## TENNESSEE DEPARTMENT OF HEALTH \_ \_ \_ \_

						FOOD SERV	ICE ESTA	BL	ISH	M	ENT	T IN	ISF	PEC	TIC	ON REPORT	sco	RE		
Estab	ish:	men	t Nan		El Meson							Tur	e of F	Establi	ehmo	O Farmer's Market Food Unit	9	f		
Address 248 Northgate Mall Rd.								1.36	010	-944241	Semilie	O Temporary O Seasonal								
			01	:2	0 F	M	44	1/0	и ть	<b>200</b>	ut 01:40:PM AM/PM									
,					04/04/202	23 Establishment #						-			ne or	at 02110,1111 AM7PM				
Inspe								5		-	Emba									
Purpose of Inspection O Routine A Follow-up O Complaint				O Pr	elimin	ary		0	Cor	nsultation/Other				_						
Risk (	Cate				<b>O</b> 1	<u>\$</u> 22	<b>O</b> 3			<b>O</b> 4						up Required O Yes 💢 No	Number of S	ieats	17	5
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.																				
																INTERVENTIONS				
		(11	rk de	lgant			ich numbered item	. For	ite ma	mark	ed 00	п, н	irk GG	XS or R	for e	ach item as applicable. Deduct points for				
IN=i	n ca	mpīi	ance			liance Status	NO=not observe	d COS	R		S=cor	recter	t on-s	ite duri	ng ins	Spection R=repeat (violation of the Compliance Status	e same code provisi		R	WT
1	N	DUT	NA	NO		Supervision						IN	оит	NA	NO	Cooking and Reheating of Time.	Temperature			
1 8	ĸ	0				resent, demonstrates kn	owledge, and	0	0	5	10	2	0	0		Control For Safety (TCS) Proper cooking time and temperatures	Foods	_	~	
	NC		NA	NO	performs duties	Employee Health						0	ŏ	ŏ		Proper reheating procedures for hot hole	ding	00	ö	5
2		0				ood employee awarenes	ss; reporting		2	5		IN	оυт	NA	NO	Cooling and Holding, Date Markin				
	~	-	NA	NO	Proper use of restric	d Hygienic Practices		0	0	_	12	<u></u>	0	0	0	Public Health Cents Proper cooling time and temperature	rel	0		
4 2	K.	0	nun.			ng, drinking, or tobacco		0	0	5	19	Ň	0	0	0	Proper hot holding temperatures		0	0	
5 8		0	NA			eyes, nose, and mouth ag Contamination by	Handa	0	0	<u> </u>		25	0	0		Proper cold holding temperatures		00	8	5
		0	nuA.	and the second second	Hands clean and pr		Hangs	0	0			<u>≋</u>	0	0 ※		Proper date marking and disposition	and an and a		0	
	_	0	0	0	No bare hand conta alternate procedure	ct with ready-to-eat foo	ds or approved	0	0	5	"	IN	OUT	NA	-	Time as a public health control: procedu Consumer Advisory		0	9	
8 8	K	0			Handwashing sinks	properly supplied and a	ocessible	0	0	2	23	0	0	12	no	Consumer advisory provided for raw an		0	0	4
	NK		NA	_	Food obtained from	Approved Source		0	0	_		IN	OUT		NO	food Highly Susceptible Popul	ations	~	-	-
10 (	5		0		Food received at pr	oper temperature		0	0		24		0	20		Pasteurized foods used; prohibited food		0	0	
11 3	ĸ	0			Food in good condit	tion, safe, and unadulter vailable: shell stock tag		0	0	5	24						s not offered	•	9	9
		0	×	0	destruction	-		0	0			IN	OUT							
13 χ			NA	NO	Food separated and	tion from Contamina d protected	tion	0	o	4	25 26	0 実	0	X		Food additives: approved and properly of Toxic substances properly identified, sto		0	8	5
14 3	K	ŏ	õ		Food-contact surfac	ces: cleaned and sanitiz		ŏ		5				NA	NO			Ť	-	
15 8	8	0			Proper disposition or served	of unsafe food, returned	food not re-	0	0	2	27	0	ο	×		Compliance with variance, specialized p HACCP plan	rocess, and	0	0	5
_	-	_		-							-				_				_	
				Goo	d Retail Practice	es are preventive n	seasures to co						_		gens	s, chemicals, and physical object	s into foods.			
				-00	I=not in compliance		COS=corre	GO0 cled o					ICE	5		R-repeat (violation of the sar	me code provision)			
	-				Comp	liance Status		COS	R	WT						Compliance Status		COS	R	WT
28	_	0		urize	d eggs used where i	eed and Water required		0	0	1		_	UT F	ood ar	nd no	Utensils and Equipment properties and equipment	rly designed.	-		
29 30		0	Wate	r and	ice from approved s	source		0	0	2	4	<u>،</u>				and used		0	0	1
30		DUT		nce c		ed processing methods nperature Control	•	0	0	-	40	5   C	o  v	Varews	ashin	g facilities, installed, maintained, used, to	est strips	0	0	1
31	Т	0			oling methods used;	adequate equipment fo	r temperature	0	0	2	47	_	_	lonfoo	d-con	ntact surfaces clean		0	0	1
32	+	0	contr Plant		properly cooked for	hot holding		0	0	1	41	-	UT D ⊢	lot and	i cold	Physical Facilities I water available; adequate pressure		0	0	2
33		0	Appr	oved	thawing methods us	ed		0	0	1	45	) )	R P	'lumbir	ng ins	stalled; proper backflow devices		0	0	2
34	_	0		nome	eters provided and a	courate Identification		0	0	1	50	_	_			i waste water properly disposed es: properly constructed, supplied, cleane	4	0	8	2
35	-	_		0000		container; required reci	orde available	0	0	1	53	_				use properly disposed; facilities maintain		0	0	1
		DUT	1000	prop		Food Contaminatio		•		<u> </u>	53			-		ilities installed, maintained, and clean		0	0	1
36	-		Insec	ts, ro	dents, and animals r			0	0	2	54	-+	-			entilation and lighting; designated areas u	sed	ō	ŏ	1
37	+	0	Cont	amina	ition prevented durin	ng food preparation, sto	rage & display	0	0	1		0	UT			Administrative items				
38	_	-			leanliness	Property and	2	0	0	1	54			ument	perm	nit posted		0	0	
39		Ó	Wipir	ng clo	ths; properly used a			0	0	1	54					inspection posted		0	0	0
40		O		ning f	ruits and vegetables	Use of Utensils		0	0	1		_	_			Compliance Status Non-Smokers Protection	Act	YES	NO	WT
41		0	In-us		nsils; properly stored	i			0		57					with TN Non-Smoker Protection Act		<u>Ж</u>	0	
42						; properly stored, dried, les; properly stored, use			0		53	5				oducts offered for sale roducts are sold, NSPA survey complete	4	00	8	0
44					ed properly	in the second second and	-		ŏ		<u> </u>		11	1000	5-5 pe	and the send, the resulting weighter	_	-	-	

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 (8-14-703, 68-14-708, 68-14-708, 68-14-719, 68-14-716, 4-5-320.

	04/04/2023	( all the second	04/04/2023
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date

\*\*\*\* Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice \*\*\*\* Eres feed celety training electers are available each month at the sounty health department

PH-2267 (Rev. 6-15)	Free food safety training class	RDA 629		
reason (new, or roy	Please call (	) 4232098110	to sign-up for a class.	NDA 029

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



### Establishment Information

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Establishment Name: El Meson Establishment Number #: 605211305

# 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 3moking" 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. Smoking observed where smoking is prohibited by the Act.

Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						
	l								

Equipment l'emperature	
Description	Temperature (Fahrenheit)

Decoription	State of Food	Temperature ( Fahrenheit

Observed	Violations		
Total # 3	Tronatorio		
Repeated #	0		
45:	0		
49:			
+9. -0			
53:			

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



# Establishment Information

Establishment Name: El Meson Establishment Number : 605211305

Comments/Other Obse	ervations		
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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: El Meson

Establishment Number: 605211305

Comments/Other Observations (cont'd)

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

# Establishment Information Establishment Name: El Meson

Establishment Number # 605211305

Sources		
Source Type:	Source:	
Additional Comments		

Switched to sink and surface.