



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

SCORE

69

Establishment Name Address City Inspection Date	Type of Establishment Time in Time out Establishment # Embargoed	Permanent Temporary Seasonal
Misaki Japanese Steak House 8207 Kingston Pike Knoxville 10/15/2020	03:16 PM 04:31 PM 605083827 0	
Purpose of Inspection Risk Category	Routine Follow-up Complaint Preliminary Consultation/Other O 1 X 2 O 3 O 4	Follow-up Required Yes No
		Number of Seats 136

**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.**

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

(Mark designated compliance status (IN, OUT, NA, NO) for each assessed item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance    OUT=not in compliance    NA=not applicable    NO=not observed				COS=corrected on-site during inspection			R=repeated violation of the same code provision		
Compliance Status							Compliance Status		
IN	OUT	NA	NO						
<b>Supervision</b>									
1 X	O			Person in charge present, demonstrates knowledge, and performs duties	O	O	5		
<b>Employee Health</b>									
2 X	O			Management and food employee awareness, reporting	O	O			
3 X	O			Proper use of restriction and exclusion	O	O	4		
<b>Good Hygienic Practices</b>									
4 X	O	O		Proper eating, tasting, drinking, or tobacco use	O	O			
5 X	O	O		No discharge from eyes, nose, and mouth	O	O	5		
<b>Preventing Contamination by Hands</b>									
6 X	O	O		Hands clean and properly washed	O	O			
7 X	O	O	O	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	O	O	5		
8 O	X			Handwashing sinks properly supplied and accessible	O	O	2		
<b>Approved Sources</b>									
9 X	O			Food obtained from approved source	O	O			
10 O	O	O	X	Food received at proper temperature	O	O			
11 X	O			Food in good condition, safe, and unadulterated	O	O	5		
12 X	O	O	O	Required records available; shell stock tags, parasite destruction	O	O			
<b>Protection from Contamination</b>									
13 O	X	O		Food separated and protected	O	O	4		
14 O	X	O		Food-contact surfaces cleaned and sanitized	O	O	5		
15 X	O			Proper disposition of unsafe food, returned food not re-served	O	O	2		
<b>Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods</b>									
16 O	O	O	O	Proper cooking time and temperatures	O	O			
17 O	O	O	X	Proper reheating procedures for hot holding	O	O	5		
<b>Cooling and Holding, Date Marking, and Time as a Public Health Control</b>									
18 O	O	O	X	Proper cooling time and temperature	O	O			
19 O	O	O	X	Proper hot holding temperatures	O	O			
20 X	O	O		Proper cold holding temperatures	O	O			
21 O	X	O	O	Proper date marking and disposition	O	O			
<b>Consumer Advisory</b>									
22 O	O	X	O	Time as a public health control: procedures and records	O	O			
<b>Highly Susceptible Populations</b>									
23 X	O	O		Consumer advisory provided for raw and undercooked food	O	O	4		
<b>Chemicals</b>									
25 O	O	X		Food additives: approved and properly used	O	O			
26 O	X			Toxic substances properly identified, stored, used	O	O	5		
<b>Conformance with Approved Procedures</b>									
27 O	O	X		Compliance with variance, specialized process, and HACCP plan	O	O	5		

**Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.**

OUT=not in compliance				COS=corrected on-site during inspection			R=repeated violation of the same code provision		
Compliance Status							Compliance Status		
OUT									
<b>Safe Food and Water</b>									
28 O				Pasteurized eggs used where required	O	O	1		
29 O				Water and ice from approved source	O	O	2		
30 O				Variance obtained for specialized processing methods	O	O	1		
<b>Food Temperature Control</b>									
31 O				Proper cooling methods used; adequate equipment for temperature control	O	O	2		
32 O				Plant food properly cooked for hot holding	O	O	1		
33 O				Approved thawing methods used	O	O	1		
34 O				Thermometers provided and accurate	O	O	1		
<b>Food Identification</b>									
35 X				Food properly labeled; original container; required records available	O	O	1		
<b>Prevention of Food Contamination</b>									
36 X				Insects, rodents, and animals not present	O	O	2		
37 X				Contamination prevented during food preparation, storage & display	O	O	1		
38 O				Personal cleanliness	O	O	1		
39 O				Wiping cloths, properly used and stored	O	O	1		
40 O				Washing fruits and vegetables	O	O	1		
<b>Proper Use of Utensils</b>									
41 O				In-use utensils, properly stored	O	O	1		
42 O				Utensils, equipment and linens, properly stored, dried, handled	O	O	1		
43 O				Single-use/single-service articles, properly stored, used	O	O	1		
44 O				Gloves used properly	O	O	1		
<b>Utensils and Equipment</b>									
45 O				Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	O	O	1		
46 X				Washwashing facilities, installed, maintained, used, leak strips	O	O	1		
47 X				Nonfood-contact surfaces clean	O	O	1		
<b>Physical Facilities</b>									
48 O				Hot and cold water available; adequate pressure	O	O	2		
49 O				Plumbing installed; proper backflow devices	O	O	2		
50 O				Sewage and waste water properly disposed	O	O	2		
51 O				Toilet facilities properly constructed, supplied, cleaned	O	O	1		
52 X				Garbage/refuse properly disposed; facilities maintained	O	O	1		
53 X				Physical facilities installed, maintained, and clean	O	O	1		
54 O				Adequate ventilation and lighting; designated areas used	O	O	1		
<b>Administrative Items</b>									
55 O				Current permit posted	O	O	0		
56 O				Most recent inspection posted	O	O	0		
<b>Non-Smokers Protection Act</b>									
57 O				Compliance with TN Non-Smoker Protection Act	X	O			
58 O				Tobacco products offered for sale	O	O	0		
59 O				If tobacco products are sold, NSPA survey completed	O	O	0		

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 hazard 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 68-14-203, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 40-3-20.

10/15/2020

Signature of Person In Charge

Signature of Environmental Health Specialist

10/15/2020

Date

\*\*\* Additional food safety information can be found on our website, <http://tn.gov/health/article/fh-food-service> \*\*\*

PH-2267 (Rev. 6-15)	Free food safety training classes are available each month at the county health department. Please call ( ) 8652155200 to sign-up for a class.	RDA 629
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TENNESSEE DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD INSPECTION DATA



**Establishment Information**

Establishment Name:	Misaki Japanese Steak House
Establishment Number #:	1605083827

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

Machine Name	Sanitizer Type	PPM	Temperature ( Fahrenheit )
	Heat		

**Equipment Temperature**

Description	Temperature ( Fahrenheit )

**Food Temperature**

Description	State of Food	Temperature ( Fahrenheit )
Beef	Cold Holding	40
Beef	Cold Holding	38

Observed Violations	
Total #	13
Repeated #	0
8:	No sink at back of kitchen
13:	Raw octopus and eggs stored over rte food
14:	Dishwasher not getting hot enough to sanitize dishes
21:	No date on opened ham container
26:	Pesticides are not labeled for use in commercial kitchen
35:	No label on bulk food containers
36:	Numerous roaches on top of dishwasher
37:	No lid on ice bin
46:	Dishwasher not working properly unit is filthy
47:	Equipment dirty walk in shelves filthy
49:	Dishwasher vacuum breaker leaks
52:	Pallets stored behind dumpster
53:	Kitchen walls ceiling in poor repair

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



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

Establishment Name Address City Inspection Date	Misaki Japanese Steak House 8207 Kingston Pike Knoxville 10/28/2020	Type of Establishment Establishment # Preliminary Risk Category	Permanent Temporary Seasonal Embargoed Follow-up Required Follow-up Required Number of Seats	05:04 PM 605083827 0 0 Yes 136
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SCORE

88

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.

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

(Mark designated compliance status (IN, OUT, NA, NC) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN/in compliance				OUT/not in compliance				NA/not applicable				NO/not observed				COS=corrected on-site during inspection			R=repeat (violation of the same code provision)			
																Compliance Status			Compliance Status			
	IN	OUT	NA	NO		IN	OUT	NA	NO		IN	OUT	NA	NO		COS	R	WT	COS	R	WT	
<b>Supervision</b>																						
1	X	O			Person in charge present, demonstrates knowledge, and performs duties		O	O	S													
2	X	O			Employee Health		O	O	S													
3	X	O			Management and food employee awareness, reporting		O	O	S													
					Proper use of restriction and exclusion		O	O	S													
<b>Good Hygiene Practices</b>																						
4	X	O			Proper eating, tasting, drinking, or tobacco use		O	O	S													
5	X	O			No discharge from eyes, nose, and mouth		O	O	S													
					Preventing Contamination by Hands																	
6	X	O			Hands clean and properly washed		O	O	S													
7	X	O	O		No bare hand contact with ready-to-eat foods or approved alternate procedures followed		O	O	S													
8	O	X			Handwashing sinks properly supplied and accessible		O	O	S													
					Approved Source																	
9	X	O			Food obtained from approved source		O	O	S													
10	O	O	O		Food received at proper temperature		O	O	S													
11	O				Food in good condition, safe, and unadulterated		O	O	S													
12	X	O	O	O	Required records available; shelf stock tags, parasite destruction		O	O	S													
					Protection from Contamination																	
13	X	O	O		Food separated and protected		O	O	S													
14	X	O	O		Food-contact surfaces: cleaned and sanitized		O	O	S													
15	X	O			Proper disposition of unsafe food, returned food not re-served		O	O	S													
<b>Consumer Advisory</b>																						
16	O	O	O		Proper cooking time and temperatures		O	O	S													
17	O	O	O		Proper reheating procedures for hot holding		O	O	S													
<b>Cooling and Holding, Date Marking, and Time as a Public Health Control</b>																						
18	O	O	O		Proper cooling time and temperature		O	O	S													
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20	X	O	O		Proper cold holding temperatures		O	O	S													
21	X	O	O	O	Proper date marking and disposition		O	O	S													
22	O	O	X	O	Time as a public health control: procedures and records		O	O	S													
<b>Consumer Advisory</b>																						
23	X	O	O		Consumer advisory provided for raw and undercooked food		O	O	S													
<b>Highly Susceptible Populations</b>																						
24	O	O	X		Pasteurized foods used; prohibited foods not offered		O	O	S													
<b>Chemicals</b>																						
25	O	O	X		Food additives: approved and properly used		O	O	S													
26	X	O			Toxic substances properly identified, stored, used		O	O	S													
<b>Conformance with Approved Procedures</b>																						
27	O	O	X		Compliance with variance, specialized process, and HACCP plan		O	O	S													

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES				COS=corrected on-site during inspection				R=repeat (violation of the same code provision)				Compliance Status			Compliance Status								
								Compliance Status															
	OUT				OUT				OUT					COS	R	WT							
<b>Safe Food and Water</b>																							
28	O				Pasteurized eggs used where required		O	O	S														
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41	O				In-use utensils, properly stored		O	O	S														
42	O				Utensils, equipment and knives; properly stored, dried, handled		O	O	S														
43	O				Single-use/single-service articles, properly stored, used		O	O	S														
44	O				Gloves used properly		O	O	S														
<b>Non-Smokers Protection Act</b>																							
57					Compliance with TN Non-Smokers Protection Act																		
58					Tobacco products offered for sale																		
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Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violations of an identical risk factor may result in revocation of your food service establishment permit. Items identified as comprising 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 final retail 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 61-701, 61-702, 61-703, 61-704, 61-705, 61-706, 61-707, 61-708, 61-709, 61-710, 61-711, 61-712, 61-713, 61-714, 61-715, 61-716, 61-717, 61-718, 61-719, 61-720, 61-721, 61-722, 61-723, 61-724, 61-725, 61-726, 61-727, 61-728, 61-729, 61-730, 61-731, 61-732, 61-733, 61-734, 61-735, 61-736, 61-737, 61-738, 61-739, 61-740, 61-741, 61-742, 61-743, 61-744, 61-745, 61-746, 61-747, 61-748, 61-749, 61-750, 61-751, 61-752, 61-753



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

Establishment Name

Salsarita's

Address

10919 Parkside Dr.

City

Knoxville

Inspection Date

10/22/2020

Establishment # 605179646

Type of Establishment

 Permanent  Mobile Temporary  Seasonal

Time in 11:01 AM

AM / PM

Time out 11:32 PM

AM / PM

Embargoed 0

SCORE

100

Purpose of Inspection

 Routine Follow-up Complaint Preliminary Consultation/Other

Risk Category

 O1 O2 O3 O4 Follow-up Required Yes  No

Number of Seats 86

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.

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

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																Compliance Status			COS R WT		
																Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods					
IN	OUT	NA	NO	IN	OUT	NA	NO	IN	OUT	NA	NO	IN	OUT	NA	NO	IN	OUT	NA	WT		
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Person in charge present, demonstrates knowledge, and performs duties				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5										
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Management and food employee awareness, reporting				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper use of restriction and exclusion				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Good Hygiene Practices																	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper eating, tasting, drinking, or tobacco use				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>		No discharge from eyes, nose, and mouth				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Preventing Contamination by Hands				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5										
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>		No bare hand contact with ready-to-eat foods or approved alternate procedures followed				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
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10/22/2020

Date

Signature of Person In Charge

10/22/2020

Date

\*\*\*\* Additional food safety information can be found on our website, <http://tn.gov/health/article/sh-foodservice> \*\*\*\*

PH-2267 (Rev. 6-15)

Free food safety training classes are available each month at the county health department.  
Please call ( ) 865-2155200 to sign-up for a class.

RDA 629



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

Establishment Name

Jet's Pizza TN 10

Address

7331 Kingston Pike

City

Knoxville

Inspection Date

10/13/2020

Establishment # 605301807

Type of Establishment

 Permanent Mobile Temporary Seasonal

Purpose of Inspection

 Routine Follow-up

Time in 10:20 AM

AM / PM

Time out 11:00 AM

AM / PM

Embargoed 0

Risk Category

 O1 O2 O3 O4 Follow-up Required Yes  No

Number of Seats 3

SCORE

100

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.

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

(Mark designated compliance status (IN, OUT, NA, NO) for each an itemized item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance				OUT=not in compliance				NA=not applicable				NO=not observed				COS=corrected on-site during inspection			R=repeat violation of the same code provision					
																Compliance Status								
	IN	OUT	NA		IN	OUT	NA		IN	OUT	NA		IN	OUT	NA	NO	COS	R	WT		COS	R	WT	
<b>Supervision</b>																								
1	<input checked="" type="checkbox"/>	<input type="radio"/>															<input type="radio"/>	<input type="radio"/>	5					
<b>Employee Health</b>																								
2	<input checked="" type="checkbox"/>	<input type="radio"/>															<input type="radio"/>	<input type="radio"/>	5					
3	<input checked="" type="checkbox"/>	<input type="radio"/>															<input type="radio"/>	<input type="radio"/>	5					
<b>Good Hygienic Practices</b>																								
4	<input checked="" type="checkbox"/>	<input type="radio"/>															<input type="radio"/>	<input type="radio"/>	5					
5	<input checked="" type="checkbox"/>	<input type="radio"/>															<input type="radio"/>	<input type="radio"/>	5					
6	<input checked="" type="checkbox"/>	<input type="radio"/>															<input type="radio"/>	<input type="radio"/>	2					
<b>Preventing Contamination by Hands</b>																								
7	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>													<input type="radio"/>	<input type="radio"/>	5					
8	<input checked="" type="checkbox"/>	<input type="radio"/>															<input type="radio"/>	<input type="radio"/>	2					
<b>Approved Source</b>																								
9	<input checked="" type="checkbox"/>	<input type="radio"/>															<input type="radio"/>	<input type="radio"/>	5					
10	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>													<input type="radio"/>	<input type="radio"/>	5					
11	<input checked="" type="checkbox"/>	<input type="radio"/>															<input type="radio"/>	<input type="radio"/>	5					
12	<input checked="" type="checkbox"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>													<input type="radio"/>	<input type="radio"/>	5					
<b>Protection from Contamination</b>																								
13	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>													<input type="radio"/>	<input type="radio"/>	4					
14	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>													<input type="radio"/>	<input type="radio"/>	5					
15	<input checked="" type="checkbox"/>	<input type="radio"/>															<input type="radio"/>	<input type="radio"/>	2					
<b>Food Temperature Control</b>																								
31	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	2					
32	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
33	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
34	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
<b>Food Identification</b>																								
35	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
<b>Prevention of Food Contamination</b>																								
36	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	2					
37	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
38	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
39	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
40	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
<b>Proper Use of Utensils</b>																								
41	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
42	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
43	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
44	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
<b>Utensils and Equipment</b>																								
45	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
46	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
47	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
<b>Physical Facilities</b>																								
48	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	2					
49	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	2					
50	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	2					
51	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
52	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
53	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
54	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	1					
<b>Administrative Items</b>																								
55	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	0					
56	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	0					
<b>Non-Smokers Protection Act</b>																								
57	<input type="radio"/>																<input checked="" type="checkbox"/>	<input type="radio"/>	0					
58	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	0					
59	<input type="radio"/>																<input type="radio"/>	<input type="radio"/>	0					

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. 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 68-14-703, 68-14-705, 68-14-708, 68-14



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

Establishment Name South Press		Type of Establishment <input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal	Score <b>100</b>	
Address 3715 Chapman Highway		Time in 12:00 PM	AM / PM	Time out 12:30 PM
City Knoxville				AM / PM
Inspection Date 10/20/2020	Establishment # 605301078	Embargoed 0		
Purpose of Inspection <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Preliminary <input type="checkbox"/> Consultation/Other				
Risk Category <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Follow-up Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Seats 15	

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.

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or sub-category.)

IN=in compliance				OUT=not in compliance				NA=not applicable				NO=not observed				COS=corrected on-site during inspection			R=repeat violation of the same code provision		
																Compliance Status					
																IN OUT NA NO			Compliance Status		
IN	OUT	NA	NO	IN	OUT	NA	NO	IN	OUT	NA	NO	IN	OUT	NA	NO	COS	R	WT	COS	R	WT
<b>Supervision</b>																					
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Person in charge present, demonstrates knowledge, and performs duties		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Employee Health</b>																					
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Management and food employee awareness, reporting		<input type="checkbox"/>	<input type="checkbox"/>														
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper use of restriction and exclusion		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Good Hygiene Practices</b>																					
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper eating, tasting, drinking, or tobacco use		<input type="checkbox"/>	<input type="checkbox"/>														
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>		No discharge from eyes, nose, and mouth		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Preventing Contamination by Hands</b>																					
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Hands clean and properly washed		<input type="checkbox"/>	<input type="checkbox"/>														
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>		No bare hand contact with ready-to-eat foods or approved alternate procedures followed		<input type="checkbox"/>	<input type="checkbox"/>														
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Handwashing sinks properly supplied and accessible		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Approved Sources</b>																					
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Food obtained from approved source		<input type="checkbox"/>	<input type="checkbox"/>														
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature		<input type="checkbox"/>	<input type="checkbox"/>														
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Food in good condition, safe, and unadulterated		<input type="checkbox"/>	<input type="checkbox"/>														
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available; shell stock tags, parasite destruction		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Protection from Contamination</b>																					
13	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food separated and protected		<input type="checkbox"/>	<input type="checkbox"/>														
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Food-contact surfaces: cleaned and sanitized		<input type="checkbox"/>	<input type="checkbox"/>														
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Proper disposition of unsafe food; returned food not re-served		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Good Retail Practices</b>																					
<b>OUT=not in compliance</b>				<b>Compliance Status</b>				<b>COS=corrected on-site during inspection</b>				<b>R=repeat violation of the same code provision</b>				<b>GOOD RETAIL PRACTICES</b>					
				<b>Safe Food and Water</b>				<b>COS</b>				<b>R</b>				<b>Compliance Status</b>					
				<b>Safe Food and Water</b>				<b>COS</b>				<b>R</b>				<b>Compliance Status</b>					
28	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Pasteurized eggs used where required		<input type="checkbox"/>	<input type="checkbox"/>														
29	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Water and ice from approved source		<input type="checkbox"/>	<input type="checkbox"/>														
30	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Variance obtained for specialized processing methods		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Food Temperature Control</b>																					
31	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Proper cooling methods used; adequate equipment for temperature control		<input type="checkbox"/>	<input type="checkbox"/>														
32	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Plant food properly cooked for hot holding		<input type="checkbox"/>	<input type="checkbox"/>														
33	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Approved thawing methods used		<input type="checkbox"/>	<input type="checkbox"/>														
34	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Thermometers provided and accurate		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Food Identification</b>																					
35	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Food properly labeled, original container, required records available		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Prevention of Food Contamination</b>																					
36	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Insects, rodents, and animals not present		<input type="checkbox"/>	<input type="checkbox"/>														
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Contamination prevented during food preparation, storage & display		<input type="checkbox"/>	<input type="checkbox"/>														
38	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Personal cleanliness		<input type="checkbox"/>	<input type="checkbox"/>														
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Wiping cloths, properly used and stored		<input type="checkbox"/>	<input type="checkbox"/>														
40	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Washing fruits and vegetables		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Proper Use of Utensils</b>																					
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>		In-use utensils; properly stored		<input type="checkbox"/>	<input type="checkbox"/>														
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Utensils, equipment and linens; properly stored, dried, handled		<input type="checkbox"/>	<input type="checkbox"/>														
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Single-use/single-service articles; properly stored, used		<input type="checkbox"/>	<input type="checkbox"/>														
44	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Gloves used properly		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Administrative Items</b>																					
55	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Current permit posted		<input type="checkbox"/>	<input type="checkbox"/>														
56	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Most recent inspection posted		<input type="checkbox"/>	<input type="checkbox"/>														
<b>Non-Smokers Protection Act</b>																					
57	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Compliance with TN Non-Smoker Protection Act		<input checked="" type="checkbox"/>	<input type="checkbox"/>														
58	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Tobacco products offered for sale		<input type="checkbox"/>	<input type="checkbox"/>														
59	<input type="checkbox"/>	<input checked="" type="checkbox"/>		If tobacco products are sold, NSPA survey completed		<input type="checkbox"/>	<input type="checkbox"/>														

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 contributing 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 68-17-103, 68-14-703, 68-14-709, 68-14-711, 68-14-715, 4-5-320.

10/20/2020

Signature of Person in Charge

Date

10/20/2020

Signature of Environmental Health Specialist

Date

\*\*\*\* Additional food safety information can be found on our website, <http://tn.gov/health/article/eh-foodservice> \*\*\*\*



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

Establishment Name Taco Bell #36404		Type of Establishment <input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal	SCORE <b>100</b>	
Address 11524 Chapman Highway		Time in 11:30 AM	AM / PM	Time out 12:03 PM
City Seymour				AM / PM
Inspection Date 10/22/2020		Establishment # 605261012	Embargoed 0	
Purpose of Inspection <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Preliminary <input type="checkbox"/> Consultation/Other				
Risk Category <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		Follow-up Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Seats 61

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.

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance				OUT=not in compliance				NA=not applicable				NO=not observed				COS=corrected on-site during inspection				R=repeat violation of the same code provision				
																Compliance Status								
																Supervision								
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input checked="" type="checkbox"/>	5					
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Employee Health	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Management and food employee awareness, reporting	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
																Proper use of restriction and exclusion	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
4	<input type="checkbox"/>	<input checked="" type="checkbox"/>														Good Hygiene Practices	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>														No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>												Preventing Contamination by Hands	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Hands clean and properly washed	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Approved Source	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>												Food obtained from approved source	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
11	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												Food received at proper temperature	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
12	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>												Food in good condition, safe, and unadulterated	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
13	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												Required records available: shelf stock tags, parasite destruction	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												Protection from Contamination	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Food separated and protected	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
																Food-contact surfaces: cleaned and sanitized	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
																Proper disposition of unsafe food, returned food not re-served	<input type="checkbox"/>	<input checked="" type="checkbox"/>						

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

OUT=not in compliance				COS=corrected on-site during inspection				GOOD RETAIL PRACTICES				R=repeat violation of the same code provision			
								Compliance Status							
								Safe Food and Water							
Food Temperature Control															
31	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2
32	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Plant food properly cooked for hot holding	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
33	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Approved thawing methods used	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
34	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Thermometers provided and accurate	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
35	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Food identification	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
36	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Prevention of Feed Contamination	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Insects, rodents, and animals not present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
38	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Contamination prevented during food preparation, storage & display	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Personal cleanliness	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
40	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Wiping cloths: properly used and stored	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Washing fruits and vegetables	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Proper Use of Utensils	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>										In-use utensils: properly stored	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
44	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Utensils, equipment and linens: properly stored, dried, handled	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
												Single-use/single-service articles: properly stored, used	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
												Gloves used properly	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
Utensils and Equipment												Physical Facilities			
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Warewashing facilities: installed, maintained, used, fast sinks	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Nonfood-contact surfaces clean	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
Physical Facilities												Administrative Items			
48	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Hot and cold water available; adequate pressure	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2
50	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Sewage and waste water properly disposed	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2
51	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Toilet facilities: properly constructed, supplied, cleaned	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Garbage/refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Physical facilities installed, maintained, and clean	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Adequate ventilation and lighting, designated areas used	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1
Non-Smokers Protection Act												Compliance Status			
55	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Current permit posted	<input type="checkbox"/>	<input checked="" type="checkbox"/>	0
56	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Most recent inspection posted	<input type="checkbox"/>	<input checked="" type="checkbox"/>	0
57	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Compliance with TN Non-Smoker Protection Act	<input checked="" type="checkbox"/>	<input type="checkbox"/>	0
58	<input type="checkbox"/>	<input checked="" type="checkbox"/>										Tobacco products offered for sale	<input type="checkbox"/>	<input checked="" type="checkbox"/>	0
59	<input type="checkbox"/>	<input checked="" type="checkbox"/>										If tobacco products are sold, NSPA survey completed	<input type="checkbox"/>	<input checked="" type="checkbox"/>	0

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, deemed as constituting imminent health hazard shall be corrected immediately or establishment 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 68-14-703, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

Signature of Person In Charge

10/22/2020

Signature of Environmental Health Specialist

10/22/2020

\*\*\*\* Additional food safety information can be found on our website: <http://tn.gov/health/article/els-foodservice> \*\*\*\*



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

SCORE

100

Establishment Name	Golden Corral				Type of Establishment	<input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Mobile
Address	513 Winfield Dunn Pkwy.				<input type="checkbox"/> Temporary <input checked="" type="checkbox"/> Seasonal	
City	Sevierville				Time in	10:52 AM
Inspection Date	10/19/2020				AM / PM	Time out 12:07 AM AM / PM
Establishment #	605110239				Embargoed	0
Purpose of Inspection	<input checked="" type="checkbox"/> Routine	<input type="checkbox"/> Follow-up	<input type="checkbox"/> Complaint	<input type="checkbox"/> Preliminary	<input type="checkbox"/> Consultation/Other	
Risk Category	O1	O2	O3	O4	Follow-up Required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Number of Seats 308						

**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.**

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN/in compliance				OUT/not in compliance				NA/not applicable				NO/not observed				COS=corrected on-site during inspection			R=repeat (violation of the same code provision)				
																Compliance Status							
IN	OUT	NA	NO	IN	OUT	NA	NO	IN	OUT	NA	NO	IN	OUT	NA	NO	COS	R	WT	COS	R	WT		
<b>Supervision</b>																							
1	<input checked="" type="checkbox"/>	<input type="radio"/>		Person in charge present, demonstrates knowledge, and performs duties.				<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	5											
2	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Employee Health</b>				<b>Management and food employee awareness, reporting</b>				<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>									
3	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Proper use of restriction and exclusion</b>				<b>Good Hygiene Practices</b>				<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>									
4	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Proper eating, tasting, drinking, or tobacco use</b>				<b>No discharge from eyes, nose, and mouth</b>				<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>									
5	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Preventing Contamination by Hands</b>				<b>Approved Source</b>				<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>									
6	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Hands clean and properly washed</b>				<b>Food obtained from approved source</b>				<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>									
7	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>No bare hand contact with ready-to-eat foods or approved alternate procedures followed</b>				<b>Food received at proper temperature</b>				<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>									
8	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food in good condition, safe, and unadulterated</b>				<b>Required records available; shell stock tags, parasite destruction</b>				<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>									
9	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Protection from Contamination</b>				<b>Food separated and protected</b>				<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>									
10	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food-contact surfaces: cleaned and sanitized</b>				<b>Proper disposition of unsafe food; returned food not re-served</b>				<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>									
11	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Approved Source</b>				<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>			
12	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food received at proper temperature</b>				<b>Food in good condition, safe, and unadulterated</b>				<b>Required records available; shell stock tags, parasite destruction</b>				<b>GOOD RETAIL PRACTICES</b>				<b>Compliance Status</b>			
13	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food separated and protected</b>				<b>Food-contact surfaces: cleaned and sanitized</b>				<b>Proper disposition of unsafe food; returned food not re-served</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
14	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
15	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
16	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
17	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
18	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
19	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
20	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
21	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
22	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
23	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
24	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
25	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
26	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
27	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
28	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
29	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
30	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
31	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
32	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
33	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
34	<input checked="" type="checkbox"/>	<input type="radio"/>		<b>Food Temperature Control</b>				<b>Food Identification</b>				<b>Good Retail Practices</b>				<b>Compliance Status</b>				<b>Compliance Status</b>			
35	<																						



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

Establishment Name New York Pizza And Pasta		Type of Establishment <input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Mobile <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal	SCORE <b>100</b>	
Address 611 Parkway Suite B5		Time in 01:29 PM AM / PM	Time out 01:40 PM AM / PM	
City Gatlinburg				
Inspection Date 10/20/2020		Establishment # 605258342	Embargoed 0	
Purpose of Inspection <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Preliminary <input type="checkbox"/> Consultation/Other				
Risk Category <input type="checkbox"/> O1 <input checked="" type="checkbox"/> O2 <input type="checkbox"/> O3 <input type="checkbox"/> O4		Follow-up Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Seats 40

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.

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance				OUT=not in compliance				NA=not applicable				NO=not observed				COS=corrected on-site during inspection				R=repeat violation of the same code provision				
																Compliance Status				COS R WT				
																Supervision								
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Person in charge present, demonstrates knowledge, and performs duties.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	5					
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Management and food employee awareness, reporting.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Proper use of restriction and exclusion.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Good Hygiene Practices								
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Proper eating, tasting, drinking, or tobacco use.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>														No discharge from eyes, nose, and mouth.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Preventing Contamination by Hands								
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Hands clean and properly washed.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Consumer Advisory								
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food obtained from approved source.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food received at proper temperature.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>													Food in good condition, safe, and unadulterated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Required records available: shell stock tags, parasite destruction.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Protection from Contamination								
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food separated and protected.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food-contact surfaces: cleaned and sanitized.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Proper disposition of unsafe food, returned food not re-served.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Approved Sources								
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Food obtained from approved source.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food received at proper temperature.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food in good condition, safe, and unadulterated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>													Required records available: shell stock tags, parasite destruction.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Protection from Contamination								
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food separated and protected.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Food-contact surfaces: cleaned and sanitized.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Proper disposition of unsafe food, returned food not re-served.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
27	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Consumer Advisory								
28	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Food obtained from approved source.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food received at proper temperature.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food in good condition, safe, and unadulterated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Required records available: shell stock tags, parasite destruction.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Protection from Contamination								
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food separated and protected.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food-contact surfaces: cleaned and sanitized.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Proper disposition of unsafe food, returned food not re-served.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Consumer Advisory								
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food obtained from approved source.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food received at proper temperature.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food in good condition, safe, and unadulterated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Required records available: shell stock tags, parasite destruction.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Protection from Contamination								
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food separated and protected.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food-contact surfaces: cleaned and sanitized.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Proper disposition of unsafe food, returned food not re-served.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
45	<input checked="" type="checkbox"/>	<input type="checkbox"/>														Consumer Advisory								
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food obtained from approved source.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food received at proper temperature.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food in good condition, safe, and unadulterated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Required records available: shell stock tags, parasite destruction.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Protection from Contamination								
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food separated and protected.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food-contact surfaces: cleaned and sanitized.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Proper disposition of unsafe food, returned food not re-served.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Consumer Advisory								
55	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food obtained from approved source.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
56	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food received at proper temperature.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
57	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food in good condition, safe, and unadulterated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
58	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Required records available: shell stock tags, parasite destruction.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
59	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Protection from Contamination								
60	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food separated and protected.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
61	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food-contact surfaces: cleaned and sanitized.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
62	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Proper disposition of unsafe food, returned food not re-served.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
63	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Consumer Advisory								
64	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food obtained from approved source.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
65	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food received at proper temperature.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
66	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Food in good condition, safe, and unadulterated.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
67	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													Required records available: shell stock tags, parasite destruction.	<input type="checkbox"/>	<input checked="" type="checkbox"/>						
68	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					</td																



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

Establishment Name	Archers BBQ				Type of Establishment	<input checked="" type="checkbox"/> Permanent	<input type="checkbox"/> Mobile			
Address	5415 Kingston Pike				<input type="checkbox"/> Temporary	<input type="checkbox"/> Seasonal				
City	Knoxville				Time in	12:10 PM	AM / PM			
Inspection Date	10/23/2020		Establishment #	605223174	Time out	12:15:PM	AM / PM			
Embargoed	0									
Purpose of Inspection	<input type="checkbox"/> Routine	<input checked="" type="checkbox"/> Follow-up	<input type="checkbox"/> Complaint	<input type="checkbox"/> Preliminary	<input type="checkbox"/> Consultation/Other					
Risk Category	O1	X2	O3	O4	Follow-up Required		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
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.										
<b>FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS</b>										
(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or sub-category.)										
IN=in compliance		OUT=not in compliance		NA=not applicable		NO=not observed				
COS=corrected on-site during inspection										
R=repeat violation of the same code provision										
Compliance Status								COS	R	WT
Supervision										
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	5
	Person in charge present, demonstrates knowledge, and performs duties.									
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	5
	Employee Health									
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	5
	Management and food employee awareness, reporting proper use of restriction and exclusion									
Good Hygiene Practices								COS	R	WT
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Proper eating, tasting, drinking, or tobacco use									
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	No discharge from eyes, nose, and mouth									
Preventing Contamination by Hands								COS	R	WT
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Hands clean and properly washed									
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	No bare hand contact with ready-to-eat foods or approved alternate procedures followed									
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2
	Handwashing sinks properly supplied and accessible									
Approved Source								COS	R	WT
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Food obtained from approved source									
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Food received at proper temperature									
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Food in good condition, safe, and unadulterated									
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Required records available; shell stock tags, parasite destruction									
Protection from Contamination								COS	R	WT
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4
	Food separated and protected									
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Food-contact surfaces, cleaned and sanitized									
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Proper disposition of unsafe food, returned food not re-served									
Conformance with Approved Procedures								COS	R	WT
16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Food additives, approved and properly used									
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Toxic substances properly identified, stored, used									
Chemicals								COS	R	WT
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	Compliance with variance, specialized process, and HACCP plan									

**Good Retail Practices** are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES									
OUT-not in compliance		COS-corrected on-site during inspection			R-repeat violation of the same code provision				
Compliance Status		COS	R	WT	Compliance Status		COS	R	WT
OUT	Safe Food and Water								
28	<input type="radio"/> Pasteurized eggs used where required	O	O	1					
29	<input type="radio"/> Water and ice from approved source	O	O	2					
30	<input type="radio"/> Variance obtained for specialized processing methods	O	O	1					
OUT	Food Temperature Control								
31	<input type="radio"/> Proper cooling methods used; adequate equipment for temperature control	O	O	2					
32	<input type="radio"/> Plant food properly cooked for hot holding	O	O	1					
33	<input type="radio"/> Approved thawing methods used	O	O	1					
34	<input type="radio"/> Thermometers provided and accurate	O	O	1					
OUT	Food Identification								
35	<input type="radio"/> Food properly labeled; original container, required records available	O	O	1					
OUT	Prevention of Food Contamination								
36	<input type="radio"/> Insects, rodents, and animals not present	O	O	2					
37	<input type="radio"/> Contamination prevented during food preparation, storage & display	O	O	1					
38	<input type="radio"/> Personal cleanliness	O	O	1					
39	<input type="radio"/> Wiping cloths, properly used and stored	O	O	1					
40	<input type="radio"/> Washing fruits and vegetables	O	O	1					
OUT	Proper Use of Utensils								
41	<input type="radio"/> In-use utensils, properly stored	O	O	1					
42	<input type="radio"/> Utensils, equipment and linens, properly stored, dried, handled	O	O	1					
43	<input type="radio"/> Single-user/single-service articles, properly stored, used	O	O	1					
44	<input type="radio"/> Laundered used linens	O	O	1					
Non-Smokers Protection Act									
57	Compliance with TN Non-Smoker Protection Act		X	O					
58	Tobacco products offered for sale		O	O					
59	If tobacco products are sold, NSPA survey completed		O	O					

**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. Risks identified as constituting imminent health hazard shall be corrected immediately or abated as soon as possible. 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.**

Poldine Bddae

10/23/2020

*[Signature]*

10/23/2020

Date \_\_\_\_\_ Signature of Environmental Health Specialist



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

Establishment Name

Big Daddy's BBQ Shack

Address:

711 S. White St

City:

Athens

Time in 12:41 PM

Type of Establishment

 Permanent     Mobile Temporary     Seasonal

Inspection Date

10/22/2020

Establishment # 605263650

Embargoed 0

Time out 01:56:PM AM / PM

SCORE

99

Purpose of Inspection

 Routine Follow-up Complaint Preliminary Consultation/Other

Risk Category

 O1 O2 O3 O4 Follow-up Required Yes     No

Number of Seats 80

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.

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

(Mark designated compliance status (IN, OUT, NA, NC) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance    OUT=not in compliance    NA=not applicable    NO=not observed				COS	R	WT	COS=corrected on-site during inspection    R=repeat violation of the same code provision				
Compliance Status				Compliance Status				Compliance Status			
IN	OUT	NA	NO	IN	OUT	NA	NO	IN	OUT	NA	NO
<b>Supervision</b>											
1 <input checked="" type="checkbox"/>	<input type="checkbox"/>			Person in charge present, demonstrates knowledge, and performs duties	<input type="checkbox"/>	<input type="checkbox"/>	5				
<b>Employee Health</b>											
2 <input checked="" type="checkbox"/>	<input type="checkbox"/>			Management and food employee awareness, reporting	<input type="checkbox"/>	<input type="checkbox"/>					
3 <input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>	5				
<b>Good Hygiene Practices</b>											
4 <input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>					
5 <input checked="" type="checkbox"/>	<input type="checkbox"/>			No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>	5				
<b>Preventing Contamination by Hands</b>											
6 <input checked="" type="checkbox"/>	<input type="checkbox"/>			Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>					
7 <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		No bare hand contact with ready-to-eat foods or approved alternate procedures followed	<input type="checkbox"/>	<input type="checkbox"/>	5				
8 <input checked="" type="checkbox"/>	<input type="checkbox"/>			Handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>	2				
<b>Approved Source</b>											
9 <input checked="" type="checkbox"/>	<input type="checkbox"/>			Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>					
10 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>					
11 <input checked="" type="checkbox"/>	<input type="checkbox"/>			Food in good condition, safe, and undamaged	<input type="checkbox"/>	<input type="checkbox"/>					
12 <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required records available: shell stock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Protection from Contamination</b>											
13 <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>	4				
14 <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food-contact surfaces: cleaned and sanitized	<input type="checkbox"/>	<input type="checkbox"/>	5				
15 <input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper disposition of unsafe food, returned food not re-served	<input type="checkbox"/>	<input type="checkbox"/>	2				
<b>Consumer Advisory</b>											
23 <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Consumer advisory provided for raw and undercooked food	<input type="checkbox"/>	<input type="checkbox"/>	4				
<b>Mightly Susceptible Populations</b>											
24 <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>	5				
<b>Chemicals</b>											
25 <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Food additives: approved and properly used	<input type="checkbox"/>	<input type="checkbox"/>					
26 <input checked="" type="checkbox"/>	<input type="checkbox"/>			Toxic substances properly identified, stored, used	<input type="checkbox"/>	<input type="checkbox"/>	5				
<b>Conformance with Approved Procedures</b>											
27 <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Compliance with variance, specialized process, and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>	5				

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES				COS	R	WT	R=repeat violation of the same code provision				
Compliance Status				Compliance Status				Compliance Status			
OUT	IN	OUT	NA	IN	OUT	NA	NO	IN	OUT	NA	NO
<b>Safe Food and Water</b>											
28 <input type="checkbox"/>	<input checked="" type="checkbox"/>			Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>	1				
29 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Water and ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	2				
30 <input type="checkbox"/>	<input type="checkbox"/>			Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>	1				
<b>Food Temperature Control</b>											
31 <input type="checkbox"/>	<input checked="" type="checkbox"/>			Proper cooking methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>	2				
32 <input type="checkbox"/>	<input checked="" type="checkbox"/>			Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	1				
33 <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>	1				
34 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Thermometers provided and accurate	<input type="checkbox"/>	<input type="checkbox"/>	1				
<b>Food Identification</b>											
35 <input type="checkbox"/>	<input checked="" type="checkbox"/>			Food properly labeled; original container, required records available	<input type="checkbox"/>	<input type="checkbox"/>	1				
<b>Prevention of Food Contamination</b>											
36 <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Insects, rodents, and animals not present	<input type="checkbox"/>	<input type="checkbox"/>	2				
37 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Contamination prevented during food preparation, storage & display	<input type="checkbox"/>	<input type="checkbox"/>	1				
38 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	1				
39 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Wiping cloths, properly used and stored	<input type="checkbox"/>	<input type="checkbox"/>	1				
40 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Washing fruits and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	1				
<b>Proper Use of Utensils</b>											
41 <input type="checkbox"/>	<input checked="" type="checkbox"/>			In-use utensils; properly stored	<input type="checkbox"/>	<input type="checkbox"/>	1				
42 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Utensils, equipment and linens; properly stored, dried, handled	<input type="checkbox"/>	<input type="checkbox"/>	1				
43 <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Single-use/single-service articles; properly stored, used	<input type="checkbox"/>	<input type="checkbox"/>	1				
44 <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>	1				
<b>Administrative Items</b>											
55 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Current permit posted	<input type="checkbox"/>	<input type="checkbox"/>	0				
56 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Most recent inspection posted	<input type="checkbox"/>	<input type="checkbox"/>	0				
<b>Non-Smokers Protection Act</b>											
57 <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Compliance with TN Non-Smoker Protection Act	<input type="checkbox"/>	<input type="checkbox"/>	0				
58 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Tobacco products offered for sale	<input type="checkbox"/>	<input type="checkbox"/>	0				
59 <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		If tobacco products are sold, NSPA survey completed	<input type="checkbox"/>	<input type="checkbox"/>	0				

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 operator 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 63-14-703, 63-14-705, 63-14-708, 63-14-709, 63-14-711, 63-14-715, 63-14-718, 4-5-320.

Signature of Person in Charge

Date

10/22/2020

Signature of Environmental Health Specialist

Date

\*\*\* Additional food safety information can be found on our website, <http://tn.gov/health/article/eh-food-service> \*\*\*