

Establishment Name

Address

City

TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

Permanent O Mobile Type of Establishment O Temporary O Seasonal

Time in 01:15 PM AM / PM Time out 02:05; PM

SCORE

12/12/2019 Establishment # 605127169 Embargoed 0 Inspection Date O Follow-up Purpose of Inspection **E**Routine O Complaint O Preliminary O Consultation/Other

Number of Seats 188 Risk Category О3 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

| 10 | ¥=in c | omplii | ance | | OUT=not in compliance NA=not applicable NO=not observe | ed | | 0 |
|----|--------|--------|------|----|---|-----|---|----|
| | | | | | Compliance Status | cos | R | WT |
| | IN | OUT | NA | NO | Supervision | | | |
| 1 | 糕 | 0 | | | Person in charge present, demonstrates knowledge, and performs duties | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Employee Health | | | |
| 2 | -MC | 0 | | | Management and food employee awareness; reporting | 0 | 0 | |
| 3 | 寒 | 0 | | | Proper use of restriction and exclusion | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Good Hygienic Practices | | | |
| 4 | X | 0 | | 0 | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | |
| 5 | * | 0 | | 0 | No discharge from eyes, nose, and mouth | 0 | 0 | |
| | IN | OUT | NA | NO | Preventing Contamination by Hands | | | |
| 6 | 黨 | 0 | | 0 | Hands clean and properly washed | 0 | 0 | |
| 7 | 왮 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved alternate procedures followed | 0 | 0 | 5 |
| 8 | X | 0 | | | Handwashing sinks properly supplied and accessible | 0 | 0 | 2 |
| | IN | OUT | NA | NO | Approved Source | | | |
| 9 | 黨 | 0 | | | Food obtained from approved source | 0 | 0 | |
| 10 | 0 | 0 | 0 | × | Food received at proper temperature | 0 | 0 | 1 |
| 11 | × | 0 | | | Food in good condition, safe, and unadulterated | 0 | 0 | 5 |
| 12 | 0 | 0 | × | 0 | Required records available: shell stock tags, parasite destruction | 0 | 0 | |
| | IN | OUT | NA | NO | Protection from Contamination | | | |
| 13 | × | 0 | 0 | | Food separated and protected | 0 | 0 | 4 |
| 14 | × | 0 | 0 | | Food-contact surfaces: cleaned and sanitized | 0 | 0 | 5 |
| 45 | _ | 912 | | | Proper disposition of unsafe food, returned food not re- | | _ | 2 |

El Porton Mexican Restaurant

2095 Merchants Row

Germantown

| | Compliance status | | | | | | К | *** |
|----|-------------------|-----|----|----|---|---|---|-----|
| | IN | OUT | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | |
| 16 | | 0 | 0 | 0 | Proper cooking time and temperatures | 0 | 0 | |
| 17 | 0 | 0 | 0 | 3% | Proper reheating procedures for hot holding | 0 | 0 | 9 |
| | IN | оит | NA | NO | Cooling and Holding, Date Marking, and Time as a Public Health Control | | | |
| 18 | 0 | 0 | 0 | × | Proper cooling time and temperature | 0 | 0 | |
| 19 | × | 0 | 0 | 0 | Proper hot holding temperatures | 0 | 0 | |
| 20 | 0.00 | 0 | 0 | | Proper cold holding temperatures | 0 | 0 | 5 |
| 21 | * | 0 | 0 | 0 | Proper date marking and disposition | 0 | 0 | |
| 22 | 0 | 0 | × | 0 | Time as a public health control: procedures and records | 0 | 0 | |
| | IN | OUT | NA | NO | Consumer Advisory | | | |
| 23 | 0 | 0 | × | | Consumer advisory provided for raw and undercooked food | 0 | 0 | 4 |
| | IN | OUT | NA | NO | Highly Susceptible Populations | | | |
| 24 | 氮 | 0 | 0 | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Chemicals | | | |
| 25 | | 0 | 0 | | Food additives: approved and properly used | 0 | 0 | 5 |
| 26 | 黨 | 0 | | | Toxic substances properly identified, stored, used | 0 | 0 | , |
| | IN | OUT | NA | NO | Conformance with Approved Procedures | | | |
| 27 | 0 | 0 | × | | Compliance with variance, specialized process, and HACCP plan | 0 | 0 | 5 |

| | | OUT-not in compliance COS-com | GOO | | |
|----|------|--|-----|---|----|
| | | OUT=not in compliance COS=com Compliance Status | COS | | |
| | TOUT | | | | - |
| 28 | | Pasteurized eggs used where required | 0 | 0 | - |
| 29 | lŏ | Water and ice from approved source | ŏ | ŏ | ١. |
| 30 | ŏ | Variance obtained for specialized processing methods | ŏ | ŏ | H |
| | OUT | Food Temperature Control | 1 | | |
| 31 | 0 | Proper cooling methods used; adequate equipment for temperature control | 0 | 0 | Ŀ |
| 32 | 0 | Plant food properly cooked for hot holding | 0 | 0 | Н |
| 33 | Ō | Approved thawing methods used | O | ō | Н |
| 34 | XX | 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 | Г |
| 37 | 0 | Contamination prevented during food preparation, storage & display | 0 | 0 | Г |
| 38 | 0 | Personal cleanliness | 0 | 0 | г |
| 39 | 0 | Wiping cloths; properly used and stored | 0 | 0 | г |
| 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 | Г |
| 43 | 0 | Single-use/single-service articles; properly stored, used | 0 | 0 | Г |
| 44 | 0 | Gloves used properly | 0 | 0 | г |

| spect | ion | R-repeat (violation of the same code provision |) | | | | | | |
|-------|----------------------------|--|-----|---|----|--|--|--|--|
| | | Compliance Status | COS | R | WT | | | | |
| | OUT Utensils and Equipment | | | | | | | | |
| 45 | 0 | 0 | 0 | 1 | | | | | |
| 46 | 0 | Warewashing facilities, installed, maintained, used, test strips | 0 | 0 | 1 | | | | |
| 47 | 0 | Nonfood-contact surfaces clean | 0 | 0 | 1 | | | | |
| | OUT | Physical Facilities | | | | | | | |
| 48 | 0 | Hot and cold water available; adequate pressure | 0 | 0 | 2 | | | | |
| 49 | 0 | Plumbing installed; proper backflow devices | 0 | 0 | 2 | | | | |
| 50 | 0 | Sewage and waste water properly disposed | 0 | 0 | 2 | | | | |
| 51 | 0 | Toilet facilities: properly constructed, supplied, cleaned | 0 | 0 | 1 | | | | |
| 52 | 0 | Garbage/refuse properly disposed; facilities maintained | 0 | 0 | 1 | | | | |
| 53 | 3% | Physical facilities installed, maintained, and clean | 0 | X | 1 | | | | |
| 54 | 0 | Adequate ventilation and lighting; designated areas used | 0 | 0 | 1 | | | | |
| | OUT | Administrative Items | Т | | | | | | |
| 55 | 0 | Current permit posted | ि | 0 | 0 | | | | |
| 56 | 0 | Most recent inspection posted | 0 | 0 | ۰ | | | | |
| | Compliance Status | | | | | | | | |
| | | | | | | | | | |
| 57 | | Compliance with TN Non-Smoker Protection Act | - X | 0 | | | | | |
| 58 | | Tobacco products offered for sale | 0 | 0 | 0 | | | | |
| 59 | | If tobacco products are sold, NSPA survey completed | 0 | 0 | | | | | |

You have the right to request a h (10) days of the date of the

> 12/12/2019 2000 Date

12/12/2019

Signature of Person In Charge

Date

**** 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: El Porton Mexican Restaurant

Establishment Number #: |605127169

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) | | | | | | |
| Cleaner solutions washer | Chlorine | 100 | | | | | | | |

| Equipment Temperature | | | | | | | |
|-----------------------|---------------------------|--|--|--|--|--|--|
| Description | Temperature (Fahrenheit) | | | | | | |
| Prep cooler | 38 | | | | | | |
| Cooler under grill | 40 | | | | | | |
| Walk in | 38 | | | | | | |
| Walk i. Freezer | 2 | | | | | | |

| Description | State of Food | Temperature (Fahrenheit |
|-----------------|---------------|--------------------------|
| Swlsa guacamole | Cold Holding | 37 |
| Beef | Cold Holding | 39 |
| Shrimp | Cold Holding | 39 |
| Chorizo | Cold Holding | 38 |
| Tomatoes | Cold Holding | 36 |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Information



| Establishment Number: 605127169 Comments/Other Observations | |
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| Comments/Other Observations | |
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| Establishment Name: El Porton Mexican Restaurant | | | | | | |
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| Establishment Number: 605127169 | | | | | | |
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| Comments/Other Observations (cont'd) | | | | | | |
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Establishment Information

| Establishment Information | | | | | | | |
|---------------------------|----------------------|---------|-------|---|--|--|--|
| Establishment Name: | Porton Mexican Resta | urant | | | | | |
| Establishment Number #: | 605127169 | | | 1 | | | |
| | | | | | | | |
| Sources | | | | | | | |
| Source Type: | Food | Source: | Sysco | | | | |
| Source Type: | | Source: | | | | | |
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