



TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

Establishment Name: **Fabian's Mexican Restaurant Bar**
 Address: **116 Wilson Pike Cir**
 City: **Brentwood**
 Inspection Date: **03/28/2024** Establishment #: **605319115** Time in: **02:40 PM** AM / PM
 Type of Establishment: Farmer's Market Food Unit
 Permanent Mobile
 Temporary Seasonal
 Embargoed: **0**
 Purpose of Inspection: Routine Follow-up Complaint Preliminary Consultation/Other
 Risk Category: 1 2 3 4 Follow-up Required: Yes No Number of Seats: **0**

SCORE

100

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.)

Compliance Status				COS	R	WT
IN	OUT	NA	NO			
Supervision						
1	<input checked="" type="checkbox"/>	<input type="radio"/>		Person in charge present, demonstrates knowledge, and performs duties	<input type="radio"/>	<input type="radio"/>
2	<input checked="" type="checkbox"/>	<input type="radio"/>		Management and food employee awareness, reporting	<input type="radio"/>	<input type="radio"/>
3	<input checked="" type="checkbox"/>	<input type="radio"/>		Proper use of restriction and exclusion	<input type="radio"/>	<input type="radio"/>
Employee Health						
4	<input checked="" type="checkbox"/>	<input type="radio"/>		Proper eating, tasting, drinking, or tobacco use	<input type="radio"/>	<input type="radio"/>
5	<input checked="" type="checkbox"/>	<input type="radio"/>		No discharge from eyes, nose, and mouth	<input type="radio"/>	<input type="radio"/>
Good Hygienic Practices						
6	<input checked="" type="checkbox"/>	<input type="radio"/>		Hands clean and properly washed	<input type="radio"/>	<input type="radio"/>
7	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	<input type="radio"/>	<input type="radio"/>
8	<input checked="" type="checkbox"/>			Handwashing sinks properly supplied and accessible	<input type="radio"/>	<input type="radio"/>
Approved Source						
9	<input checked="" type="checkbox"/>	<input type="radio"/>		Food obtained from approved source	<input type="radio"/>	<input type="radio"/>
10	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	<input type="radio"/>	<input type="radio"/>
11	<input checked="" type="checkbox"/>			Food in good condition, safe, and unadulterated	<input type="radio"/>	<input type="radio"/>
12	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Required records available: shell stock tags, parasite destruction	<input type="radio"/>	<input type="radio"/>
Protection from Contamination						
13	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Food separated and protected	<input type="radio"/>	<input type="radio"/>
14	<input checked="" type="checkbox"/>	<input type="radio"/>		Food-contact surfaces: cleaned and sanitized	<input type="radio"/>	<input type="radio"/>
15	<input checked="" type="checkbox"/>			Proper disposition of unsafe food, returned food not re-served	<input type="radio"/>	<input type="radio"/>
Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods						
16	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Proper cooking time and temperatures	<input type="radio"/>	<input type="radio"/>
17	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>
Cooling and Holding, Date Marking, and Time as a Public Health Control						
18	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Proper cooling time and temperature	<input type="radio"/>	<input type="radio"/>
19	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Proper hot holding temperatures	<input type="radio"/>	<input type="radio"/>
20	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Proper cold holding temperatures	<input type="radio"/>	<input type="radio"/>
21	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Proper date marking and disposition	<input type="radio"/>	<input type="radio"/>
22	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures and records	<input type="radio"/>	<input type="radio"/>
Consumer Advisory						
23	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw and undercooked food	<input type="radio"/>	<input type="radio"/>
Highly Susceptible Populations						
24	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>
Chemicals						
25	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>
26	<input checked="" type="checkbox"/>			Toxic substances properly identified, stored, used	<input type="radio"/>	<input type="radio"/>
Conformance with Approved Procedures						
27	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Compliance with variance, specialized process, and HACCP plan	<input type="radio"/>	<input type="radio"/>

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES				R-repeat (violation of the same code provision)		
Compliance Status				COS	R	WT
OUT						
Safe Food and Water						
28	<input type="radio"/>	<input checked="" type="checkbox"/>		pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>
29	<input type="radio"/>	<input checked="" type="checkbox"/>		water and ice from approved source	<input type="radio"/>	<input type="radio"/>
30	<input type="radio"/>	<input checked="" type="checkbox"/>		Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>
Food Temperature Control						
31	<input type="radio"/>	<input checked="" type="checkbox"/>		proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>
32	<input type="radio"/>	<input checked="" type="checkbox"/>		plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>
33	<input type="radio"/>	<input checked="" type="checkbox"/>		approved thawing methods used	<input type="radio"/>	<input type="radio"/>
34	<input type="radio"/>	<input checked="" type="checkbox"/>		thermometers provided and accurate	<input type="radio"/>	<input type="radio"/>
Food Identification						
35	<input type="radio"/>	<input checked="" type="checkbox"/>		Food properly labeled; original container; required records available	<input type="radio"/>	<input type="radio"/>
Prevention of Food Contamination						
36	<input type="radio"/>	<input checked="" type="checkbox"/>		Insects, rodents, and animals not present	<input type="radio"/>	<input type="radio"/>
37	<input type="radio"/>	<input checked="" type="checkbox"/>		contamination prevented during food preparation, storage & display	<input type="radio"/>	<input type="radio"/>
38	<input type="radio"/>	<input checked="" type="checkbox"/>		personal cleanliness	<input type="radio"/>	<input type="radio"/>
39	<input type="radio"/>	<input checked="" type="checkbox"/>		wiping cloths; properly used and stored	<input type="radio"/>	<input type="radio"/>
40	<input type="radio"/>	<input checked="" type="checkbox"/>		washing fruits and vegetables	<input type="radio"/>	<input type="radio"/>
Proper Use of Utensils						
41	<input type="radio"/>	<input checked="" type="checkbox"/>		in-use utensils; properly stored	<input type="radio"/>	<input type="radio"/>
42	<input type="radio"/>	<input checked="" type="checkbox"/>		utensils, equipment and linens; properly stored, dried, handled	<input type="radio"/>	<input type="radio"/>
43	<input type="radio"/>	<input checked="" type="checkbox"/>		single-use/single-service articles; properly stored, used	<input type="radio"/>	<input type="radio"/>
44	<input type="radio"/>	<input checked="" type="checkbox"/>		Gloves used properly	<input type="radio"/>	<input type="radio"/>
Utensils and Equipment						
45	<input type="radio"/>	<input checked="" type="checkbox"/>		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="radio"/>	<input type="radio"/>
46	<input type="radio"/>	<input checked="" type="checkbox"/>		warewashing facilities, installed, maintained, used, test strips	<input type="radio"/>	<input type="radio"/>
47	<input type="radio"/>	<input checked="" type="checkbox"/>		nonfood-contact surfaces clean	<input type="radio"/>	<input type="radio"/>
Physical Facilities						
48	<input type="radio"/>	<input checked="" type="checkbox"/>		hot and cold water available; adequate pressure	<input type="radio"/>	<input type="radio"/>
49	<input type="radio"/>	<input checked="" type="checkbox"/>		plumbing installed; proper backflow devices	<input type="radio"/>	<input type="radio"/>
50	<input type="radio"/>	<input checked="" type="checkbox"/>		sewage and waste water properly disposed	<input type="radio"/>	<input type="radio"/>
51	<input type="radio"/>	<input checked="" type="checkbox"/>		toilet facilities: properly constructed, supplied, cleaned	<input type="radio"/>	<input type="radio"/>
52	<input type="radio"/>	<input checked="" type="checkbox"/>		garbage/refuse properly disposed; facilities maintained	<input type="radio"/>	<input type="radio"/>
53	<input type="radio"/>	<input checked="" type="checkbox"/>		physical facilities installed, maintained, and clean	<input type="radio"/>	<input type="radio"/>
54	<input type="radio"/>	<input checked="" type="checkbox"/>		Adequate ventilation and lighting; designated areas used	<input type="radio"/>	<input type="radio"/>
Administrative Items						
55	<input type="radio"/>	<input checked="" type="checkbox"/>		current permit posted	<input type="radio"/>	<input type="radio"/>
56	<input type="radio"/>	<input checked="" type="checkbox"/>		most recent inspection posted	<input type="radio"/>	<input type="radio"/>
Compliance Status						
57	<input type="radio"/>	<input checked="" type="checkbox"/>		compliance with TN Non-Smoker Protection Act	<input type="radio"/>	<input checked="" type="checkbox"/>
58	<input type="radio"/>	<input checked="" type="checkbox"/>		tobacco products offered for sale	<input type="radio"/>	<input type="radio"/>
59	<input type="radio"/>	<input checked="" type="checkbox"/>		If tobacco products are sold, NSPA survey completed	<input type="radio"/>	<input type="radio"/>
Non-Smokers Protection Act						

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 report. T.C.A. sections 68-14-701, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

03/28/2024

Date

03/28/2024

Date

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

PH-2267 (Rev. 6-15)	Free food safety training classes are available each month at the county health department. Please call () 6153405620	to sign-up for a class.	RDA 629
---------------------	---	-------------------------	---------

TENNESSEE DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
FOOD INSPECTION DATA



Establishment Information

Establishment Name: Fabian's Mexican Restaurant Bar

Establishment Number #: 605319115

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)
Manual dish sink	Bleach		

Equipment Temperature

Description	Temperature (Fahrenheit)

Food Temperature

Description	State of Food	Temperature (Fahrenheit)



Establishment Information

Establishment Name: Fabian's Mexican Restaurant Bar

Establishment Number : 605319115

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Employee health policy available.
- 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: I did not observe employees washing hands during inspection
- 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: See source.
- 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: No raw animal products stored or cooked on site.
- 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: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: No tcs foods are cooled in this establishment.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: (NA) Establishment does not cold hold TCS foods.
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 24 hours.
- 22: (NA) No food held under time as a public health control.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 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.
- 57: "No Smoking" signs or the international symbols are not conspicuously posted at every entrance.
- 58: No

***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: Fabian's Mexican Restaurant Bar

Establishment Number: 605319115

Comments/Other Observations (cont'd)***Additional Comments (cont'd)***

See last page for additional comments.

Establishment Information

Establishment Name: Fabian's Mexican Restaurant Bar

Establishment Number #: 605319115

Sources

Source Type: Food Source: Same as restaurant

Source Type: Water Source: City

Source Type: Source:

Source Type: Source:

Source Type: Source:

Additional Comments