

Address

Inspection Date

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit **KRAB KINGS** Remanent O Mobile Establishment Name Type of Establishment 7140 STAGE RD O Temporary O Seasonal Memphis Time in 01:49 PM AM / PM Time out 02:35; PM

Embargoed 000 O Follow-up Purpose of Inspection **K**Routine O Complaint O Preliminary O Consultation/Other

10/19/2022 Establishment # 605255669

Number of Seats 88 Risk Category О3 04 Follow-up Required 级 Yes O No

| - 12 | 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) | | | | | | | | | | | | | | | | | |
|---------|--|-----|----|------|---|---|---|-----|-------------------|-----|-------|-------|------|-----------|--|---|----|-----|
| \perp | Compliance Status | | | COS | OS R WT Compliance Status | | | | Compliance Status | cos | R | WT | | | | | | |
| | IN | OUT | NA | NO | Supervision | | | | ш | 11 | 1 01 | UT. | NA | NO | Cooking and Reheating of Time/Temperature | | | |
| Ε. | 6=2 | _ | - | | Person in charge present, demonstrates knowledge, and | _ | | _ | 11 | " | ١, | ٠. ا | | | Control For Safety (TCS) Foods | | | |
| יו | 氮 | 0 | | | performs duties | 0 | 0 | 5 | ΙĪ | 6 X | 8 | 0 | 0 | 0 | Proper cooking time and temperatures | 0 | 0 | |
| | IN | OUT | NA | NO | Employee Health | | | |] [1 | 7 C | 7 | o | 0 | X | Proper reheating procedures for hot holding | 0 | 0 | l v |
| 2 | DK. | 0 | | | Management and food employee awareness; reporting | 0 | 0 | | 1 Г | Τ | | | | | Cooling and Holding, Date Marking, and Time as | | | |
| 3 | × | 0 | | | Proper use of restriction and exclusion | 0 | 0 | 5 | Ш | 11 | 1 0 | UT | NA | NO | a Public Health Control | | | |
| | IN | OUT | NA | NO | Good Hygienic Practices | | | | 1 17 | 8 C | गर | 5 | 0 | × | Proper cooling time and temperature | 0 | 0 | |
| 4 | X | 0 | | | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | 5 | | 9 3 | | | 0 | 0 | Proper hot holding temperatures | 0 | 0 | |
| 5 | * | 0 | | 0 | No discharge from eyes, nose, and mouth | 0 | 0 | ľ |] [2 | 0 2 | ST C | 0 | 0 | | Proper cold holding temperatures | 0 | ō | 5 |
| | | - | NA | NO | Proventing Contamination by Hands | | | |] [2 | 1 C | Пβ | K | 0 | 0 | Proper date marking and disposition | 0 | 0 | 1 |
| 6 | 100 | 0 | | 0 | Hands clean and properly washed | 0 | 0 | | ₂ | 2 0 | م ا د | o | × | 0 | Time as a public health control: procedures and records | 0 | 0 | |
| 7 | 왮 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved | 0 | | | ΙĽ | | | | | _ | | _ | Ľ | |
| Ė. | - | _ | | _ | alternate procedures followed | _ | | L. | Į Į | 11 | 1 0 | UT | NA | NO | Consumer Advisory | | _ | |
| 8 | | | | EDS. | Handwashing sinks properly supplied and accessible | 0 | 0 | 2 | . II2 | 3 C | o I o | o : | x l | | Consumer advisory provided for raw and undercooked | 0 | Ιo | 4 |
| | | | NA | NO | | _ | | _ | łΕ | + | | _ | | - | food | _ | _ | |
| 9 | 嵩 | | | _ | Food obtained from approved source | 0 | 0 | Į . | ΙН | 11 | 1 01 | UI | NA | NO | Highly Susceptible Populations | | _ | _ |
| 10 | | o | | × | Food received at proper temperature | 0 | 0 | 5 | ₂ | 4 C | ol d | o li | ss l | | Pasteurized foods used; prohibited foods not offered | 0 | lο | 5 |
| 111 | × | 0 | _ | | Food in good condition, safe, and unadulterated | 0 | 0 | l ° | ш | 1 | _ | - | | _ | , | _ | _ | _ |
| 12 | 0 | 0 | × | 0 | Required records available: shell stock tags, parasite destruction | 0 | | | 11 | 1 0 | UT | NA | NO | Chemicals | | | | |
| | | | NA | NO | Protection from Contamination | | | | | 5 C | _ | | X(| | Food additives: approved and properly used | 0 | 0 | - |
| 13 | Ŕ | 0 | | | Food separated and protected | 0 | 0 | 4 |] [2 | 6 8 | हि | o 📗 | | | Toxic substances properly identified, stored, used | 0 | 0 | , |
| 14 | 0 | 寒 | 0 | | Food-contact surfaces: cleaned and sanitized | 0 | 0 | 5 | 1 [| 11 | 1 0 | UT | NA | NO | Conformance with Approved Procedures | | | |
| 15 | Ħ | 0 | | | Proper disposition of unsafe food, returned food not re- served | 0 | 0 | 2 |] [2 | 7 C | 9 | 9 | × | | Compliance with variance, specialized process, and HACCP plan | 0 | 0 | 5 |

| | GOOD RETAIL PRACTICES | | | | | | | | | | |
|---|-----------------------|---|-----|---|----|-----|---|--|---------------|---|---------------|
| OUT=not in compliance COS=corrected on-site during inspection R-repeat (violation of the same code provision) | | | | | | | | | $\overline{}$ | | |
| | | Compliance Status | cos | R | WT | 1 🗀 | | Compliance Status | COS | R | WT |
| | OUT | Safe Food and Water | | | | | OUT Utensils and Equipment | | | | |
| 28 29 | | Pasteurized eggs used where required Water and ice from approved source | 8 | _ | | 45 | 5 🔣 | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used | 0 | 0 | 1 |
| 30 | | Variance obtained for specialized processing methods | ŏ | ŏ | 1 | 1 — | | | +- | _ | |
| | OUT | | _ | 1 | | 46 | 6 O | Warewashing facilities, installed, maintained, used, test strips | 0 | 0 | 1 |
| 31 | 0 | Proper cooling methods used; adequate equipment for temperature | 0 | 6 | 2 | 47 | 7 🕱 | Nonfood-contact surfaces clean | 0 | 0 | 1 |
| ١ ٠٠ | ١~ | control | - | - | 1 | | OUT | Physical Facilities | | | |
| 32 | 0 | Plant food properly cooked for hot holding | 0 | 0 | 1 | 48 | 8 0 | Hot and cold water available; adequate pressure | 0 | 0 | 2 |
| 33 | 0 | Approved thawing methods used | 0 | 0 | 1 | 49 | 9 🚊 | Plumbing installed; proper backflow devices | 0 | 0 | 2 |
| 34 | 0 | Thermometers provided and accurate | 0 | 0 | 1 | 50 | 0 0 | Sewage and waste water properly disposed | 0 | 0 | 2 |
| | OUT | Food Identification | | | | 51 | 51 O Toilet facilities: properly constructed, supplied, cleaned | | 0 | 0 | 1 |
| 35 | Ж | Food properly labeled; original container, required records available | 0 | 0 | 1 | 52 | 2 0 | Garbage/refuse properly disposed; facilities maintained | 0 | 0 | 1 |
| | OUT | Prevention of Food Contamination | | | | 53 | 3 💥 | Physical facilities installed, maintained, and clean | 0 | 0 | 1 |
| 36 | 0 | Insects, rodents, and animals not present | 0 | 0 | 2 | 54 | 4 🐹 | Adequate ventilation and lighting; designated areas used | 0 | 0 | 1 |
| 37 | 338 | Contamination prevented during food preparation, storage & display | 0 | 0 | 1 | | OUT | Administrative Items | | | |
| 38 | 0 | Personal cleanliness | 0 | О | 1 | 55 | 5 頒 | Current permit posted | 0 | О | |
| 39 | 0 | Wiping cloths; properly used and stored | 0 | 0 | 1 | 56 | 6 0 | Most recent inspection posted | 0 | 0 | l ° I |
| 40 | 0 | Washing fruits and vegetables | 0 | 0 | 1 | 1 🗀 | | | | | WT |
| | OUT | Proper Use of Utensils | | _ | _ | 1 🗀 | Non-Smokers Protection Act | | | _ | \neg |
| 41 | 0 | In-use utensils; properly stored | 0 | 0 | 1 | 57 | | Compliance with TN Non-Smoker Protection Act | X | 0 | \Box |
| 42 | | Utensils, equipment and linens; properly stored, dried, handled | 0 | 0 | 1 | 58 | 8 | Tobacco products offered for sale | 0 | 0 | 0 |
| 43 | | Single-use/single-service articles; properly stored, used | 0 | 0 | | 58 | 9 | If tobacco products are sold, NSPA survey completed | 0 | 0 | |
| 44 | 10 | Gloves used properly | 0 | 0 | 1 | 1 — | | | | | $\overline{}$ |

ten (10) days of the date of the

10/19/2022 10/19/2022 Date

**** 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 Inf | formation | |
|----------------------|------------------|--|
| Establishment Name: | KRAB KINGS | |
| Establishment Number | 605255669 | |

| 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 wenty-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. | |
| Sarage type doors in non-enclosed areas are not completely open. | |
| Fents 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) | | | | |
| 3 compartment sink | Qac | | | | | | |

| Equipment Temperature | | | | | | |
|----------------------------------|----|--|--|--|--|--|
| Description Temperature (Fahren | | | | | | |
| Walk in cooler | 40 | | | | | |
| Reach in freezer (hoshizaki) | 3 | | | | | |
| Reach in freezer | 0 | | | | | |
| | | | | | | |

| Food Temperature | | | | | | |
|------------------|---------------|--------------------------|--|--|--|--|
| Description | State of Food | Temperature (Fahrenheit) | | | | |
| Crab pasta | Cold Holding | 37 | | | | |
| Cole slaw | Cold Holding | 36 | | | | |
| Corn | Hot Holding | 135 | | | | |
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| Observed Violations |
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| Total # 10 |
| Repeated # () |
| 14: Drink machine ice dispenser needs to be washed, rinsed and sanitized.21: No date marking. Please date mark food thats been cooked and held over 24 |
| hours. |
| 35: Unlabeled containers of food in cooler. Containers of flavored butters are not labeled. |
| 37: Uncovered food in walk in cooler. |
| 45: Cutting boards need to be replaced. They have too many grooves. |
| 47: Build up on fryers. 49: Hand sink pipe leaks. |
| 53: Hand sink is dirty. Walls and floors ate dirty. |
| 54: Ventilation hood needs to be clean. Its dusty. |
| 55: Current permit is expired and needs to be renewed. |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Information



| Establishment Name: KRAB KINGS | |
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| Establishment Number: 605255669 | |
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| Establishment Information | | | | | | | |
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