

Establishment Name

Inspection Date

Address

City

El Meson

Chattanooga

2204 Hamilton Place Blvd.

# TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

SCORE

Remanent O Mobile Type of Establishment

O Temporary O Seasonal

Time in 11:50; AM AM / PM Time out 12:30; PM AM / PM

05/26/2021 Establishment # 605165027 Embargoed 0

Purpose of Inspection **K**Routine O Follow-up O Complaint O Preliminary O Consultation/Other

Number of Seats 101 Risk Category О3 Follow-up Required O Yes 疑 No

#### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

12	¥=in c	ompli	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	$\mathbb{R}^{\mathbb{C}}$	0			Management and food employee awareness; reporting	0	0	
3	×	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
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	0
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	黨	0		0	Hands clean and properly washed	0	0	
7	鼷	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×	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	
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
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

	Compliance Status						R	WT
	IN OUT NA NO Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods							
16	凝		0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	٠
	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	243	0	0		Proper cold holding temperatures	0	0	5
21	250	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	0	0	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	菜	0			Toxic substances properly identified, stored, used	0	0	9
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

#### s to control the introduction of pathoge ns, chemicals, and physical objects into foods.

		0.00	G00		
		OUT=not in compliance COS=com Compliance Status	COS		_
	OUT		000	K	
28	0		0		
29	18	Pasteurized eggs used where required Water and ice from approved source	_	2	_
30	18	Variance obtained for specialized processing methods	8	8	F
30	OUT	Food Temperature Control		0	_
	001		_		_
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	1
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	Г
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	0	Contamination prevented during food preparation, storage & display	0	0	
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	$\overline{}$		Т
41	0	In-use utensils; properly stored	0	0	Г
42	100	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г
43	0	Single-use/single-service articles; properly stored, used	0	0	Т
44		Gloves used properly	0	0	-

pecti		R-repeat (violation of the same code provision)  Compliance Status	cos	R	W)
	OUT	Utensiis and Equipment	000		
45	Ħ	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	凝	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	- 3
49	0	Plumbing installed; proper backflow devices	0	0	-:
50	0	Sewage and waste water properly disposed	0	0	- 3
51	0	O Toilet facilities: properly constructed, supplied, cleaned		0	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	١.
53	200	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	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 100	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	0	

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

05/26/2021

05/26/2021 Date

Signature of Person In Charge

Date Signature of Environment

\*\*\*\* 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



Estab	lish	ment	Inform	ation

Establishment Name: El Meson

Establishment Number #: | 605165027

#### 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)						
Sani bucket Dish machine	Quat Chlorine	400 100							

Equipment Temperature								
Description	Temperature ( Fahrenheit							

Food Temperature						
Description	State of Food	Temperature ( Fahrenheit)				
Cut toms	Cold Holding	41				
Carnitas	Cold Holding	38				
Pico	Cold Holding	40				
Raw chx	Cold Holding	39				
Ground beef	Cooking	172				
Rice	Hot Holding	147				
Beans	Hot Holding	150				
Salsa	Cold Holding	39				
Raw beef	Cold Holding	39				

Observed Made de la companya del companya del companya de la compa										
Observed Violations										
Total # 4										
12: Utensils stored behind stainless border in dish area. Utensils should be stored in sanitized area. 15: Gaskets in poor repair. 17: Build up around walkin shelving.										
53: Floor tiles missing, wall by hand sink in poor repair.										
oo. Hoor thes missing, wan by hand sink in poor repair.										

<sup>&</sup>quot;"See page at the end of this document for any violations that could not be displayed in this space.

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



#### Establishment Information

Establishment Name: El Meson Establishment Number: 605165027

### Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: (IN): An employee health policy is available.
- 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: Hands washed
- 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: Approved
- 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: (IN) All raw animal foods cooked to proper temperatures.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See food temps
- 20: See food temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NA) No food held under time as a public health control.
- 23: On menu
- 24: (NA) A highly susceptible population is not served.
- 25: (NA) Establishment does not use any additives or sulfites on the premises.

**|**26:

27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.

57:

58:

## Additional Comments

See last page for additional comments.

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

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Establishment Information	
Establishment Name: El Meson	
Establishment Number: 605165027	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
see last page for additional comments.	

Establishment Inform				
Establishment Name:				
Establishment Number #:	605165027			
Sources				
Source Type:	Water	Source:	Tnam	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Commer	nts			