### **TENNESSEE DEPARTMENT OF HEALTH** FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

13.34

		FOOD SERVICE ESTA	BL	SH	IME	IN	TI	NSI	PEC	TIC	ON REPORT	sco			_
Rolled 4 Ever Ice Cream Mobile Unit 1120. 4th Avenue North Type of Establishment															
Establishment Name								J		<i>」</i>					
City										ne ou	IU:30: AIVI AM/PM				
Inspection Date	0-0	24 Establishment # 60525500			_			d U			l				
Purpose of Inspection		O Follow-up O Complaint			O Pro	limir	hary		0	Cor	nsultation/Other			0	
Risk Category	In the set of the set	O2 O3	beha		04	at c	omn	nonh			up Required O Yes 🗮 No I to the Centers for Disease Cont	Number of S		0	_
											control measures to prevent illne				
(Mark design	ated compliance statu	FOODBORNE ILLNESS RJ (IH, OUT, HA, HO) for each numbered liter	SK F/ n. For	ACT(	ORS /	AND H OL	) PU //, m	BLIC ark Co	HEA	LTH for e	INTERVENTIONS ach item as applicable. Deduct points for o	alogory or subcate	gory.)	1	
IN-in compliance	OUT=not in complian	ce NA=not applicable NO=not observ	ed		00						pection R=repeat (violation of th	e same code provisi	on)		
IN OUT NA NO		liance Status Supervision	COS	R	WT	H					Compliance Status Cooking and Reheating of Time/		cos	R	WT
1 嵐 0	Person in charge p	esent, demonstrates knowledge, and	0	0	5		IN		NA	NO	Control For Safety (TCS)			-	
IN OUT NA NO		Employee Health					00	0	X	-	Proper cooking time and temperatures Proper reheating procedures for hot hold	ing	0	8	5
2 <u>× 0</u> 3 × 0	Management and fe Proper use of restri	od employee awareness; reporting	0	0	5		IN	ουτ	NA	NO	Cooling and Holding, Date Marking				
IN OUT NA NO		d Hygienic Practices	ľ		_	18	0	0	×	0	a Public Health Centr Proper cooling time and temperature	01	0	0	-
		ng, drinking, or tobacco use eyes, nose, and mouth	8	0	5		0		8	0	Proper hot holding temperatures Proper cold holding temperatures		0	00	
IN OUT NA NO		g Contamination by Hands	0			21	0		28	0	Proper date marking and disposition		0	0	°
7000	No bare hand conta	ct with ready-to-eat foods or approved	6	0	5	22		0	×		Time as a public health control: procedu	res and records	0	٥	
8 🐹 0	<ul> <li>alternate procedure</li> <li>Handwashing sinks</li> </ul>	properly supplied and accessible		0	2	23		OUT	NA X	NO	Consumer Advisory Consumer advisory provided for raw and	undercooked	0	0	4
IN OUT NA NO 9 🕱 O	Food obtained from	Approved Source approved source		0		-	IN	OUT		NO	food Highly Susceptible Popula	rtions	-	-	
10 0 0 0 5	Food received at pr Food in good condi	oper temperature ion, safe, and unadulterated	8	00	5	24	0	0	Ж		Pasteurized foods used; prohibited foods	s not offered	0	0	5
12 0 0 🕱 0	Dowierd mends of	vailable: shell stock tags, parasite	0	0			IN	OUT	NA	NO	Chemicals				
IN OUT NA NK 13 O O 家		tion from Contamination	0		4	25	0	8	X		Food additives: approved and properly u Toxic substances properly identified, sto		0	응	5
14 8 0 0	Food-contact surface	es: cleaned and sanitized	ŏ	ŏ	5		IN		NA	NO	Conformance with Approved P	rocedures	Ĭ,	_	
15 溴 0	Proper disposition of served	f unsafe food, returned food not re-	0	0	2	27	0	0	×		Compliance with variance, specialized p HACCP plan	rocess, and	0	٥	5
G	od Retail Practic	is are preventive measures to co	ontro	l the	intro	duc	tion	ofp	atho	gens	, chemicals, and physical object	s into foods.			
			GOO	DR	arAl	L PR	LACT	TICE	8						
o	UT=not in compliance Comp	COS=com		R R		inspe	action				R-repeat (violation of the sam Compliance Status		COS	R	WT
28 O Pasteun	Safe F zed eggs used where	ood and Water	0		1			NUT	ood ar	od no	Utensils and Equipment nfood-contact surfaces cleanable, proper	ly designed		_	_
29 O Water an	nd ice from approved :		0	0	2	$\vdash$	-	<u>ہ</u>	onstru	cted,	and used		0	0	1
OUT	Food Ter	nperature Control			_		_	-			g facilities, installed, maintained, used, te	st strips	0	0	1
31 O Proper of control	coling methods used;	adequate equipment for temperature	0	0	2	H	_	O N UT	ontoo	a-con	Physical Facilities		0	0	1
	od properly cooked for d thawing methods us		8	8	1	_	_				water available; adequate pressure stalled; proper backflow devices		8	응	2
34 O Thermor	meters provided and a	courate	ŏ	ŏ	1	5	0	<b>o</b> [8	iewage	and	waste water properly disposed		0	0	2
35 O Food pro		container; required records available	0	0	1	-	_	_			<ul> <li>properly constructed, supplied, cleane</li> <li>use properly disposed; facilities maintaine</li> </ul>		0	0	1
OUT		Food Contamination	-		-			-	-		lities installed, maintained, and clean		0	0	1
36 O Insects,	rodents, and animals	not present	0	0	2	5	4	0 A	vdequa	ite ve	ntilation and lighting; designated areas u	sed	0	0	1
37 O Contami	nation prevented duri	g food preparation, storage & display	0	0	1		0	TUK			Administrative Items				
38 O Persona		nd stored	0	0	1			0	Sument	perm	nit posted inspection posted		0	2	0
40 O Washing	loths; properly used a fruits and vegetables	nd slored		ŏ		Ľ	•	0 1	nost re	cent	Compliance Status		YES		WT
41 O In-use u	Proper tensils; properly stored	Use of Utensils	0	0	1	5	7	-	Somplia	ance	Non-Smokers Protection / with TN Non-Smoker Protection Act	Act	0	<u></u>	_
42 O Utensils.	equipment and linens	; properly stored, dried, handled	0	0	1	5	8	T	obacc	o pro	ducts offered for sale oducts are sold. NSPA survey completed		000	0	٥
43       O       Single-use/single-service articles; properly stored, used       O       O       1         44       O       Gloves used properly       O       O       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. T.C.A. sections 68-14-729, (69-14-708, 68-14-709, 68-14-719, 68-14-715, 68-14-716, 4-5-329).															
-11	. 7 0	04/:	12/2	024	1		~		T	-	$\sum$	(	)4/1	212	024
Signature of Person	In Charge				Date	Si	gnati	ire of	Envir	onme	ental Health Specialist				Date
		Additional food safety information car	n be fo	und	on ou	r wet	bsite,	http	c//tn.g	ov/h	ealth/article/eh-foodservice ****				
PH-2267 (Rev. 6-15)	PH-2267 (Rev. 6-15) Free food safety training classes are available each month at the county health department. Please call ( ) 6153405620 to sign-up for a class.							onth						RD	A 629

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(19220) (1004. 0-10)	Please call (	) 6153405620	to sign-up for a class.	1000

#### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



#### Establishment Information

Establishment Name: Rolled 4 Ever Ice Cream Mobile Unit Establishment Number #: 605255008

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.	

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)				
3 compartment sink	Super san						

Equipment l'emperature						
Description	Temperature (Fahrenheit)					
Reach in freezer	34					

Description	State of Food	Temperature ( Fahrenheit

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Establishment Number : 605255008

#### Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Metro health policy kept on truck.
- 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: Not observed.
- 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.
- 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: No raw animal foods.
- 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: (NA) No TCS foods reheated for hot holding.
- 18: No cooling.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: No tcs foods observed. All cooling equipment in good condition.
- 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: Missing no smoking signs.
- 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: Rolled 4 Ever Ice Cream Mobile Unit Establishment Number : 605255008

Comments/Other Observations (cont'd)

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

### Establishment Information

Establishment Name: Rolled 4 Ever Ice Cream Mobile Unit Establishment Number # 605255008

Sources			
Source Type:	Water	Source:	Municipal
Source Type:	Food	Source:	Performance food group
Source Type:	Food	Source:	Sams club
Source Type:		Source:	
Source Type:		Source:	

# Additional Comments

Sticker 1011.