls from containers when not in use. Meat is stored in plastic bags in freezer. Please use food grade storage bags or containers.

45: Flour, rice, and sugar are stored in nonfood grade material. Please only use food grade material for storage. Meat is stored in plastic bags in freezer. Please use food grade storage bags or containers.

51: Please clean dusty fan covers in both restrooms.

53: Ceiling, wall, and floor are stained in kitchen area. One ceiling tile is loose, one light cover is loose, dusty light covers, and rust around filter openings. Walls around dry storage area are rusted and stained. Floor underneath equipment and table is stained. Please clean and maintain facilities.

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Comments/Other Observations

- 1: PIC can demonstrate knowledge.
2: Folder underneath ordering station in front. All employees have signed a copy and they are in folder.
3:
4:
5:
7:
8:
9:
10: No delivery
11:
12:
13:
15:
16: Observed several food orders at adequate temperatures.
17: Observed fried rice cooked to 165 or higher.
18: Plain white rice and fried rice. Rice is cooked, cooled, and reheated for service for fried rice and plain white fried rice only. Observed container cooling for service. One container was being used for service at the time. Temperatures were adequate.
19:
24:
25:
26:
27:
57:
1:
2:
3:
4:
5:
6:
7:
58:
1:
2:
3:
4:
5:

***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.

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Comments/Other Observations (cont'd)**Additional Comments (cont'd)*****See last page for additional comments.***

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Sources

| | | | |
|--------------|------|---------|----------------------------------|
| Source Type: | Food | Source: | Sysco, Fresh Food Wholesale, PFG |
| Source Type: | | Source: | |
| Source Type: | | Source: | |
| Source Type: | | Source: | |
| Source Type: | | Source: | |

Additional Comments

Safe food donation pamphlet given