

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

| SCORE |
|-------|
|-------|

O Farmer's Market Food Unit Moto Permanent O Mobile Establishment Name Type of Establishment 1120 McGavock St. O Temporary O Seasonal Address Nashville Time in 06:15 PM AM/PM Time out 06:20: PM AM/PM City 03/20/2024 Establishment # 605240288 Embargoed 0 Inspection Date

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

О3

Number of Seats 200

04

Follow-up Required

| 10 | 4≃in c | ompli | ance | | OUT=not in compliance NA=not applicable NO=not observ | | | | S=00 | rrecte | d on-si | te duri | ing ins | pection | | | | | | | |
|----|--------|-------|------|------|--|-----|-------|-----|----------|--------|---------|---------|---------|-----------------------------|---|--|--|--|--|--|-------------|
| | | | | | Compliance Status | cos | R | WT | | | | | | Comp | | | | | | | |
| | IN | оит | NA | NO | Supervision | | | | | IN | оит | NA | NO | Cooking as | | | | | | | |
| 1 | 器 | 0 | | | Person in charge present, demonstrates knowledge, and performs duties | 0 | 0 | 5 | 16 | 0 | 0 | 0 | 327 | Proper cooking | | | | | | | |
| | IN | OUT | NA | NO | Employee Health | | | | 17 | _ | ŏ | ŏ | 100 | Proper reheating | | | | | | | |
| 2 | 300 | 0 | | _ | Management and food employee awareness; reporting | 0 | 0 0 | | 0 0 | | 0 0 | | ा । | | ा | | | | | | Cooling and |
| 3 | × | 0 | | | Proper use of restriction and exclusion | 0 | 0 | 5 | | IN | OUT | NA | NO | | | | | | | | |
| | IN | OUT | NA | NO | Good Hygienic Practices | | | | 18 | 100 | 0 | 0 | 0 | Proper cooling | | | | | | | |
| 4 | X | 0 | | 0 | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | 5 | 15 | | 0 | 0 | 0 | Proper hot hole | | | | | | | |
| 5 | * | 0 | | 0 | No discharge from eyes, nose, and mouth | 0 | 0 | l ° | 20 | 0-00 | 0 | 0 | | Proper cold ho | | | | | | | |
| | IN | OUT | NA | NO | Proventing Contamination by Hands | | | | 21 | 100 | 0 | 0 | 0 | Proper date ma | | | | | | | |
| 6 | 黨 | 0 | | 0 | Hands clean and properly washed | 0 | 0 | | 22 | 0 | 0 | × | 0 | Time as a publ | | | | | | | |
| 7 | 800 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved | 0 | 0 | 5 | | | _ | | _ | Title as a poo | | | | | | | |
| | - | | _ | _ | alternate procedures followed | - | - | _ | \vdash | IN | OUT | NA | NO | | | | | | | | |
| 8 | 350 | 0 | NA | LIPS | Handwashing sinks properly supplied and accessible | 0 | 0 0 2 | | 23 | 黨 | 0 | 0 | | Consumer adv | | | | | | | |
| _ | IN | | NA | NO | Approved Source | - | _ | - | \vdash | - | | *** | | food | | | | | | | |
| 9 | 黨 | 0 | _ | _ | Food obtained from approved source | 0 | 0 | | | IN | OUT | NA | NO | Higi | | | | | | | |
| 10 | 0 | 0 | 0 | 100 | Food received at proper temperature | 0 | 0 | 5 | 24 | 0 | l٥l | 320 | | Pasteurized for | | | | | | | |
| 11 | × | 0 | | _ | Food in good condition, safe, and unadulterated | 0 | 0 0 5 | | 1 | _ | Ŭ | - | \perp | - dotted Edd 10 | | | | | | | |
| 12 | M | 0 | 0 | 0 | Required records available: shell stock tags, parasite destruction | 0 | 0 | | | IN | OUT | NA | NO | | | | | | | | |
| | IN | OUT | NA | NO | Protection from Contamination | | | | 25 | | 0 | 3% | | Food additives | | | | | | | |
| 13 | 黛 | 0 | 0 | | Food separated and protected | 0 | 0 | 4 | 26 | 黨 | 0 | | | Toxic substance | | | | | | | |
| 14 | × | 0 | 0 | 1 | Food-contact surfaces: cleaned and sanitized | 0 | 0 | 5 | | IN | OUT | NA | NO | Conform | | | | | | | |
| 15 | × | 0 | | | Proper disposition of unsafe food, returned food not re- served | 0 | 0 | 2 | 27 | 0 | 0 | × | | Compliance wi HACCP plan | | | | | | | |

| Compliance Status | | | | | | cos | R | WT |
|-------------------|----|-----|-----|-----|---|-----|---|-----|
| | IN | OUT | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | |
| 16 | 0 | 0 | 0 | 黨 | Proper cooking time and temperatures | 0 | 0 | 5 |
| 17 | 0 | 0 | 0 | 300 | Proper reheating procedures for hot holding | 0 | 0 | Ů |
| | 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 | 1 1 |
| 20 | 24 | 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 | 0 | 0 | 333 | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Chemicals | | | |
| 25 | 0 | | 3% | | Food additives: approved and properly used | 0 | 0 | - |
| 26 | × | 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 |

O Yes 疑 No

s to control the introduction of pathogens, chemicals, and physical objects into foods.

| | | OUT=not in compliance COS=con | ected or | 1-site | du |
|----|-----|--|----------|--------|----|
| | | Compliance Status | cos | | _ |
| | OUT | Safe Food and Water | | _ | _ |
| 28 | 0 | Pasteurized eggs used where required | 0 | 0 | г |
| 29 | 0 | Water and ice from approved source | 0 | 0 | |
| 30 | 0 | Variance obtained for specialized processing methods | 0 | 0 | - |
| | OUT | Food Temperature Control | | | |
| 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 | |
| 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 | 1 |
| 37 | 0 | 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 | г |
| 40 | 0 | Washing fruits and vegetables | 0 | 0 | г |
| | OUT | Proper Use of Utensils | | | |
| 41 | 0 | In-use utensils; properly stored | 0 | 0 | Ē |
| 42 | 200 | 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 | _ |

| | | R-repeat (violation of the same code provision Compliance Status | cos | R | W |
|----|-----|---|-----|----|-----|
| | OUT | Utensils and Equipment | | | |
| 45 | 0 | Food and norifood-contact surfaces cleanable, properly designed, 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 | 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 | - |
| 50 | 0 | Sewage and waste water properly disposed | 0 | 0 | - 2 |
| 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 | Т | | |
| 55 | 0 | Current permit posted | ि | 0 | Г |
| 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 | - X | 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 h n (10) days of the date of the

03/20/2024

Signature of Person In Charge

Date

03/20/2024

**** 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) 6153405620 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



| Establishment Information | | | | | | | | |
|---|--|-------------------------------|--------------------|----------|--|--|--|--|
| Establishment Name: MOto | | | | | | | | |
| Establishment Number #: 605240288 | | | | | | | | |
| MCDA Common To be completed if | #F7 := #M=# | | | | | | | |
| NSPA Survey – To be completed if | | facilities at all times to ne | ersons who are | | | | | |
| 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 n | Garage type doors in non-enclosed areas are not completely open. | | | | | | | |
| Tents or awnings with removable sides or vents | s in non-enclosed areas are r | not completely removed o | r open. | | | | | |
| Smoke from non-enclosed areas is infiltrating in | nto areas where smoking is p | rohibited. | | | | | | |
| Smoking observed where smoking is prohibited | i by the Act. | | | | | | | |
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| Warewashing Info | | | 1 | | | | | |
| Machine Name | Sanitizer Type | PPM | Temperature (Fah | renneit) | | | | |
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| | l . | | | | | | | |
| Equipment Temperature | | | | | | | | |
| Description | | | Temperature (Fahr | renhelt) | | | | |
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| Food Temperature | | | | | | | | |
| Description | | State of Food | Temperature (Fahi | renhelt) | | | | |
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| Observed Violations |
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| Total # 1 Repeated # 0 |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



| Establishment Information | |
|--|----|
| Establishment Name: Moto | |
| Establishment Number: 605240288 | |
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| Comments/Other Observations | |
| 1: | |
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Additional Comments See last page for additional comments.

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| Establishment Name: Moto | | | | |
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| Establishment Number: 605240288 | | | | |
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| Comments/Other Observations (cont'd) | | | | |
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| Additional Comments (cont'd) | | | | |
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Establishment Information