

Establishment Name

Inspection Date

Purpose of Inspection

IN OUT NA NO

14 寒 O O

15 夏 0

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

O Temporary O Seasonal

SCORE

O Permanent MMobile Type of Establishment

03/08/2023 Establishment # 605263414 Embargoed 0

O Complaint

O Preliminary O Consultation/Other

Time in 08:58 AM AM / PM Time out 09:09; AM

Number of Seats 0 Risk Category О3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

			rk de	elgne	ted compliance status (IK, OUT, HA, HO) for each numbered Her	n. For	lem	mark
117	≱ in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observ	ed		co
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	盔	٥			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			*****
2	ЭK	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion	0	0	•
	IN	OUT	NA	NO	Good Hygienic Practices			
4	0	0		X	Proper eating, tasting, drinking, or tobacco use	0	0	
5	0	0		200	No discharge from eyes, nose, and mouth	0	0	0
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	0	0		3%	Hands clean and properly washed	0	0	
7	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	200	0			Food obtained from approved source	0	0	
10	0	0	0	3%	Food received at proper temperature	0	0	
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	Ж	0	Required records available: shell stock tags, parasite destruction	0	0	

Protection from Contamination

Food separated and protected

Food-contact surfaces: cleaned and sanitized

Proper disposition of unsafe food, returned food not re

Kona Ice Of Wilson County Truck #2

O Follow-up

173 Village Cir

Lebanon

KRoutine

Compliance Status			COS	к	WI			
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	黨	0	Proper cooking time and temperatures	0	0	5
17	0	0	300	0	Proper reheating procedures for hot holding	0	0	
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	X	0	Proper cooling time and temperature	0	0	
19	0	0	文	0	Proper hot holding temperatures	0	0	
20		0	0		Proper cold holding temperatures	0	0	5
21	0	0	380	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	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	- 5
26	X	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

od Retail Practices are preventive m

2

0 0 4

0 0 5

0 0

		OUT=not in compliance COS=con	ected or	3-6(50	dir
		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	7
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	:
37	0	Contamination prevented during food preparation, storage & display	0	0	ŀ
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	
43	0	Single-use/single-service articles; properly stored, used	0	0	г
44	10	Gloves used properly	0	0	

pecti		R-repeat (violation of the same code provision) Compliance Status	cos	R	W
	OUT	Utensils and Equipment	$\overline{}$		
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	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	0	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	Т		
55	0	Current permit posted	ा	0	T (
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 n (10) days of the date of the

03/08/2023

03/08/2023

Signature of Person In Charge

**** 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) 6154445325 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



con County Truck #2			
Soft County Truck #2			
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#57 is "No"			
	facilities at all times to pe	rsons who are	
rson attempting to gain entry	to submit acceptable form	of identification.	
moking" symbol are not cons	picuously posted at every	entrance.	
not completely open.			
s in non-enclosed areas are n	ot completely removed or	ropen.	
nto areas where smoking is p	rohibited.		
d by the Act.			
Sanitizer Type	PPM	Temperature (Fah	renhelt)
		Temperature (Fahr	renhelt)
		-	
	State of Food	Temperature (Fahr	renheit)
	imoking" symbol are not consistent completely open. In non-enclosed areas are not areas where smoking is pro-	#57 is "No" trict access to its buildings or facilities at all times to person attempting to gain entry to submit acceptable form moking" symbol are not conspicuously posted at every not completely open. In non-enclosed areas are not completely removed or not areas where smoking is prohibited. In by the Act.	#57 is "No" trict access to its buildings or facilities at all times to persons who are rson attempting to gain entry to submit acceptable form of identification. imoking symbol are not conspicuously posted at every entrance. not completely open. In non-enclosed areas are not completely removed or open. Into areas where smoking is prohibited. In by the Act.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Kona Ice Of Wilson County Truck #2

Establishment Number: 605263414

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: (IN): An employee health policy is available.
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (N.O.) No food workers present.
- 5: (N.O.) No food workers present at the time of inspection.
- 6: (NO) No workers present during inspection.
- 7: (NO) No food workers present during the inspection.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: See source info
- 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: (NÁ) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: (N.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: Ice and syrup only food served
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 24 hours.
- 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:

Additional Comments

See last page for additional comments.

^{***}See page at the end of this document for any violations that could not be displayed in this space.

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Kona Ice Of Wilson County Truck #2	
Establishment Number: 605263414	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Informa	11-1-111		
	a Ice Of Wilson Count	ty Truck #2	
stablishment (vumber ».	605263414		
Sources			
Source Type:	Food	Source:	Home City Ice, Kona-ice
Source Type:	Water	Source:	City
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	
Additional Comments	;		
Mobile unit not operatir	ng during inspection		