

Establishment Name

Purpose of Inspection

**K**Routine

Address

City

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

SCORE

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5

O Farmer's Market Food Unit YNOT BAR & RESTAURANT Permanent O Mobile Type of Establishment 1166 N. Houston Levee O Temporary O Seasonal

Cordova Time in 03:40 PM AM/PM Time out 04:00; PM AM/PM

O Complaint

02/06/2023 Establishment # 605305870 Embargoed 0 Inspection Date

O Follow-up

Number of Seats 86 Risk Category О3 04 Follow-up Required O Yes 疑 No

rted to the Centers for Dis

O Preliminary

O Consultation/Other

# FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

status (IN, OUT, HA, HO) for ea

|      | 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  |  |     |      |            |   |   |     | WT    |    |     | Compliance Status                   |      |     |  |  |
|      | 11  | N  | OUT | NA   | NO         | Supervision   |   |     |       |    | IN  | OUT                                 | NA.  | NO  | Cooking and Reheating of Time/Temperature                        |  |
| - 15 | 10  |  | _   |      | _          | Person in charge present, demonstrates knowledge, and                 | _ |     |       | п  | 1"  | 100                                 | -    | 100 | Control For Safety (TCS) Foods                                   |  |
| ۱1   | 1   | 4  | ٥   |      |            | performs duties   | 0 | 0   | 5     | 1  | 6 0 | 10                                  | 0    | 窓   | Proper cooking time and temperatures                             |  |
|      | Į,  | N.   | OUT | NA   | NO         | Employee Health   |   |     |       | 1  | 7 0 | 0                                   | 3%   | 0   | Proper reheating procedures for hot holding                      |  |
| [2   | $\mathbb{D}$  | KŢ   | 0   |      |            | Management and food employee awareness; reporting                     | 0 | 0   |       | Г  | T   |                                     |      |     | Cooling and Holding, Date Marking, and Time as                   |  |
| 3    | M   | K  | 0   |      |            | Proper use of restriction and exclusion                               | 0 | 0   | ٥     |    | IN  | OUT                                 | NA   | NO  | a Public Health Control  |  |
|      | IN  | N  | OUT | NA   | NO         | Good Hygienic Practices   |   |     |       | 1  | 8 0 | 0                                   | X    | 0   | Proper cooling time and temperature                              |  |
| 4    | B   | K  | 0   |      |            | Proper eating, tasting, drinking, or tobacco use                      | 0 | 0   | 5     |    | 9 0 |                                     | 0    | 黨   | Proper hot holding temperatures                                  |  |
| 5    | -   | K  | 0   |      |            | No discharge from eyes, nose, and mouth                               | 0 | Ō   | Ľ     |    | 0 2 |                                     | 0    |     | Proper cold holding temperatures                                 |  |
|      | -   | IN OUT NA NO Preventing Contamination by Hands |     |      |            |   | 2 | 1 0 | 0     | 0  | 26  | Proper date marking and disposition |      |     |  |  |
| 6    | 182   | K  | 0   |      | 0          | Hands clean and properly washed                                       | 0 | 0   |       | 12 | 2 0 | 10                                  | ×    | 0   | Time as a public health control: procedures and records          |  |
| 7    | 8   | ĸ  | 0   | 0    | 0          | No bare hand contact with ready-to-eat foods or approved              | 0 | 0   | 5     | Ľ  |     | 1 -                                 |      | _   |  |  |
| L.   | Ľ   | _  |     | _    |            | alternate procedures followed   | _ |     | Щ     | ш  | IN  | OUT                                 | NA   | NO  |  |  |
| 8    |   | K  |     | NIA. | NO         | Handwashing sinks properly supplied and accessible                    | 0 | 0   | 2     | 2  | 3 0 | l٥                                  | 38   |     | Consumer advisory provided for raw and undercooked               |  |
| H    | -   | _  |     | NA   | NO         | Approved Source   | _ |     | -     | Н  | -   | 0117                                |      | 110 | food   |  |
| 9    | -   | K  | 0   | _    | _          | Food obtained from approved source                                    | 0 | 0   |       | ш  | IN  | OUT                                 | NA   | NO  | Highly Susceptible Populations                                   |  |
| 10   |   | 2  | 0   | 0    | <u>  X</u> | Food received at proper temperature                                   | 0 | 0   | 5     | 12 | 4 o | l٥                                  | 320  |     | Pasteurized foods used; prohibited foods not offered             |  |
| 1    | 1 2   | K  | 0   |      | _          | Food in good condition, safe, and unadulterated                       | 0 | 0   | l ° I | L  | 1   | +                                   | 1000 |     |  |  |
| 12   | P   | 기  | 0   | ×    | 0          | Required records available: shell stock tags, parasite<br>destruction | 0 | 0   |       |    | IN  | OUT                                 | NA   | NO  | Chemicals  |  |
|      | I١  | N  | OUT | NA   | NO         | Protection from Contamination   |   |     |       | -  | 5 0 | _                                   | TX.  |     | Food additives: approved and properly used                       |  |
| 1:   | 1 2   | 8  | 0   | 0    |            | Food separated and protected  | 0 | 0   | 4     | 2  | 6 6 | 0                                   |      |     | Toxic substances properly identified, stored, used               |  |
| 14   | 1 8   | K  | 0   | 0    |            | Food-contact surfaces: cleaned and sanitized                          | 0 | 0   | 5     |    | IN  | OUT                                 | NA   | NO  | Conformance with Approved Procedures                             |  |
| 15   | N   | 8  | 0   |      |            | Proper disposition of unsafe food, returned food not re-<br>served    | 0 | 0   | 2     | 2  | 7 0 | 0                                   | 冥    |     | Compliance with variance, specialized process, and<br>HACCP plan |  |

Good Retail Practices are preventive me ures to control the introduction of pathogens, chemicals, and physical objects into foc

L PRACTICES

|    |     |  | GOO |   |   |
|----|-----|--|-----|---|---|
|    |     | OUT=not in compliance COS=con  |     |   |   |
|    |     | Compliance Status  | cos | R | W |
|    | OUT | Safe Food and Water  |     |   |   |
| 28 | 0   | Pasteurized eggs used where required                                       | 0   | 0 | ľ |
| 29 | 0   | Water and ice from approved source   | 0   | 0 |   |
| 30 | 0   | Variance obtained for specialized processing methods                       | 0   | 0 | Ľ |
|    | OUT | Food Temperature Control   |     |   |   |
| 31 | 0   | Proper cooling methods used; adequate equipment for temperature<br>control | 0   | 0 |   |
| 32 | 0   | Plant food properly cooked for hot holding                                 | 0   | 0 | Г |
| 33 | 0   | Approved thawing methods used  | 0   | 0 | 1 |
| 34 | 0   | Thermometers provided and accurate   | 0   | 0 | г |
|    | OUT | Food Identification  |     |   |   |
| 35 | 0   | Food properly labeled; original container; required records available      | 0   | 0 |   |
|    | OUT | Prevention of Food Contamination   |     |   |   |
| 36 | 0   | Insects, rodents, and animals not present                                  | 0   | 0 | : |
| 37 | 328 | Contamination prevented during food preparation, storage & display         | 0   | 0 | 1 |
| 38 | 0   | Personal cleanliness   | 0   | 0 | Г |
| 39 | 0   | Wiping cloths; properly used and stored                                    | 0   | 0 |   |
| 40 | 0   | Washing fruits and vegetables  | 0   | 0 | Г |
|    | OUT | Proper Use of Utensils   |     |   |   |
| 41 | 0   | In-use utensils; properly stored   | 0   | 0 | Г |
| 42 | 0   | Utensils, equipment and linens; properly stored, dried, handled            | 0   | 0 |   |
| 43 | 0   | Single-use/single-service articles; properly stored, used                  | 0   | 0 |   |
| 44 | 10  | Gloves used properly   | 0   | 0 |   |

| pecti |     | R-repeat (violation of the same code provision<br>Compliance Status                       | cos | R  | W   |
|-------|-----|---|-----|----|-----|
|       | OUT | Utensils and Equipment  |     |    |     |
| 45    | 0   | Food and norifood-contact surfaces cleanable, properly designed,<br>constructed, and used | 0   | 0  | 1   |
| 46    | 0   | Warewashing facilities, installed, maintained, used, test strips                          | 0   | 0  | 1   |
| 47    | 0   | Nonfood-contact surfaces clean  | 0   | 0  | •   |
|       | OUT | Physical Facilities   |     |    |     |
| 48    | 0   | Hot and cold water available; adequate pressure   | 0   | 0  | -:  |
| 49    | 0   | Plumbing installed; proper backflow devices   | 0   | 0  | -:  |
| 50    | 0   | Sewage and waste water properly disposed  | 0   | 0  | - 3 |
| 51    | 0   | Toilet facilities: properly constructed, supplied, cleaned                                | 0   | 0  | _   |
| 52    | 0   | Garbage/refuse properly disposed; facilities maintained                                   | 0   | 0  | ١.  |
| 53    | 0   | Physical facilities installed, maintained, and clean                                      | 0   | 0  | _   |
| 54    | 0   | Adequate ventilation and lighting; designated areas used                                  | 0   | 0  |     |
|       | OUT | Administrative Items  |     |    |     |
| 55    | 0   | Current permit posted   | 0   | 0  | П   |
| 56    | 0   | Most recent inspection posted   | 0   | 0  |     |
|       |     | Compliance Status   | YES | NO | 8   |
|       |     | Non-Smokers Protection Act  |     |    |     |
| 57    |     | Compliance with TN Non-Smoker Protection Act  | 18  | 0  |     |
| 58    |     | Tobacco products offered for sale   | 18  | 0  | ١ ١ |
| 59    |     | If tobacco products are sold, NSPA survey completed                                       | 0   | 0  |     |

d post the most recent inspection report in a conspicuous manner. You have the right to request a hearing reg n ten (10) days of the date of th 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

02/06/2023

ture of Environmental Health Specialist. Date

02/06/2023 Date

Signature of Person In Charge

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

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629 ) 9012229200 Please call ( to sign-up for a class.

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



#### Establishment Information

Establishment Name: YNOT BAR & RESTAURANT

Establishment Number #: 605305870

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

| Warewashing Info |                |     |                           |  |  |  |  |
|------------------|----------------|-----|---------------------------|--|--|--|--|
| Machine Name     | Sanitizer Type | PPM | Temperature ( Fahrenheit) |  |  |  |  |
|                  |                |     |                           |  |  |  |  |
|                  |                |     |                           |  |  |  |  |
|                  |                |     |                           |  |  |  |  |
|                  |                |     |                           |  |  |  |  |

| Equipment Temperature             |    |  |  |  |  |
|-----------------------------------|----|--|--|--|--|
| Description Temperature ( Fahrenh |    |  |  |  |  |
| Cooler                            | 39 |  |  |  |  |
| Breakfast cooler                  | 39 |  |  |  |  |
| Freezer                           | -2 |  |  |  |  |
|                                   |    |  |  |  |  |

| Description | State of Food | Temperature ( Fahrenheit |
|-------------|---------------|--------------------------|
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| Observed Violations  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| Total #  |  |  |  |  |  |  |
| Repeated # 0   |  |  |  |  |  |  |
| 37: Water bottle cases stored on the floor.  |  |  |  |  |  |  |
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# TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



| Establishment Information  | 1                |  |
|----------------------------|------------------|--|
| Establishment Name: YNOT E | BAR & RESTAURANT |  |
| Establishment Number: 605  | 305870           |  |

| Comments/Other Observations   |    |
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## Additional Comments

See last page for additional comments.

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<sup>\*\*\*</sup>See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

| Establishment Name: YNOT BAR & RESTAURANT Establishment Number: 605305870 |  |  |  |  |  |                             |          |  |  |
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|   |  |  |  |  |  | Comments/Other Observations | (cont'd) |  |  |
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| Additional Comments (cont'd)  |  |  |  |  |  |                             |          |  |  |
| See last page for additional comments.                                    |  |  |  |  |  |                             |          |  |  |
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Establishment Information

| Establishment Information        |            |            |  |  |  |  |  |
|----------------------------------|------------|------------|--|--|--|--|--|
| Establishment Name: YNOT BAR &   | RESTAURANT |            |  |  |  |  |  |
| Establishment Number #: 60530587 |            |            |  |  |  |  |  |
|                                  |            |            |  |  |  |  |  |
| Sources                          |            |            |  |  |  |  |  |
| Source Type: Foo                 | d Source:  | Rest.Depot |  |  |  |  |  |
| Source Type:                     | Source:    |            |  |  |  |  |  |
| Source Type:                     | Source:    |            |  |  |  |  |  |
| Source Type:                     | Source:    |            |  |  |  |  |  |
| Source Type:                     | Source:    |            |  |  |  |  |  |
| Additional Comments              |            |            |  |  |  |  |  |
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