#### **TENNESSEE DEPARTMENT OF HEALTH** FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

							FOO	DD SER	VICE ESTA	BL	ISH	M	INT	r IN	ISI	PEC	TI	DN RE	EPOR	т		SCO	ORE		
ß																							ſ		
Estal	blish	imen	t Nar	me	Тас	o Bell #	23043	3						Tur	a of i	Establi	ehme			nt <b>O</b> Mol		Y		1	
Addr	ess				167	2 W. Ma	ain St	•						1.25	AC 101 1	- 540 - 54	SHIII I K		Temporar	y O Sea	asonal				
City					Leb	anon			Time i	01	L:0	4 F	M	AJ	M / PI	и ті	me ou	# 02:0	00 P	M AN	/PM				
Inspe	etio	n Da	te		02/	29/20	24 🖡	stablishment	<b>6051958</b>	_				-											
Purp				tion	10 Ro			low-up	• O Complain			- O Pro			-		Cor	sultation	Other		'				
Risk					XX1		02		03			04		,				up Require	-	) Yes	EP No.	Number of	Seats	60	)
Nak	Cas			act	tors a	re food pr	eparatio	on practice	s and employee	beha	vior	8 mo	st c	omin	only	repo	ortec	to the (	Centers	for Dise	ase Cont	rol and Preve	ntion		
				85	contri	buting fac	tors in		iliness outbreak												vent illne	ess or injury.			
		(He	rk de	alga	ated cor	npliance stat	tus (IN, O		RNE ILLNESS R reach numbered ite												points for c	category or subcat	legoly/	ð	
IN-	in co	mpīi	ince		OUT=			A=not applicable Status	e NO=not observ		R		S=co	recte	d on-s	ite duri	ng ins	pection		R=repeat (v nce Stat		e same code provit		1.01	WT
	IN	OUT	NA	NO		001		pervision			-		h	IN	our	NA	NO					Temperature		1~1	
1		0		-			present,	demonstrates	knowledge, and	0	0	5	16	0	0			Proper co		e and tem	ty (TCS)	Foods			
	IN		NA	NO	)	rms duties		oyee Health						ő	ŏ	ŏ	Â	Proper co Proper rel	heating p	rocedures	for hot hold	ling	ŏ	00	5
2 3		0						ployee aware nd exclusion	ness; reporting	6	0	5		IN	оυт	NA	NO	Ceeling				g, and Time as			
	_		NA	NO	1.1			ionic Practic		Ľ		_	18	0	0	0	<u>53</u>	Proper co		e and temp	erature	01	0		
4	X	0		0	Prope	er eating, tas	sting, drin	king, or tobac	co use		0	5	19	黨	0	0		Proper ho	ot holding	temperatu	res		0	0	
		0 OUT	NA	-	_			ose, and mou tamination		0	0	-	20	100	00	8	0			g temperating and disp			8	8	5
_		0		0	_	s clean and	properly	washed		0	-			1	0	o						res and records	0	o	
7	×	0	0	0		are hand con ate procedu			loods or approved	0	0	5		IN	OUT	NA	-				Advisory		-	-	
8		<u></u>	NA	NO		washing sin/		ly supplied an ved Source	d accessible	0	0	2	23	0	0	12		Consume food	er advisor	y provided	for raw and	d undercooked	0	0	4
9 3	<u>×</u>	0		-	Food	obtained fro	m approv	ved source		0	0			IN	OUT	NA	NO	10000	Highly	Susceptil	ble Popula	rtions			
10		0	0			received at in good con		mperature fe, and unadu	Iterated	8	0	5	24	8	0	0		Pasteuriz	ed foods	used; proh	ibited foods	s not offered	0	0	5
	_	ŏ	×	0	Requ	ired records		: shell stock t		ō	ŏ			IN	OUT	NA	NO			Chem	icals				
				NO		uction Prote	ction fr	om Contami	ination				25	0	0	X		Food add	itives: ap	proved and	d properly u	sed	0		5
13				-		separated a		cted aned and san	itimod	8	0		26	<u>R</u>	O OUT	NA	10				entified, sto	red, used Procedures	0	0	<u> </u>
14 3	_	0	-	1					ed food not re-	6	0	5	27	IN O	001	22	NO					rocess, and	0	0	5
15	<u>1</u>	•			serve	d				10	<b>U</b>	-	21	0	<u> </u>	- ~		HACCP p					10	<b>ا</b>	0
				Go	od Re	tail Practi	ces are	preventive	measures to c	ontro	l the	intr	oduc	tion	of p	atho	gens	, chemic	cals, an	d physic	al object	s into foods.			
										GOO	DR	ar/al	L PR	АСТ	<b>ICE</b>	3									
				0	UT=not i	n compliance Com		Status	COS=corr		R R		inspe	ction						peat (violatio ance Sta		ne code provision)	Icos	R	WT
	_	OUT				Safe	Food as	nd Water						0	UT			U	tensils	and Equip	pment				
28						s used when om approved		đ			0		4	s   (				nfood-con and used		ices cleana	able, proper	fy designed,	0	0	1
30	_	0 OUT	Varia	ance	obtaine			cessing metho	ods	Ŏ	Õ	Ĩ	4	6 (	-					, maintain	rd, used, te	st strips	0	0	1
			Prop	er co	ooling m				for temperature				4	7 0	_			tact surfac		-			0	0	1
31		0	cont	rol						0	0	2		0	UT				Physic	al Facilit					
32	_					rly cooked for ng methods (		ding		8	8	1	4	_						fequate pre flow device			8	8	2
34	-	0	<u> </u>			rovided and	i accurate			0	0	1	5	0 0	o s	Plumbing installed; proper backflow devices Sewage and waste water properly disposed			d		0	0	2		
	_	OUT	_					fication					5	_							ied, cleane		0	0	1
35			Food	d proj					ecords available	0	0	1	5		-	-			, ,	-	s maintaine	id	0	0	1
36	-	OUT	Inco	ote e		and animal		Contaminat	tion	0	0	2	5	_	-					tained, an	d clean ed areas us	sad	0	0	1
	+	-								-	+ +		Ľ	+	-	ueque	ne ve					seu	Ľ	<u> </u>	-
37	_	_					ring food	preparation, s	storage & display	0	0	1			UT					trative it	oms				
38	_	-	-		cleanlin oths: pr	ness roperly used	and stor	ed		8	0	1	5			Sument fost re	cent	nit posted inspection	posted				8	0	0
40	,	0				nd vegetable	es.				ŏ		Ĕ		• <u>1</u>	interest into	o o tito		Complia	nce Sta			_		WT
41	_	OUT O	In-re	se utr	ensis: r	Prope properly stor		f Utensils		0	0	1	5	7	-	omol	ance	with TN N	Non-Smok	nokers Pr er Protection	on Act	Act	194	0	
42	2	22	Uten	sils,	equipm	ent and line	ns; prope	rly stored, dri		0	0	1	5	8	T	obacc	o pro	ducts offer	red for sa	le			0	0	0
43	_				e/singk sed pro		ticles; pro	perly stored, u	used		8		5	9	11	tobac	co pr	oducts are	e sold, NS	SPA survey	completed	1	0	0	
Failur	e to						items with	in ten (10) dave	a may result in suspe			_	servic		blish	ment pe	ermit.	Repeated	violation o	f an identic	al risk factor	may result in reve	cation	of yos	ur food
servic		tablis	hmer	nt per	mit. Iten	ns identified a	as constitu	ting imminent	health hazards shall t nner. You have the ri	e com	cted i	mmedi	ately	or ope	mation	is shall	ceas	<ol> <li>You are</li> </ol>	required to	o post the fo	ood service e	establishment perm	it in a	consp	icuous
repor	-	4	rectio	2	-14-702				711, 68-14-715, 68-14-								~								
,	_	-/	0	ጉ		_			02/	29/2	024	1			Fe	trie	ye	1 1/2	m				02/2	29/2	2024
Sign	atur	e of	Pers	ion Ir	n Char	ge					[	Date	Sig	natu	re of	Envir	onme	ntal Heal	Ith Specia	alist					Date

Signature of	Person	In Charge
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Date	Signature	of Environmenta	I Health

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## \*\*\*\* 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 class	RDA 629		
(Net. 0-10)	Please call (	) 6154445325	to sign-up for a class.	101.025

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



#### Establishment Information

Establishment Name: Taco Bell #23043 Establishment Number #: [605195818

ISPA Survey – To be completed if #57 is "No"	
ge-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are venty-one (21) years of age or older.	
ge-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.	
arage type doors in non-enclosed areas are not completely open.	
ents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
moke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	
moking observed where smoking is prohibited by the Act.	

Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						
Sani Bucket Three comp sink	Quat Quat	100 100							

Equipment Temperature					
Decoription	Temperature (Fahrenheit)				
Heated Cabinet	167				
Totrilla Shell Warmer	160				
208 Cabinet	230				
Cold Well Prep RIC	32				

Food Temperature						
Description	State of Food	Temperature (Fahrenheit)				
Rice	Hot Holding	183				
Refried Beans	Hot Holding	149				
Chicken	Hot Holding	165				
Ground Beef	Hot Holding	170				
Steak	Hot Holding	190				
Shredded Lettuce	Cold Holding	37				
Shredded Cheese	Cold Holding	37				
Diced Tomatoes	Cold Holding	36				
Diced Potatoes	Hot Holding	187				
Chicken Crispanada	Hot Holding	155				
Eggs	Cold Holding	38				

ved Violations			
1			
ed # 0			
letal pans stacke	d wet on shelving ir	n front of prep sin	k/ next to WIC
•	Ū		

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



#### Establishment Information

Establishment Name: Taco Bell #23043

Establishment Number : 605195818

#### Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Establishment has employee illness policy
- 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:

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 sources

- 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: (IN) All raw animal food is separated and protected as required.
- 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: No foods oberved being cooked during inspection
- 17: (NO) No TCS foods reheated during inspection.
- 18: No foods observed in coolimg during inspection
- 19: See temps
- 20: See temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: Food itmes are labeled and dated with TILT ticket TILT tickets are in time window for TILT procedure
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 24:
- 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.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57:

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.

## Establishment Information

Establishment Name: Taco Bell #23043

Establishment Number : 605195818

Comments/Other Observations (cont'd)

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

# Establishment Information

Establishment Name: Taco Bell #23043 Establishment Number # 605195818

Sources				
Source Type:	Water	Source:	City	
Source Type:	Food	Source:	Mclanes	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

### Additional Comments