TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

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f	No.		1997			FOOD SERVICE EST	ABL	ISI	нмі	EN	ТІ	NS	PE	сті	ON REPORT	sco	RE		
	2010 1714	The second	S.																
E	Establishment Name				INKWELL										Farmer's Market Food Unit	X	ŀ		
Establishment Name			INKWELL 631 Madison Ave Type of Establishment O Farmer's Market Food Unit Permanent O Mobile O Tampagana										J						
	13				Memphis Time in 05:00 PM AM / PM Time out 05:45; PM AM / PM														
City		-				3 Establishment # 6053183		5.0			_				Sut 00.40; 111 AM/PM				
Inspec Purpos					Routine	O Follow-up O Complain			- 0 Pr			ed ,	000		onsultation/Other				
			000		O1	1012 O3	IL.		04	eama	nary					Number of (Cante	49)
Nako	Risk Category O1 12 O3 O4 Follow-up Required 12 Yes O No Number of Seats 49 Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health Interventions are control measures to prevent illness or injury.																		
				LS C	ontributing facto	FOODBORNE ILLNESS R										ess or injury.			
				gan		(IR, OUT, NA, NO) for each numbered Ite	m. For	ltem	e mark	ed 0	UT, 1	Marik G	COS or	R for	each Nem as applicable. Deduct points for)	
IN≃ir	com	plianc	e ec			e NA=not applicable NO=not obser liance Status		R	Twr)\$=cc	orrecti	ed on	-site du	ring in	Spection Rerepeat (violation of the Compliance Status	e same code provisi		R	WT
	-	лт N	IA	NO	Decession in the second	Supervision		_	_		IN	00	T NA	NO	Cooking and Reheating of Time. Control For Safety (TCS)				
1 8					performs duties	esent, demonstrates knowledge, and	0	0	5		6 0				Proper cooking time and temperatures		0	8	5
23		лт N D		NO		Employee Health od employee awareness; reporting	0	o		17					Proper reheating procedures for hot hok Cooling and Holding, Date Markin		0	0	
3 🐒	-				Proper use of restric		0	0	5		IN				a Public Health Cont	rel			
4 8	s c			0	Proper eating, tastin	g. drinking. or tobacco use	0	0	5	18	9 0	0	0	12	Proper cooling time and temperature Proper hot holding temperatures			0	
11) JT N	IA			yes, nose, and mouth g Contamination by Hands	0	0	1	2(21	00				Proper cold holding temperatures Proper date marking and disposition		8	00	5
6 J	_	_	_	0	Hands clean and pro No bare hand contain	operly washed ct with ready-to-eat foods or approved	0	0		Ż	2 0	0	100	· I	Time as a public health control: procedu	ires and records	0	0	
8 8				-	alternate procedures Handwashing sinks	s followed properly supplied and accessible			2	23	1N 3 O	-	_	NO	Consumer Advisory Consumer advisory provided for raw an		0	0	
9 8	OL	л м	IA	NO	Food obtained from	Approved Source approved source	0	0		Ê	IN IN	-		NO	food Highly Susceptible Popul	ations	-	9	•
			5 [×	Food received at pro		8		1	24	¢ 0	0	1		Pasteurized foods used; prohibited food		0	0	5
12 C	_	-	8	0		ailable: shell stock tags, parasite	ō	0		F	IN	ou	TNA	NO	Chemicals				
IN 13 ∑		TN		NO	Protect	ion from Contamination			4	25	5 XX 6 XX			-	Food additives: approved and properly of		0	8	5
13 <u>5</u>	1		5			es: cleaned and sanitized	8	_			IN		T NA	NO		Procedures	Ŭ		
15 🔉					Proper disposition of served	f unsafe food, returned food not re-	0	0	2	27	7 0	0			Compliance with variance, specialized p HACCP plan	rocess, and	0	0	5
				Goo	d Retail Practice	s are preventive measures to o	ontro	l th	e intr	odu	ctio	n of	path	ogen	s, chemicals, and physical object	a into foods.			
							GOO	DD P	(ETA)	L PI	RAC	TICI	53	-					
				00	T=not in compliance Compl	COS=con iance Status			e during WT	insp	ector	1			R-repeat (violation of the sar Compliance Status	ne code provision)	COS	R	WT
28	OL		aste	urize	Safe Fe id eggs used where r	ood and Water	0	0	1			OUT	Food	and n	Utensils and Equipment onfood-contact surfaces cleanable, prope	dy designed			
29 30	0) [W	ater	and	lice from approved s		0	0	2	\vdash	+	邕	const	ucted	I, and used		0	0	1
	OU	л			Food Tem	perature Control		-			46 47	0			ng facilities, installed, maintained, used, to intact surfaces clean	ist strips	0	0	1
31	0	00	ontro	l l		adequate equipment for temperature	0	0				OUT	NOTINO	00+00	Physical Facilities				1
32	_	_	_	_	properly cooked for I thawing methods use		8	8		_	48 49	8			d water available; adequate pressure istalled; proper backflow devices		8	8	2
34	C	_	herm	nome	eters provided and ac	curate	0	0	1		50 51				d waste water properly disposed ies: properly constructed, supplied, cleane	ul.	0	0	2
35	_	_	bod	prop		container; required records available	0	0	1	-	52				fuse properly disposed; facilities maintain		ŏ	0	1
	OL	л			Prevention of	Food Contamination		-			53	×	Physi	al fac	cilities installed, maintained, and clean		0	0	1
36	0) Ins	sect	s, ro	dents, and animals n	ot present	0	0	2	1	54	٥	Adequ	late v	entilation and lighting; designated areas u	sed	0	0	1
37	-					g food preparation, storage & display	0	0				OUT			Administrative items			_	
38 39	_	_			leanliness ths; properly used ar	nd stored	0	0	1			<u>8</u>			mit posted t inspection posted		0	0	0
40	C OL	_	/ash	ing f	ruits and vegetables Proper	Use of Utensils	0	0	1	E	_	_		_	Compliance Status Non-Smokers Protection	Act	YES	NO	WT
41 42	C) In-			nsils; properly stored	properly stored, dried, handled	8		1		57 58				with TN Non-Smoker Protection Act oducts offered for sale		0	8	0
43	0) Si	ngle	-use		es; properly stored, used	0	0	1		59				roducts are sold, NSPA survey complete	1	õ		Ű
	1			_		ns within ten (10) davs may result in suspe				servi	ce est	tablis	hment	permit	. Repeated violation of an identical risk facto	r may result in revor	ation	of yos	ur food
service manner	estat and	dishr post t	ment the n	perm nost	nit. Items identified as o recent inspection repor	constituting imminent health hazards shall t in a conspicuous manner. You have the r	be corre	eque	immed	iately	or og	perati-	ons sh	all cea	se. You are required to post the food service filing a written request with the Commissione	establishment permi	t in a i	onsp	icuous
report.	T.C.J	L sec	tion	s 68-	14-703 68-14-706, 68-14	-708, 68-14-709, 68-14-711, 68-14-715, 68-14-			-			۶	σ	Þ	\sim				
2	\nearrow	Ø2	2	1		04/	/05/2	202		-		\subset	5		min	(04/0)5/2	2023
oigna	Signature of Person In Charge Date Signature of Environmental Health Specialist Date **** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****										Date								
PH-226	7 (8-	w e.	461			Free food safety training class	es are	ava	ailable	ead	ch m	-		-				P/	DA 629
10-22	- (rec	. C ²	-9)			Please call (2229						up for a class.			PG.	.H 023

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: INKWELL Establishment Number #: 605318379

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.	Yes
Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	Yes
"No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	No
Garage type doors in non-enclosed areas are not completely open.	No
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	No
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	Yes
Smoking observed where smoking is prohibited by the Act.	Yes

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							

Equipment Temperature	
Description	Temperature (Fahrenheit)
RIC 2	41
RIC 1	38

Food Temperature							
Description	State of Food	Temperature (Fahrenheit)					
Ground sausage	Cold Holding	50					
Veggie mix	Cold Holding	48					

Observed Violations

Total # 8

Repeated # 0

14: The ice machine is not clean. Please clean ice machine. Discard all ice, and wash, rinse, and sanitize interior and exterior.

20: Foods were not being held at 41 or below on the cold holding bar. Please keep cold foods at 41 or below.

21: Date marking is not being observed for food items. Once opened, foods must be dated for a maximum 7 day hold.

35: All foods are not properly labeled. Please label foods according to its content. 45: The toaster oven is not clean. Please clean oven racks regularly to avoid buildup.

51: The ceiling vents are dusty in both restrooms. Please maintain cleanliness of vents in both restrooms.

53: The ceiling vent in kitchen is dusty. Please maintain cleanliness of vent in kitchen.

55: The current permit is not posted. Please post the current permit.

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Comments/Other Observations		
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Additional Comments See last page for additional comments.

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

Establishment Information

Establishment Name: INKWELL

Establishment Number: 605318379

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: INKWELL

Establishment Number #: 605318379

Sources							
Source Type:	Food	Source:	Ben E. Keith				
Source Type:		Source:					
Source Type:		Source:					
Source Type:		Source:					
Source Type:		Source:					

Additional Comments