



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
69

Establishment Name Misaki Japanese Steak House Type of Establishment Permanent Mobile
 Address 8207 Kingston Pike Temporary Seasonal
 City Knoxville Time in 03:16 PM AM / PM Time out 04:31 PM AM / PM
 Inspection Date 10/15/2020 Establishment # 605083827 Embargoed 0
 Purpose of Inspection Routine Follow-up Complaint Preliminary Consultation/Other
 Risk Category 01 02 03 04 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 as observed. 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		COS		R		WT		IN		OUT		NA		NO		COS		R		WT		
Supervision																												
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
Employee Health																												
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
Good Hygienic Practices																												
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
Preventing Contamination by Hands																												
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>																										
Approved Sources																												
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
Protection from Contamination																												
13	<input type="checkbox"/>	<input checked="" type="checkbox"/>																										
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods																												
16	<input type="checkbox"/>	<input type="checkbox"/>																										
17	<input type="checkbox"/>	<input type="checkbox"/>																										
Cooling and Holding, Date Marking, and Time as a Public Health Control																												
18	<input type="checkbox"/>	<input type="checkbox"/>																										
19	<input type="checkbox"/>	<input type="checkbox"/>																										
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>																										
22	<input type="checkbox"/>	<input type="checkbox"/>																										
Consumer Advisory																												
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>																										
Highly Susceptible Populations																												
24	<input type="checkbox"/>	<input type="checkbox"/>																										
Chemicals																												
25	<input type="checkbox"/>	<input checked="" type="checkbox"/>																										
26	<input type="checkbox"/>	<input checked="" type="checkbox"/>																										
Conformance with Approved Procedures																												
27	<input type="checkbox"/>	<input type="checkbox"/>																										

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																	
OUT		COS		R		WT		IN		OUT		COS		R		WT	
Safe Food and Water																	
28	<input type="checkbox"/>																
29	<input type="checkbox"/>																
30	<input type="checkbox"/>																
Food Temperature Control																	
31	<input type="checkbox"/>																
32	<input type="checkbox"/>																
33	<input type="checkbox"/>																
34	<input type="checkbox"/>																
Food Identification																	
35	<input checked="" type="checkbox"/>																
Prevention of Food Contamination																	
36	<input checked="" type="checkbox"/>																
37	<input checked="" type="checkbox"/>																
38	<input type="checkbox"/>																
39	<input type="checkbox"/>																
40	<input type="checkbox"/>																
Proper Use of Utensils																	
41	<input type="checkbox"/>																
42	<input type="checkbox"/>																
43	<input type="checkbox"/>																
44	<input type="checkbox"/>																
Utensils and Equipment																	
45	<input type="checkbox"/>																
46	<input checked="" type="checkbox"/>																
47	<input checked="" type="checkbox"/>																
Physical Facilities																	
48	<input type="checkbox"/>																
49	<input checked="" type="checkbox"/>																
50	<input type="checkbox"/>																
51	<input type="checkbox"/>																
52	<input checked="" type="checkbox"/>																
53	<input checked="" type="checkbox"/>																
54	<input type="checkbox"/>																
Administrative Items																	
55	<input type="checkbox"/>																
56	<input type="checkbox"/>																
Compliance Status																	
Non-Smokers Protection Act																	
57	<input checked="" type="checkbox"/>																
58	<input type="checkbox"/>																
59	<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 to serious 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 58-54-203, 58-54-204, 58-54-208, 63-14-202, 63-14-711, 63-14-715, 63-14-716, 4-5-320.

Signature of Person In Charge [Signature] Date 10/15/2020 Signature of Environmental Health Specialist [Signature] Date 10/15/2020

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

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

Warewashing Info			
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
	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



TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
88

Establishment Name: Misaki Japanese Steak House
Address: 8207 Kingston Pike
City: Knoxville
Inspection Date: 10/28/2020
Time in: 05:04 PM
Time out: 05:21 PM
Establishment #: 605083827
Embargoed: 0
Purpose of Inspection: Routine
Risk Category: 2
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 numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

Table with 4 main sections: Supervision, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, Protection from Contamination, Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods, Cooling and Holding, Date Marking, and Time as a Public Health Control, Consumer Advisory, Highly Susceptible Populations, Chemicals, and Conformance with Approved Procedures.

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

GOOD RETAIL PRACTICES

Table with 4 main sections: Safe Food and Water, Food Temperature Control, Food Identification, Prevention of Food Contamination, Proper Use of Utensils, Utensils and Equipment, Physical Facilities, Administrative Items, and Non-Smokers Protection Act.

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.

Signature of Person in Charge: [Signature] Date: 10/28/2020
Signature of Environmental Health Specialist: [Signature] Date: 10/28/2020

Free food safety training classes are available each month at the county health department. Please call () 8652155200 to sign-up for a class.



TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
100

Establishment Name: Salsarita's
Address: 10919 Parkside Dr.
City: Knoxville
Inspection Date: 10/22/2020
Establishment #: 605179646
Type of Establishment: Permanent
Purpose of Inspection: Routine
Risk Category: 2
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
(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.)

Table with 2 columns: Compliance Status and Compliance Status. Rows include Supervision, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, Protection from Contamination, Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods, Cooling and Holding, Date Marking, and Time as a Public Health Control, Consumer Advisory, Highly Susceptible Populations, and Chemicals.

GOOD RETAIL PRACTICES are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES

Table with 2 columns: Compliance Status and Compliance Status. Rows include Safe Food and Water, Food Temperature Control, Food Identification, Prevention of Food Contamination, Proper Use of Utensils, Utensils and Equipment, Physical Facilities, Administrative Items, Non-Smokers Protection Act, and Compliance Status.

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.

Signature of Person in Charge: [Signature] Date: 10/22/2020
Signature of Environmental Health Specialist: [Signature] Date: 10/22/2020

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

SCORE
100

Establishment Name: Jet's Pizza TN 10
Address: 7331 Kingston Pike
City: Knoxville
Inspection Date: 10/13/2020
Time in: 10:20 AM
Time out: 11:00 AM
Purpose of Inspection: Routine
Risk Category: Q1

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 as entered here. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

Table with columns: IN, OUT, NA, NO, Compliance Status, COS, R, WT. Rows include Supervision, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, and Protection from Contamination.

Table with columns: IN, OUT, NA, NO, Compliance Status, COS, R, WT. Rows include Cooking and Reheating of Time/Temperature Control Per Safety (TCS) Foods, Cooling and Holding, Date Marking, and Time as a Public Health Control, Consumer Advisory, Highly Susceptible Populations, Chemicals, and Conformance with Approved Procedures.

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

Table with columns: OUT, Compliance Status, COS, R, WT. Rows include Safe Food and Water, Food Temperature Control, Food Identification, Prevention of Food Contamination, and Proper Use of Utensils.

Table with columns: OUT, Compliance Status, COS, R, WT. Rows include Utensils and Equipment, Physical Facilities, Administrative Items, and Non-Smokers Protection Act.

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.

Signature of Person In Charge: [Signature] Date: 10/13/2020
Signature of Environmental Health Specialist: [Signature] Date: 10/13/2020



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
100

Establishment Name South Press Type of Establishment Permanent Mobile
 Address 3715 Chapman Highway
 City Knoxville Time in 12:00 PM AM / PM Time out 12:30 PM AM / PM
 Inspection Date 10/20/2020 Establishment # 605301078 Embargoed 0
 Purpose of Inspection Routine Follow-up Complaint Preliminary Consultation/Other
 Risk Category 1 2 3 4 Follow-up Required Yes 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 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	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 type="checkbox"/>																			
Employee Health																													
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"/>																			
Good Hygiene Practices																													
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"/>																			
Preventing Contamination by Hands																													
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"/>																			
Approved Source																													
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Food obtained from approved source				<input type="checkbox"/>	<input type="checkbox"/>																			
10	<input checked="" type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	Required records available: shell stock tags, parasite destruction				<input type="checkbox"/>	<input type="checkbox"/>																			
Protection from Contamination																													
13	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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"/>																			
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper disposition of unsafe food; returned food not re-served				<input type="checkbox"/>	<input type="checkbox"/>																			
Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods																													
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cooking time and temperatures				<input type="checkbox"/>	<input type="checkbox"/>																			
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding				<input type="checkbox"/>	<input type="checkbox"/>																			
Cooling and Holding, Date Marking, and Time as a Public Health Control																													
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cooling time and temperature				<input type="checkbox"/>	<input type="checkbox"/>																			
19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures				<input type="checkbox"/>	<input type="checkbox"/>																			
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures				<input type="checkbox"/>	<input type="checkbox"/>																			
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking and disposition				<input type="checkbox"/>	<input type="checkbox"/>																			
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures and records				<input type="checkbox"/>	<input type="checkbox"/>																			
Consumer Advisory																													
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw and undercooked food				<input type="checkbox"/>	<input type="checkbox"/>																			
Highly Susceptible Populations																													
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pasteurized foods used; prohibited foods not offered				<input type="checkbox"/>	<input type="checkbox"/>																			
Chemicals																													
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food additives: approved and properly used				<input type="checkbox"/>	<input type="checkbox"/>																			
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified, stored, used				<input type="checkbox"/>	<input type="checkbox"/>																			
Conformance with Approved Procedures																													
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Compliance with variance, specialized process, and HACCP plan				<input type="checkbox"/>	<input type="checkbox"/>																			

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	
Safe Food and Water																				
28	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required				<input type="checkbox"/>	<input type="checkbox"/>										
29	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source				<input type="checkbox"/>	<input type="checkbox"/>										
30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Variance obtained for specialized processing methods				<input type="checkbox"/>	<input type="checkbox"/>										
Food Temperature Control																				
31	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control				<input type="checkbox"/>	<input type="checkbox"/>										
32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding				<input type="checkbox"/>	<input type="checkbox"/>										
33	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used				<input type="checkbox"/>	<input type="checkbox"/>										
34	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate				<input type="checkbox"/>	<input type="checkbox"/>										
Food Identification																				
35	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container; required records available				<input type="checkbox"/>	<input type="checkbox"/>										
Prevention of Food Contamination																				
36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present				<input type="checkbox"/>	<input type="checkbox"/>										
37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display				<input type="checkbox"/>	<input type="checkbox"/>										
38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness				<input type="checkbox"/>	<input type="checkbox"/>										
39	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored				<input type="checkbox"/>	<input type="checkbox"/>										
40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits and vegetables				<input type="checkbox"/>	<input type="checkbox"/>										
Proper Use of Utensils																				
41	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored				<input type="checkbox"/>	<input type="checkbox"/>										
42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled				<input type="checkbox"/>	<input type="checkbox"/>										
43	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use/single-service articles: properly stored, used				<input type="checkbox"/>	<input type="checkbox"/>										
44	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly				<input type="checkbox"/>	<input type="checkbox"/>										
Utensils and Equipment																				
45	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food and nonfood-contact surfaces: cleanable, properly designed, constructed, and used				<input type="checkbox"/>	<input type="checkbox"/>										
46	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips				<input type="checkbox"/>	<input type="checkbox"/>										
47	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nonfood-contact surfaces: clean				<input type="checkbox"/>	<input type="checkbox"/>										
Physical Facilities																				
48	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available: adequate pressure				<input type="checkbox"/>	<input type="checkbox"/>										
49	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices				<input type="checkbox"/>	<input type="checkbox"/>										
50	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage and waste water properly disposed				<input type="checkbox"/>	<input type="checkbox"/>										
51	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned				<input type="checkbox"/>	<input type="checkbox"/>										
52	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained				<input type="checkbox"/>	<input type="checkbox"/>										
53	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained, and clean				<input type="checkbox"/>	<input type="checkbox"/>										
54	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Adequate ventilation and lighting; designated areas used				<input type="checkbox"/>	<input type="checkbox"/>										
Administrative Items																				
55	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Current permit posted				<input type="checkbox"/>	<input type="checkbox"/>										
56	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Most recent inspection posted				<input type="checkbox"/>	<input type="checkbox"/>										
Compliance Status																				
Non-Smokers Protection Act																				
57	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compliance with TN Non-Smoker Protection Act				<input type="checkbox"/>	<input type="checkbox"/>										
58	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tobacco products offered for sale				<input type="checkbox"/>	<input type="checkbox"/>										
59	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input 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 26-2-703, 26-14-703, 26-21-703, 26-14-704, 26-18-711, 26-21-711, 26-14-716, 4-5-320.

Signature of Person in Charge [Signature] Date 10/20/2020 Signature of Environmental Health Specialist [Signature] Date 10/20/2020

*** 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

SCORE
100

Establishment Name: Taco Bell #36404
Address: 11524 Chapman Highway
City: Seymour
Inspection Date: 10/22/2020
Purpose of Inspection: Routine
Risk Category: 1

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

Table with 4 main columns: Compliance Status (IN, OUT, NA, NO), COS, R, WT. Sub-sections include Supervision, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, Protection from Contamination, Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods, Cooling and Holding, Date Marking, and Time as a Public Health Control, Consumer Advisory, Highly Susceptible Populations, Chemicals, and Conformance with Approved Procedures.

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

GOOD RETAIL PRACTICES

Table with 4 main columns: Compliance Status (OUT), COS, R, WT. Sub-sections include Safe Food and Water, Food Temperature Control, Food Identification, Prevention of Food Contamination, Proper Use of Utensils, Utensils and Equipment, Physical Facilities, Administrative Items, Non-Smokers Protection Act, and Compliance Status (YES, NO, WT).

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.

Signature of Person In Charge: [Signature] Date: 10/22/2020
Signature of Environmental Health Specialist: [Signature] Date: 10/22/2020



TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
100

Establishment Name: Golden Corral
Address: 513 Winfield Dunn Pkwy.
City: Sevierville
Inspection Date: 10/19/2020
Establishment #: 605110239
Time in: 10:52 AM
Time out: 12:07 AM
Purpose of Inspection: Routine
Risk Category: 02
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 (IK, OUT, NA, NO) for each as numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

Table with columns: IN, OUT, NA, NO, COS, R, WT. Rows include Supervision, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, and Protection from Contamination.

Table with columns: IN, OUT, NA, NO, COS, R, WT. Rows include Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods, Cooking and Holding, Date Marking, and Time as a Public Health Control, Consumer Advisory, Highly Susceptible Populations, Chemicals, and Conformance with Approved Procedures.

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

Table with columns: OUT, COS, R, WT. Rows include Safe Food and Water, Food Temperature Control, Food Identification, Prevention of Food Contamination, and Proper Use of Utensils.

Table with columns: OUT, COS, R, WT. Rows include Utensils and Equipment, Physical Facilities, Administrative Items, and Non-Smokers Protection Act.

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.

Signature of Person In Charge: Miguel
Date: 10/19/2020
Signature of Environmental Health Specialist: [Signature]
Date: 10/19/2020



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
100

Establishment Name New York Pizza And Pasta Type of Establishment Permanent Mobile
 Address 611 Parkway Suite B5 Temporary Seasonal
 City Gatlinburg Time in 01:29 PM AM / PM Time out 01:40 PM AM / PM
 Inspection Date 10/20/2020 Establishment # 605258342 Embargoed 0
 Purpose of Inspection Routine Follow-up Complaint Preliminary Consultation/Other
 Risk Category 1 2 3 4 Follow-up Required Yes 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 as observed from. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN	OUT	NA	NO	COS	R	WT
Supervision						
<input checked="" type="checkbox"/>	<input type="checkbox"/>					5
Employee Health						
<input checked="" type="checkbox"/>	<input type="checkbox"/>					5
Good Hygiene Practices						
<input checked="" type="checkbox"/>	<input type="checkbox"/>					5
<input checked="" type="checkbox"/>	<input type="checkbox"/>					5
Preventing Contamination by Hands						
<input checked="" type="checkbox"/>	<input type="checkbox"/>					5
<input checked="" type="checkbox"/>	<input type="checkbox"/>					2
Approved Source						
<input checked="" type="checkbox"/>	<input type="checkbox"/>					5
<input checked="" type="checkbox"/>	<input type="checkbox"/>					5
<input checked="" type="checkbox"/>	<input type="checkbox"/>					5
Protection from Contamination						
<input checked="" type="checkbox"/>	<input type="checkbox"/>					4
<input checked="" type="checkbox"/>	<input type="checkbox"/>					5
<input checked="" type="checkbox"/>	<input type="checkbox"/>					2

IN	OUT	NA	NO	COS	R	WT
Compliance Status						
Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods						
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5
Cooling and Holding, Date Marking, and Time as a Public Health Control						
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5
Consumer Advisory						
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			4
Highly Susceptible Populations						
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5
Chemicals						
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5
Conformance with Approved Procedures						
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			5

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

OUT	COS	R	WT
Safe Food and Water			
<input type="checkbox"/>			1
<input type="checkbox"/>			2
<input type="checkbox"/>			1
Food Temperature Control			
<input type="checkbox"/>			2
<input type="checkbox"/>			1
<input type="checkbox"/>			1
<input type="checkbox"/>			1
Food Identification			
<input type="checkbox"/>			1
Prevention of Food Contamination			
<input type="checkbox"/>			2
<input type="checkbox"/>			1
<input type="checkbox"/>			1
<input type="checkbox"/>			1
<input type="checkbox"/>			1
Proper Use of Utensils			
<input type="checkbox"/>			1
<input type="checkbox"/>			1
<input type="checkbox"/>			1
<input type="checkbox"/>			1

OUT	COS	R	WT
Utensils and Equipment			
<input type="checkbox"/>			1
<input type="checkbox"/>			1
<input type="checkbox"/>			1
Physical Facilities			
<input type="checkbox"/>			2
<input type="checkbox"/>			2
<input type="checkbox"/>			2
<input type="checkbox"/>			1
<input type="checkbox"/>			1
<input type="checkbox"/>			1
<input type="checkbox"/>			1
Administrative Items			
<input type="checkbox"/>			0
<input type="checkbox"/>			0
Compliance Status			
Non-Smokers Protection Act			
<input checked="" type="checkbox"/>			0
<input type="checkbox"/>			0
<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 violations 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. If you have any questions, call 615-725-7200, 68-14-708, 68-14-709, 68-14-710, 68-54-711, 68-54-715, 68-14-716, 4-5-370.

Signature of Person In Charge: [Signature] Date: 10/20/2020
 Signature of Environmental Health Specialist: [Signature] Date: 10/20/2020

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TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

99

Establishment Name Archers BBQ Type of Establishment Permanent Mobile
 Address 5415 Kingston Pike Temporary Seasonal
 City Knoxville Time in 12:10 PM AM / PM Time out 12:15 PM AM / PM
 Inspection Date 10/23/2020 Establishment # 605223174 Embargoed 0
 Purpose of Inspection Routine Follow-up Complaint Preliminary Consultation/Other
 Risk Category 1 2 3 4 Follow-up Required Yes No Number of Seats 44

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 as entered. 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)		
IN	OUT	NA	NO	COS	R	WT	IN	OUT	NA	NO	COS	R	WT
Supervision													
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
Person in charge present, demonstrates knowledge, and performs duties.													
Employee Health													
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
Management and food employee awareness, reporting													
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
Proper use of restriction and exclusion													
Good Hygiene Practices													
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
Proper eating, tasting, drinking, or tobacco use													
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
No discharge from eyes, nose, and mouth													
Preventing Contamination by Hands													
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
Hands clean and properly washed													
7	<input checked="" 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"/>				2							
Handwashing sinks properly supplied and accessible													
Approved Source													
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
Food obtained from approved source													
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
Food received at proper temperature													
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
Food in good condition, safe, and unadulterated													
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
Required records available: shell stock tags, parasite destruction													
Protection from Contamination													
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>				4							
Food separated and protected													
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>				5							
Food-contact surfaces, cleaned and sanitized													
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>				2							
Proper disposition of unsafe food, returned food not re-served													

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

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 to public health hazards shall be corrected immediately or operators shall close. 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 26-14-701, 26-14-708, 26-14-708, 26-14-709, 26-14-711, 26-54-715, 26-14-716, 4-5-320.

Signature of Person in Charge Patricia B. Dade Date 10/23/2020 Signature of Environmental Health Specialist [Signature] Date 10/23/2020

*** 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

SCORE
99

Establishment Name Big Daddy's BBQ Shack Type of Establishment Permanent Mobile
 Address 711 S. White St
 City Athens Time in 12:41 PM AM / PM Time out 01:56 PM AM / PM
 Inspection Date 10/22/2020 Establishment # 605263650 Embargoed 0
 Purpose of Inspection Routine Follow-up Complaint Preliminary Consultation/Other
 Risk Category 1 2 3 4 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, NO) for each as observed item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

Compliance Status				COS=corrected on-site during inspection			R=repeat violation of the same code provision						
IN	OUT	NA	NO	COS	R	WT	IN	OUT	NA	NO	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.					
Employee Health													
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	5	Management and food employee awareness, reporting					
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	5	Proper use of restriction and exclusion					
Good Hygiene Practices													
4	<input checked="" 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"/>	5	No discharge from eyes, nose, and mouth					
Preventing Contamination by Hands													
6	<input checked="" 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"/>	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"/>	2	Handwashing sinks properly supplied and accessible					
Approved Source													
9	<input checked="" 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"/>	5	Food received at proper temperature					
11	<input checked="" 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"/>	5	Required records available: shell stock tags, parasite destruction					
Protection from Contamination													
13	<input checked="" 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"/>	5	Food-contact surfaces: cleaned and sanitized					
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2	Proper disposition of unsafe food, returned food not reserved					

Compliance Status				COS=corrected on-site during inspection			R=repeat violation of the same code provision						
IN	OUT	NA	NO	COS	R	WT	IN	OUT	NA	NO	COS	R	WT
Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods													
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	5	Proper cooking time and temperatures					
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	5	Proper reheating procedures for hot holding					
Cooling and Holding, Date Marking, and Time as a Public Health Control													
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5	Proper cooling time and temperature					
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	5	Proper hot holding temperatures					
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	5	Proper cold holding temperatures					
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	5	Proper date marking and disposition					
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5	Time as a public health control, procedures and records					
Consumer Advisory													
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4	Consumer advisory provided for raw and undercooked food					
Highly Susceptible Populations													
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5	Pasteurized foods used, prohibited foods not offered					
Chemicals													
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5	Food additives: approved and properly used					
26	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5	Toxic substances properly identified, stored, used					
Conformance with Approved Procedures													
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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

Compliance Status				COS=corrected on-site during inspection			R=repeat violation of the same code provision						
IN	OUT	NA	NO	COS	R	WT	IN	OUT	NA	NO	COS	R	WT
Safe Food and Water													
28	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Pasteurized eggs used where required					
29	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2	Water and ice from approved source					
30	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Variance obtained for specialized processing methods					
Food Temperature Control													
31	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2	Proper cooling methods used, adequate equipment for temperature control					
32	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Plant food properly cooked for hot holding					
33	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Approved thawing methods used					
34	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Thermometers provided and accurate					
Food Identification													
35	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Food properly labeled, original container, required records available					
Prevention of Food Contamination													
36	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2	Insects, rodents, and animals not present					
37	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Contamination prevented during food preparation, storage & display					
38	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Personal cleanliness					
39	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Wiping cloths, properly used and stored					
40	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Washing fruits and vegetables					
Proper Use of Utensils													
41	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	In-use utensils, properly stored					
42	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Utensils, equipment and linens, properly stored, dried, handled					
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Single-use/single-service articles, properly stored, used					
44	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Gloves used properly					

Compliance Status				COS=corrected on-site during inspection			R=repeat violation of the same code provision						
IN	OUT	NA	NO	COS	R	WT	IN	OUT	NA	NO	COS	R	WT
Utensils and Equipment													
45	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used					
46	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Warewashing facilities, installed, maintained, used, test strips					
47	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Nonfood-contact surfaces clean					
Physical Facilities													
48	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2	Hot and cold water available, adequate pressure					
49	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2	Plumbing installed, proper backflow devices					
50	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	2	Sewage and waste water properly disposed					
51	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Toilet facilities, properly constructed, supplied, cleaned					
52	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Garbage/refuse properly disposed, facilities maintained					
53	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Physical facilities installed, maintained, and clean					
54	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	1	Adequate ventilation and lighting, designated areas used					
Administrative Items													
55	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	0	Current permit posted					
56	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	0	Most recent inspection posted					
Compliance Status													
											YES	NO	WT
Non-Smokers Protection Act													
57	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	0	Compliance with TN Non-Smoker Protection Act					
58	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	0	Tobacco products offered for sale					
59	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	0	If tobacco products are sold, NSPA survey completed					

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 to a health hazard shall be corrected immediately or operators 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 55-14-703, 55-14-705, 55-14-708, 55-14-709, 55-14-711, 55-14-715, 55-14-716, 4-6-320.

Signature of Person in Charge [Signature] Date 10/22/2020 Signature of Environmental Health Specialist [Signature] Date 10/22/2020

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