TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

ALC: NO						FOOD SERVI	GE ESTA	BL	151	1 M E	:N1		121	'EG	110	ON REPO	JRT	ŀ				\neg
Esta	bist	men	t Nar		Taco Bell #03	33643						Tur	w of F	Establi	shme	El Darma	r's Market Food U anent O Mob		10			
Add	ress				8522 Hixson	Pike						. ,,	AC 101 L	- 540 - 54	211114		orary O Seas	sonal				/
City					Hixson		Time in	10):2	5 A	١M	AJ	4/P	M Tir	ne o	ut 11:00:	AM AM	/PM				
Insc	ectio	n Da	te		08/01/202	3 Establishment#						-										
			spect		麗Routine	O Follow-up	O Complaint			- O Pro			_		Cor	nsultation/Other		_ ·				_
Risi	Cat	egon	,		01	32(2	03			04				Fo	ilow-	up Required	O Yes 🕅	1 No	Number of S	eats	96	
			isk i			aration practices a rs in foodborne illn								repo	rtec	d to the Cent	ers for Dises	se Cont	rol and Preven	tion	_	
				as 0	ontributing facto		E ILLNESS RI											vent nine	nas or injury.			
		(11	rk de	signat	ed compliance status	(IN, OUT, HA, HO) for eac	ch numbered Iten	. For	ltem	mark	ed OL	п, т	rtk Go	XS or R	for e	ach liem as app	licable. Deduct	points for c	category or subcate	gery.)		
IN	⊧in c	mpii	ance			e NA=not applicable	NO=not observe		R		S=cor	recte	d on-si	ite duri	ng ins	spection Come	R=repeat (vic		e same code provisi	on) COS	RI	WT
h	IN	оит	NA	NO		Supervision							our		NO		nd Roheating			000		
1	黨	0				esent, demonstrates kno	wiedge, and	0	0	5		IN	OUT				trol For Safet		Foods	_		
H			NA	NO	performs duties	Employee Health		-		-	16	00		80		Proper cooking Proper reheating			lina	0	읭	5
2	24		101			od employee awareness	s; reporting	0	0		Ë								, and Time as		-	
3	黨	0			Proper use of restric	tion and exclusion		0	0	5		IN	OUT	NA	NO	-	a Public Heal	th Contr	lo			
		_	NA			d Hygionic Practicos	0					0	0			Proper cooling				0	0	
4		0				g. drinking, or tobacco u yes, nose, and mouth	150	0	8	5		No.	0		0	Proper hot hok				00	8	
9		O	NA			g Contamination by	Hands	- 0		_	21	100	00		0	Proper date ma	iding temperatu arking and dispo			8	허	5
6	25	0			Hands clean and pro			0	0		22		ō	ō		-			res and records	0	ō	
7	黨	0	0	0	No bare hand contac alternate procedures	ct with ready-to-eat food	s or approved	0	0	5	-		-	NA			Consumer			<u> </u>	-	_
8	×	0	_		Handwashing sinks (properly supplied and ac	ccessible	0	0	2	23	0	0	12	no	Consumer adv	isory provided f			0	0	4
	IN 家		NA	_	Food obtained from	Approved Source		0	o	-	-	IN	OUT		NO	food	hly Susceptib	le Popula	tions	-	-	_
10	0		0		Food received at pro	oper temperature		0	0		24		0	22			ods used; prohit			0	0	~
	×	0	~	_		on, safe, and unadultera ailable: shell stock tags.		0	Ö	5	-								STICLOTICIEG	~	~	_
12	0	0	XX NA	0	destruction	ion from Contaminat		0	0		25	IN O	OUT	NA	NO		Chemi approved and		rod	~	~	
		0		no.	Food separated and		Jon	0	0	4		Ř	ŏ	1			es properly ide	<u> </u>		0	ŏ	5
14	X	0	0		Food-contact surface	es: cleaned and sanitize	d		0					NA	NO		ance with Ap					
15	X	0			Proper disposition of served	f unsafe food, returned f	ood not re-	0	0	2	27	0	0	2		Compliance wi HACCP plan	th variance, spe	icialized p	rocess, and	0	0	5
	_	_		Goo	d Retall Practice	s are preventive m	ensures to co	tro	1 49-0	Inte	adue	tion	of a	atho		. chemicale	and abusics	Joblech	a lato fooda		_	_
					e netan Practice	a are preventive in							_		yena	o, chemicalo,	and physics	ii objecti	a mito rooda.			
				-00	T=not in compliance		COS=corre			ALC:			ICR	5			-repeat (violation	of the sam	ne code provision)			
						iance Status	000-0010	COS	R	WT	Ē						pliance Stat		te case provisiony	COS	R	WT
	_	OUT				ood and Water						0	UT				lis and Equip					
2	89	8	Past Wate	eunze r and	d eggs used where re ice from approved se	equired		8	8	1	4	5 (onfood-contact s and used	urfaces cleanat	ble, proper	fy designed,	0	0	1
	0	Õ	Varia		btained for specialize	ed processing methods		ŏ	ŏ	1	4	6 (g facilities, instr	alled, maintaine	d, used, te	st strips	0	0	1
		OUT	_	or cor		perature Control adequate equipment for	temperature				4	7 0	-			ntact surfaces c				0	0	1
3	1		contr		ang measure used, e	and dealers and addition of the	and personne	0	0	2	F	_	UT				ysical Faciliti	03		Ţ	-	-
_	2				properly cooked for h				0			_				d water available				0	0	2
	3				thawing methods use			0	0	1	4	_	_			stalled; proper b					0	2
3	4	O OUT	rnen	nome	eters provided and ac Food I	dentification		0	0	1	5	_	-			i waste water pr es: properly con			d	0	0	2
3	_	_	Food	1 DEPA		container: required reco	rds available	0	0	1	5	2 1	_			use properly dis				0	0	$\frac{1}{1}$

OUT 53 O Physical facilities installed, maintained, and clean 0 0 Prevention of Food Contamination 1 0 0 0 2 54 O Insects, rodents, and animals not present O Adequate ventilation and lighting; designated areas used 1 36 0 37 0 0 OUT O Contamination prevented during food preparation, storage & display 1 Administrative items 001 55 O Current permit posted 56 O Most recent inspection posted 00 38 O Personal cleanliness 0 39 O Wiping cloths; properly used and stored YES NO WT 40 O Washing fruits and vegetables 0 0 1 **Compliance Status** Proper Use of Utensils OUT **Non-Smokers Protection Act** O In-use utensils; properly stored
O Utensils, equipment and linens; properly stored, dried, handled
O Single-use/single-service articles; properly stored, used Compliance with TN Non-Smoker Protection Act Tobacco products offered for sale 57 <u>美</u> 0 0 0 0 0 0 0 1 001 58 0 59 If tobacco products are sold, NSPA survey completed 44 O Gloves used properly 0 0 1 Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous manner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of this report by filing a written request with the Commissioner within ten (10) days of the date of the date of this report by filing a written request within ten (10) days of the date of this request date date of the date of ort. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

172-	08/01/2023	.u.f	08/01/2023
Signature of Person In Charge	Date	Signature of Environmental Hea	Ith Specialist Date

****	Additi	onal	food	safe	ety i	nforr	nation	can be	found	on our	r website,	http	c//tn.g	jov/hea	alth/	articl	e/eh	-food	servi	ce ***	

PH-2267 (Rev. 6-15)	Free food safety training cla		th at the county health department.	RDA 629
(1000)	Please call () 4232098110	to sign-up for a class.	100000

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Taco Bell #033643 Establishment Number #: 605252239

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.	
Smoking observed where smoking is prohibited by the Act.	

Warewashing Info											
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)								
Sani bucket 3 sink	Quat Quat	300 400									
	Quai										

Equipment Temperature	
Description	Temperature (Fahrenheit)
Walkin	35

Food Temperature		
Decoription	State of Food	Temperature (Fahrenheit)
Cut letuce	Cold Holding	40
Cut lettuce	Cold Holding	41
Beef	Hot Holding	176
Beans	Hot Holding	179
Chicken	Hot Holding	175
Potatoes	Hot Holding	162
Cut toms	Cold Holding	38
Steak	Hot Holding	166
Rice	Hot Holding	171
Steak	Hot Holding	176
Beans	Hot Holding	142
Chicken	Cold Holding	34
Cut toms	Cold Holding	35

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Taco Bell #033643

Establishment Number : 605252239

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Employee able to direct me to illness policy immediately
- 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: Observed hand washing when changing tasks

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: (NA) No raw animal foods served.

17: (NO) No TCS foods reheated during inspection. All food well heated at beginning of lunch shift indicating adequate reheating procedures.

18: All products cooled previous day

- 19: All hot holding adequate
- 20: All cold holding adequate
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 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:

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

Additional Comments See last page for additional comments.

Establishment Information

Establishment Name: Taco Bell #033643

Establishment Number : 605252239

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

Establishment Information

Establishment Name: Taco Bell #033643 Establishment Number # 605252239

SourcesSource Type:FoodSource:MclaneSource Type:WaterSource:PublicSource Type:Source:Source:Source Type:Source:Source:Source Type:Source:Source:

Additional Comments