



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

88

Establishment Name Chile Burrito Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile  
Address 162 4th Ave. No., STE #101 ☐ Temporary ☐ Seasonal  
City Nashville Time in 01:30 PM AM / PM Time out 02:15 PM AM / PM  
Inspection Date 04/03/2024 Establishment # 605174780 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 60

**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.)

| 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              |  | Compliance Status |    |                                  |   |                                  |  |  |   |   |  | COS |                       |                       | R                     |  | WT |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Supervision  |  |  |  |                       |                       |                       |  |   |  |                 |  |                   | IN | OUT                              | NA                                      | NO                               | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods |  |   |   |  |     |                       |                       |                       |  |    |  |  |  |
| 1                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                                  | Person in charge present, demonstrates knowledge, and performs duties                  |  |  |  |                       | <input type="radio"/> | <input type="radio"/> |  |   |  |                 |  |                   | 16 | <input type="radio"/>            | <input type="radio"/>                   | <input type="radio"/>            | <input checked="" type="radio"/>   | Proper cooking time and temperatures                                   |   |   |  |     | <input type="radio"/> | <input type="radio"/> |                       |  |    |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Employee Health  |  |  |  |                       |                       |                       |  |   |  |                 |  |                   | 17 | <input type="radio"/>            | <input type="radio"/>                   | <input type="radio"/>            | <input checked="" type="radio"/>   | Proper reheating procedures for hot holding                            |   |   |  |     | <input type="radio"/> | <input type="radio"/> |                       |  |    |  |  |  |
| 2                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                                  | Management and food employee awareness, reporting                                      |  |  |  |                       | <input type="radio"/> | <input type="radio"/> |  |   |  |                 |  |                   |    | IN                               | OUT                                     | NA                               | NO   | Cooling and Holding, Date Marking, and Time as a Public Health Control |   |   |  |     |                       |                       |                       |  |    |  |  |  |
| 3                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                                  | Proper use of restriction and exclusion  |  |  |  |                       | <input type="radio"/> | <input type="radio"/> |  |   |  |                 |  |                   |    |                                  |   |                                  |  |  |   |   |  |     |                       |                       |                       |  |    |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Good Hygienic Practices  |  |  |  |                       |                       |                       |  |   |  |                 |  |                   | 18 | <input type="radio"/>            | <input checked="" type="radio"/>        | <input type="radio"/>            | <input type="radio"/>  | Proper cooling time and temperature                                    |   |   |  |     | <input type="radio"/> | <input type="radio"/> |                       |  |    |  |  |  |
| 4                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                                  | <input type="radio"/>  | Proper eating, tasting, drinking, or tobacco use |  |  |                       | <input type="radio"/> | <input type="radio"/> |  |   |  |                 |  |                   | 19 | <input checked="" type="radio"/> | <input type="radio"/>                   | <input type="radio"/>            | <input type="radio"/>  | Proper hot holding temperatures  |   |   |  |     | <input type="radio"/> | <input type="radio"/> |                       |  |    |  |  |  |
| 5                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                                  | <input type="radio"/>  | No discharge from eyes, nose, and mouth          |  |  |                       | <input type="radio"/> | <input type="radio"/> |  |   |  |                 |  |                   | 20 | <input checked="" type="radio"/> | <input type="radio"/>                   | <input type="radio"/>            | <input type="radio"/>  | Proper cold holding temperatures                                       |   |   |  |     | <input type="radio"/> | <input type="radio"/> |                       |  |    |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Preventing Contamination by Hands  |  |  |  |                       |                       |                       |  |   |  |                 |  |                   | 21 | <input type="radio"/>            | <input checked="" type="radio"/>        | <input type="radio"/>            | <input type="radio"/>  | Proper date marking and disposition                                    |   |   |  |     | <input type="radio"/> | <input type="radio"/> |                       |  |    |  |  |  |
| 6                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                                  | <input type="radio"/>  | Hands clean and properly washed                  |  |  |                       | <input type="radio"/> | <input type="radio"/> |  |   |  |                 |  |                   | 22 | <input type="radio"/>            | <input type="radio"/>                   | <input checked="" type="radio"/> | <input type="radio"/>  | Time as a public health control: procedures and records                |   |   |  |     | <input type="radio"/> | <input type="radio"/> |                       |  |    |  |  |  |
| 7                 | <input checked="" type="radio"/> | <input type="radio"/>            | <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"/> |                       |  |   |  |                 |  |                   |    | IN                               | OUT                                     | NA                               | NO   | Consumer Advisory  |   |   |  |     |                       |                       |                       |  |    |  |  |  |
| 8                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                                  | Handwashing sinks properly supplied and accessible                                     |  |  |  | <input type="radio"/> | <input type="radio"/> |                       |  |   |  |                 |  |                   |    | 23                               | <input type="radio"/>                   | <input type="radio"/>            | <input checked="" type="radio"/>   | <input type="radio"/>  | Consumer advisory provided for raw and undercooked food       |   |  |     |                       | <input type="radio"/> | <input type="radio"/> |  |    |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Approved Source  |  |  |  |                       |                       |                       |  |   |  |                 |  |                   |    |                                  | IN                                      | OUT                              | NA   | NO   | Highly Susceptible Populations                                |   |  |     |                       |                       |                       |  |    |  |  |  |
| 9                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                                  | Food obtained from approved source   |  |  |  | <input type="radio"/> | <input type="radio"/> |                       |  |   |  |                 |  |                   |    | 24                               | <input type="radio"/>                   | <input type="radio"/>            | <input checked="" type="radio"/>   | <input type="radio"/>  | Pasteurized foods used; prohibited foods not offered          |   |  |     |                       | <input type="radio"/> | <input type="radio"/> |  |    |  |  |  |
| 10                | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> | Food received at proper temperature  |  |  |  | <input type="radio"/> | <input type="radio"/> |                       |  |   |  |                 |  |                   |    |                                  | IN                                      | OUT                              | NA   | NO   | Chemicals   |   |  |     |                       |                       |                       |  |    |  |  |  |
| 11                | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                                  | Food in good condition, safe, and unadulterated  |  |  |  | <input type="radio"/> | <input type="radio"/> |                       |  |   |  |                 |  |                   |    | 25                               | <input type="radio"/>                   | <input type="radio"/>            | <input checked="" type="radio"/>   | <input type="radio"/>  | Food additives: approved and properly used                    |   |  |     |                       | <input type="radio"/> | <input type="radio"/> |  |    |  |  |  |
| 12                | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            | Required records available: shell stock tags, parasite destruction                     |  |  |  | <input type="radio"/> | <input type="radio"/> |                       |  |   |  |                 |  |                   |    | 26                               | <input checked="" type="radio"/>        | <input type="radio"/>            | <input type="radio"/>  | <input type="radio"/>  | Toxic substances properly identified, stored, used            |   |  |     |                       | <input type="radio"/> | <input type="radio"/> |  |    |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                               | Protection from Contamination  |  |  |  |                       |                       |                       |  |   |  |                 |  |                   |    |                                  | IN                                      | OUT                              | NA   | NO   | Conformance with Approved Procedures                          |   |  |     |                       |                       |                       |  |    |  |  |  |
| 13                | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |                                  | Food separated and protected   |  |  |  | <input type="radio"/> | <input type="radio"/> |                       |  |   |  |                 |  |                   |    | 27                               | <input type="radio"/>                   | <input type="radio"/>            | <input checked="" type="radio"/>   | <input type="radio"/>  | Compliance with variance, specialized process, and HACCP plan |   |  |     |                       | <input type="radio"/> | <input type="radio"/> |  |    |  |  |  |
| 14                | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |                                  | Food-contact surfaces: cleaned and sanitized   |  |  |  | <input type="radio"/> | <input type="radio"/> |                       |  |   |  |                 |  |                   |    |                                  |   |                                  |  |  |   |   |  |     |                       |                       |                       |  |    |  |  |  |
| 15                | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                                  | Proper disposition of unsafe food, returned food not re-served                         |  |  |  | <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            |                                  |   |  |   |                       |    |                      |   |   |                                  |                       |    |    |  |  |    |  |  |  |
|----------------------------------|----------------------------------|---|--|---|-----------------------|----|----------------------|---|---|----------------------------------|-----------------------|----|----|--|--|----|--|--|--|
| OUT=not in compliance            |                                  |   |  | COS=corrected on-site during inspection |                       |    |                      | R=repeat (violation of the same code provision) |   |                                  |                       |    |    |  |  |    |  |  |  |
| Compliance Status                |                                  |   |  | COS                                     | R                     | WT | Compliance Status    |   |   |                                  | COS                   | R  | WT |  |  |    |  |  |  |
| Safe Food and Water              |                                  |   |  | Utensils and Equipment                  |                       |    |                      |   |   |                                  |                       |    |    |  |  |    |  |  |  |
| 28                               | <input type="radio"/>            | Pasteurized eggs used where required                                    |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 45                   | <input checked="" type="radio"/>                | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used | <input type="radio"/>            | <input type="radio"/> | 1  |    |  |  |    |  |  |  |
| 29                               | <input type="radio"/>            | Water and ice from approved source                                      |  | <input type="radio"/>                   | <input type="radio"/> | 2  | 46                   | <input type="radio"/>                           | Warewashing facilities, installed, maintained, used, test strips                      | <input type="radio"/>            | <input type="radio"/> | 1  |    |  |  |    |  |  |  |
| 30                               | <input type="radio"/>            | Variance obtained for specialized processing methods                    |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 47                   | <input checked="" type="radio"/>                | Nonfood-contact surfaces clean  | <input type="radio"/>            | <input type="radio"/> | 1  |    |  |  |    |  |  |  |
| Food Temperature Control         |                                  |   |  | Physical Facilities                     |                       |    |                      |   |   |                                  |                       |    |    |  |  |    |  |  |  |
| 31                               | <input type="radio"/>            | Proper cooling methods used; adequate equipment for temperature control |  | <input type="radio"/>                   | <input type="radio"/> | 2  | 48                   | <input type="radio"/>                           | Hot and cold water available; adequate pressure                                       | <input type="radio"/>            | <input type="radio"/> | 2  |    |  |  |    |  |  |  |
| 32                               | <input type="radio"/>            | Plant food properly cooked for hot holding                              |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 49                   | <input type="radio"/>                           | Plumbing installed; proper backflow devices   | <input type="radio"/>            | <input type="radio"/> | 2  |    |  |  |    |  |  |  |
| 33                               | <input type="radio"/>            | Approved thawing methods used   |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 50                   | <input type="radio"/>                           | Sewage and waste water properly disposed  | <input type="radio"/>            | <input type="radio"/> | 2  |    |  |  |    |  |  |  |
| 34                               | <input type="radio"/>            | Thermometers provided and accurate                                      |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 51                   | <input type="radio"/>                           | Toilet facilities: properly constructed, supplied, cleaned                            | <input type="radio"/>            | <input type="radio"/> | 1  |    |  |  |    |  |  |  |
| Food Identification              |                                  |   |  | Administrative Items                    |                       |    |                      |   |   |                                  |                       |    |    |  |  |    |  |  |  |
| 35                               | <input type="radio"/>            | Food properly labeled; original container; required records available   |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 52                   | <input type="radio"/>                           | Garbage/refuse properly disposed; facilities maintained                               | <input type="radio"/>            | <input type="radio"/> | 1  |    |  |  |    |  |  |  |
| Prevention of Food Contamination |                                  |   |  | Compliance Status                       |                       |    |                      | YES   |   |                                  |                       | NO |    |  |  | WT |  |  |  |
| 36                               | <input type="radio"/>            | Insects, rodents, and animals not present                               |  | <input type="radio"/>                   | <input type="radio"/> | 2  | 53                   | <input type="radio"/>                           | Physical facilities installed, maintained, and clean                                  | <input type="radio"/>            | <input type="radio"/> | 1  |    |  |  |    |  |  |  |
| 37                               | <input checked="" type="radio"/> | Contamination prevented during food preparation, storage & display      |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 54                   | <input type="radio"/>                           | Adequate ventilation and lighting; designated areas used                              | <input type="radio"/>            | <input type="radio"/> | 1  |    |  |  |    |  |  |  |
| 38                               | <input type="radio"/>            | Personal cleanliness  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | Administrative Items |   |   |                                  |                       |    |    |  |  |    |  |  |  |
| 39                               | <input type="radio"/>            | Wiping cloths; properly used and stored                                 |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 55                   | <input type="radio"/>                           | Current permit posted   | <input type="radio"/>            | <input type="radio"/> | 0  |    |  |  |    |  |  |  |
| 40                               | <input type="radio"/>            | Washing fruits and vegetables   |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 56                   | <input checked="" type="radio"/>                | Most recent inspection posted   | <input type="radio"/>            | <input type="radio"/> |    |    |  |  |    |  |  |  |
| Proper Use of Utensils           |                                  |   |  | Non-Smokers Protection Act              |                       |    |                      |   |   |                                  |                       |    |    |  |  |    |  |  |  |
| 41                               | <input type="radio"/>            | In-use utensils; properly stored  |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 57                   | <input type="radio"/>                           | Compliance with TN Non-Smoker Protection Act  | <input checked="" type="radio"/> | <input type="radio"/> |    |    |  |  |    |  |  |  |
| 42                               | <input type="radio"/>            | Utensils, equipment and linens; properly stored, dried, handled         |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 58                   | <input type="radio"/>                           | Tobacco products offered for sale   | <input type="radio"/>            | <input type="radio"/> | 0  |    |  |  |    |  |  |  |
| 43                               | <input type="radio"/>            | Single-use/single-service articles; properly stored, used               |  | <input type="radio"/>                   | <input type="radio"/> | 1  | 59                   | <input type="radio"/>                           | If tobacco products are sold, NSPA survey completed                                   | <input type="radio"/>            | <input type="radio"/> |    |    |  |  |    |  |  |  |
| 44                               | <input type="radio"/>            | Gloves used properly  |  | <input type="radio"/>                   | <input type="radio"/> | 1  |                      |   |   |                                  |                       |    |    |  |  |    |  |  |  |

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 68-14-703, 68-14-704, 68-14-706, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge [Signature] Date 04/03/2024 Signature of Environmental Health Specialist [Signature] Date 04/03/2024

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

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



***Establishment Information***

Establishment Name: Chile Burrito  
Establishment Number #: 605174780

***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) |
|------------------------|----------------|-----|---------------------------|
| three compartment sink | Chlorine       | 50  |                           |

***Equipment Temperature***

| Description                       | Temperature ( Fahrenheit) |
|-----------------------------------|---------------------------|
| Front single door reach-in cooler | 38                        |
| Under grill cooler                | 34                        |
| Beer cooler                       | 41                        |
| Walk-in cooler                    | 34                        |

***Food Temperature***

| Description                                 | State of Food | Temperature ( Fahrenheit) |
|---|---------------|---------------------------|
| Shrimp in front single door reach-in cooler | Cold Holding  | 41                        |
| Chicken in front steam well                 | Hot Holding   | 136                       |
| Diced tomatoes in front cold line           | Cold Holding  | 41                        |
| Crema in front beer cooler                  | Cold Holding  | 41                        |
| Fajita veggies in under grill cooler        | Cold Holding  | 39                        |
| Salsa verde in walk-in cooler               | Cold Holding  | 40                        |
| Pork in walk-in cooler                      | Cold Holding  | 39                        |

### Observed Violations

Total # 9

Repeated # 0

13: Observed fresh shelled eggs stored over beer; Corrective Action: rotated product, discussed proper vertical storage with person in charge

18: Observed beans prepped in at 10 AM holding in walk-in cooler at 87 F with a covered lid. Person in charge states they were brought to a simmer, left to cool for an hour to cool ambiently, and then placed in walk-in cooler. Corrective Action: removed lid from beans, stirred to cool

21: Observed brisket and beans stored in walk-in cooler without date marking; Corrective Action: as ertained cate prepped, labelled. Discussed proper date marking with person in charge.

21: Observed multiple house made sauces in squeeze bottles stored without date marking in walk-in cooler and front line; Corrective Action: discussed 24 hour date marking of tcs foods with person in charge, ascertained date and labelled product

37: Observed multiple employee drinks without lids stored on preparation surfaces throughout kitchen

37: Observed employee phone stored on tortillas

45: Racks in walk-in cooler covered in rust with chipping paint

47: Interior of ice machine has black residue

56: Report from 2022 posted

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**Establishment Information**

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Establishment Number : 605174780

**Comments/Other Observations**

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: An employee health policy is present.
- 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: Observed employees washing hands with proper technique .
- 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 information
- 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.
- 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 cooking observed
- 17: (NO) No TCS foods reheated during inspection.
- 19: See food info
- 20: See food info
- 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.
- 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.***

\*\*\*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: Chile Burrito

Establishment Number : 605174780

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

***See last page for additional comments.***

### Establishment Information

|                     |               |
|---------------------|---------------|
| Establishment Name: | Chile Burrito |
|---------------------|---------------|

|                         |           |
|-------------------------|-----------|
| Establishment Number #: | 605174780 |
|-------------------------|-----------|

### Sources

|              |      |
|--------------|------|
| Source Type: | Food |
|--------------|------|

Source: Sysco

Source Type:

Source:

Source Type:

Source:

Source Type:

Source:

Source Type:

Source:

### ***Additional Comments***