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 | 200 | 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 | | | | O 1 | <u>\$</u> 22 | O 3 | | | O 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) | | | | | | |
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| Equipment l'emperature | |
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| Description | Temperature (Fahrenheit) |
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| Decoription | State of Food | Temperature (Fahrenheit |
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| Observed | Violations | | |
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| Repeated # | 0 | | |
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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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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.