TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

				7	Cedar Creek	Club Pool Bar										O Fermer's Market Food Unit				
Establishment Name			t Na	me	Type of Establishment O Mobile									J]					
Address					3581 Benders Ferry Rd. O Temporary O Seasonal Mt Juliet Time in 11:53; AM AM / PM Time out 12:10; PM AM / PM															
								1.5						me o	ut 12:10; PIVI AM/PM					
Inspe								0		-			d 0							
Purp				tion	鼠Routine	O Follow-up	O Complaint			O Pr	eimir	hary				nsultation/Other -up Required O Yes 叙 No	Number of C			
Risk Category X1 O2 O3 O4 Follow-u Risk Factors are food preparation practices and employee behaviors most commonly reported									to the Centers for Disease Control a			_								
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 (Hark designated compliance status (IN, OUT, NA, NO) for each numbered liem. 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 observ Compliance Status					COS R WT				Incorrected on-site during inspection R=repeat (violation of the same code provis Compliance Status							SION) COS R WT				
\rightarrow	-		NA	NO	D	Supervision			_			IN	OUT	NA	NO	Cooking and Reheating of Time/Temp Control For Safety (TCS) Food				
		0		NO	performs duties	esent, demonstrates kno	wiedge, and	0	0	5		0	0	8		Proper cooking time and temperatures		0	0	5
2	X.	0	NA	_ NO		Employee Health od employee awareness	s; reporting	0	0		1	0 IN	0	NA	NO	Proper reheating procedures for hot holding Ceeling and Holding, Date Marking, and	t Time as	-	-	
		0	NA	NO	Proper use of restric	tion and exclusion d Hyglenic Practices		0	0	Ů	12	0	0			a Public Health Control Proper cooling time and temperature		0		
4	0	0	-	X	Proper eating, tastin	g, drinking, or tobacco u	150	0	0	5	19	0	0	8		Proper hot holding temperatures		0	0	
	IN		NA	NO	Preventin	eyes, nose, and mouth g Contamination by I	Hands	0				0		ő	X	Proper cold holding temperatures Proper date marking and disposition		8	ő	5
-	0 0	0	0			ct with ready-to-eat food	s or approved	0	0	5	22	-	0	×		Time as a public health control: procedures an	d records	0	٥	
		-		1		properly supplied and ac	coessible	-	0	2	23	IN O	001	NA	NO	Consumer advisory provided for raw and under	rcooked	0	0	4
9	IN II 武	0	NA	NO	Food obtained from	Approved Source approved source			0			IN	OUT		NO	food Highly Susceptible Populations	•	-	-	
10		8	0		Food received at pr Food in good condit Required records av destruction	oper temperature ion, safe, and unadultera	ned	8	0	5	24	0	0	×		Pasteurized foods used; prohibited foods not o	ffered	0	0	5
								0	0			IN	OUT		NO	Chemicais				
13		001	NA	NO	Protect Food separated and	tion from Contaminat protected	lon	0	0	4	25 26	0	8	X	ļ	Food additives: approved and properly used Toxic substances properly identified, stored, u	sed	00	8	5
13	×	0	0	1		es: cleaned and sanitize f unsafe food, returned fi		0	0			IN		NA	NO	Conformance with Approved Proce Compliance with variance, specialized process				
15	2	0			served	ansale lood, recarded in	ood not re-	0	0	2	27	0	0	窝		HACCP plan	s, anu	0	0	5
				God	d Retail Practice	s are preventive m	easures to co	ntro	l the	intr	oduc	ction	of p	atho	gens	s, chemicals, and physical objects int	o foods.			
				0	T=not in compliance		COS=corre						TICE	8		R-repeat (violation of the same cod				
		OUT	_		Comp	liance Status ood and Water	003-0016		R		Ê		UT	_	_	Compliance Status Utensils and Equipment		COS	R	WT
28	:	0	Pas		ed eggs used where i d ice from approved s	required		0	8	1	4		o F			onfood-contact surfaces cleanable, properly des	igned,	0	0	1
30			Vari		obtained for specializ	ed processing methods		ŏ	ŏ	1		6	-			, and used og facilities, installed, maintained, used, test stri	ps	0	0	1
31	-	0	Prop			adequate equipment for	temperature	0	0	2	4	_	-	lonfoo	d-cor	ntact surfaces clean		0	0	1
32		-	cont Plan		properly cocked for	hot holding		0	0	1	4		UT O⊦	lot and	i cold	Physical Facilities i water available; adequate pressure		0	0	2
33	_	0	<u> </u>		thawing methods us eters provided and a			0	0	1		_	_			stalled, proper backflow devices d waste water properly disposed		0		2
	4	OUT			Food	Identification			-		5	<u>a</u>	0 1	oilet fa	scilitie	es: properly constructed, supplied, cleaned		0	0	1
35			Foo	d prop		container, required reco Food Contamination		0	0	1			-			use properly disposed; facilities maintained ilities installed, maintained, and clean		0	0	1
36	-	0	Inse	cts, ro	dents, and animals r			0	0	2			-			entilation and lighting; designated areas used		ō	0	1
37	,	0	Con	tamin	ation prevented durin	g food preparation, stora	ige & display	0	0	1		0	тл			Administrative items				
38		-	_		cleanliness			0	0	1		5		Jument	t pern	nit posted		0	0	0
39	_				oths; properly used a fruits and vegetables	nd stored		0			Ľ	6 .		fost re	cent	inspection posted Compliance Status		O YES		WT
41	_	OUT	_	se ute	Proper nsils; properly stored	Use of Utensils		0	0	1	5	7	-	Sompli	ance	Non-Smokers Protection Act with TN Non-Smoker Protection Act		X	0	
42	_	00	Uter Sing	nsils, e ple-use	equipment and linens a/single-service articl	; properly stored, dried, h es; properly stored, used	handled	0	00		5	8 9				oducts offered for sale roducts are sold, NSPA survey completed		0		0
	44 O Gloves used properly O O 1																			
servic	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. Rems 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																			
repor	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.																			
	_	Ľ	M		WUD	•	06/0)4/2	02	1	_	\geq	f ex	1	~V	Ahr'V ~	0)6/0	4/2	2021
Sign	atur	e of	Pers	son In	Charge					Date		-				ental Health Specialist				Date
						,							-		-	ealth/article/eh-foodservice **** unty health department.				
PH-2	057 (Rev.	6-15	9		PH-2267 (Rev. 6-15) Please call () 6154445325 to sign-up for a class.											RD	DA 629		

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Cedar Creek Club Pool Bar Establishment Number #: 605300936

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)						

Equipment Temperature								
Description	Temperature (Fahrenheit)							
Ric	38							

Decoription	State of Food	Temperature (Fahrenheit

Observed Vio	lations
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Total # 3

Repeated # 0

46: 3 comp sink missing drain boards

55: Permit not posted 56: Inspection report not posted

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Cedar Creek Club Pool Bar

Establishment Number : 605300936

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2: (IN): An employee health policy is available.

3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.

4: (N.O.) No food workers present.

5: (N.O.) No food workers present at the time of inspection.

6: (NO) No workers present during inspection.

7: (NO) No food workers present during the inspection.

8: (IN): All handsinks are properly equipped and conveniently located for food employee use.

9: See source info

10: (NO): No food received during inspection.

11: (IN) All food was in good, sound condition at time of inspection.

- 12: (NA) Shell stock not used and parasite destruction not required at this establishment.
- 13: (IN) All raw animal food is separated and protected as required.
- 14: (IN) All food contact surfaces of equipment and utensils cleaned and sanitized using approved methods.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: No food to temp during inspection but cooler is in temp
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 22: (NA) No food held under time as a public health control.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 24: (NA) A highly susceptible population is not served.
- 25: (NA) Establishment does not use any additives or sulfites on the premises.
- 26: (IN) All poisonous or toxic items are properly identified, stored, and used.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes. 57:

58:

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

Additional Comments See last page for additional comments.

Establishment Information

Establishment Name: Cedar Creek Club Pool Bar Establishment Number: 605300936

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Cedar Creek Club Pool Bar Establishment Number #: 605300936

Sources									
Source Type:	Water	Source:	City						
Source Type:	Food	Source:	PFG, Kroger						
Source Type:		Source:							
Source Type:		Source:							
Source Type:		Source:							
Additional Comments									

3 comp sink not setup