# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

	100		E C																	
Estal	bist	hme	nt N	ame	RENAISSAN	ICE HOTEL LI	TTLE FIB I	ЗАF	र			Tu		Establ	is linear	Farmer's Market Food     Section O Model		_	ረ	
Addr	855				611 COMME	RCE ST						Ty	pe or i	Establ	isnime	O Temporary O Se				
City					Nashville		Time in	12	2:5	QF	PM	A	M/P	м ті	me o	ut 01:20 PM A	M / PM			
Inspe	etie	- C	ate		02/07/202	2_Establishment#							ed 0							
Purp				ction	Routine	O Follow-up	O Complaint			– O Pr			~ -		<b>)</b> Co	nsultation/Other				
Risk					281	02	03			04						up Required O Yes	യ No Number of	Seats		
						aration practices a	and employee			* m				rep	orte	to the Centers for Disc	ase Control and Prever		_	
				-	contributing facto											control measures to pro	event liiness or injury.			
		(	arke	lesign	ited compliance status											ach liem as applicable. Deduc	t points for category or subcat	egory.	)	
IN-	in ci	omp	liano	6		e NA=not applicable liance Status	NO=not observe	d COS	R		>s=∝	mech	id on-s	ite dur	ing int	Spection R=repeat ( Compliance Stat	violation of the same code provis		R	WT
	IN	ou	T N/	A NO		Supervision						IN	OUT	NA	NO	-	g of Time/Temperature			
1		0			performs duties	esent, demonstrates kn	owledge, and	0	0	5	10			×		Proper cooking time and tem		0	0	5
2			_	A NO		Employee Health od employee awarenes	ss; reporting	0	0	_	17	7 0	0	X	0	Proper reheating procedures	for hot holding te Marking, and Time as	0	0	Ĵ
	×	0	-		Proper use of restric			0	0	5		IN	OUT	NA	NO		aith Control			
	_	00	T N/			d Hygienic Practices g. drinking, or tobacco			0		11	8 O		义文		Proper cooling time and tem Proper hot holding temperate		0	0	
5		0	1	0	No discharge from e	yes, nose, and mouth		ŏ	ŏ	5	2	0 0	0	25		Proper cold holding temperal	tures	0	0	5
	0	00	T NJ	A NO	Hands clean and pr	g Contamination by operly washed	Hands	0	0		2	1 0 2 0	0	X		Proper date marking and dis		0	0 0	
7	0	0	0	2	No bare hand conta alternate procedure	ct with ready-to-eat foo s followed	ds or approved	0	0	5	Ľ		OUT		NO	Time as a public health cont Consume	Advisory	Ľ	9	
8					Handwashing sinks	properly supplied and a Approved Source	occessible	X	0	2	2	_	0	23		Consumer advisory provideo food		0	0	4
9 3	武	0			Food obtained from	approved source			0			IN	OUT	NA	NO	- 10-10-10-10-	ible Populations			
10		0	P		Food received at pro Food in good condit	oper temperature ion, safe, and unadulter	rated	8	0	5	24	• 0	0	×		Pasteurized foods used; prol	hibited foods not offered	0	0	5
12	0	0	8	3 O	Required records av destruction	vailable: shell stock tage	s, parasite	0	0			IN	OUT	NA	NO	Chen	nicals			
13				A NO		tion from Contamina	tion	0	0	4	2	5 O	8	X	1	Food additives: approved an Toxic substances properly id		0	8	5
14	ŏ	X	ő			es: cleaned and sanitiz	bed		1 1 1 1 1 1			IN		NA	NO		pproved Procedures	Ĕ		
15	2	0		_	Proper disposition o served	f unsafe food, returned	food not re-	0	0	2	27	7 0	0	窝		Compliance with variance, s HACCP plan	pecialized process, and	0	0	5
				60	od Rotall Practice		annumento co	atro.	1.484	Inte	o du	otio	and a	atho		s, chemicals, and physic	al objects into foods	_	_	
					ou rectain Practice	and protontion	leasures to co						TICE		gena	, cremcais, and physic	ar objects into roots.			
				0	T=not in compliance	lanas Blatus	COS=corre	cted o	n-site	during							on of the same code provision)	Loos		14/7
		ou			Safe F	iance Status ood and Water			R			0	TUC			Compliance St Utensils and Equi		000		WT
28	_				ed eggs used where r d ice from approved s				0			15				infood-contact surfaces clean and used	able, properly designed,	0	0	1
30	_		Va		obtained for specializ	ed processing methods	;		Ō			16	0 V	Varew	ashin	g facilities, installed, maintain	ed, used, test strips	0	0	1
31		0	-	per c		adequate equipment fo	r temperature	0	0	2		_	-	lonfoo	d-cor	ntact surfaces clean		0	0	1
32		-		ntrol	d properly cooked for	hot bolding		-	0	-			NUT O ⊦	lot and	d cold	Physical Facilit water available; adequate pr		0	0	2
33		0	Ap	prove	thawing methods use	ed		0	0	1		19	O P	Yumbi	ng ins	stalled; proper backflow devic	65	0	0	2
34	_	00		ermon	neters provided and a Food	identification		0	0	1			-			i waste water properly dispose es: properly constructed, supp		0	0	2
35	;	0	Fo	od pro	perly labeled; original	container; required reco	ords available	0	0	1		52	0	Sarbaç	je/ref	use properly disposed; facilitie	es maintained	0	0	1
	-	ou	1		Prevention of	Food Contamination	n		_				-			ilities installed, maintained, an		-	0	1
36	•	0	Ins	ects, r	odents, and animals r	ot present		0	0	2	Ľ	54	0 / <sup>^</sup>	vdequa	ste ve	entilation and lighting; designa	ted areas used	0	0	1
37	_	0				g food preparation, stor	rage & display	0	0	1			TUC			Administrative I	tems			
38		-			cleanliness oths; properly used ar	nd stored		0	0	1						nit posted inspection posted		0	0	0
40	,	0	Wa		fruits and vegetables			Õ		1		_	_			Compliance Sta				WT
41	_		In-		ensils; properly stored				0			57				Non-Smokers P with TN Non-Smoker Protect		X		
42	_					properly stored, dried, es; properly stored, use		8			E	58 59				oducts offered for sale roducts are sold, NSPA surve	v completed	0	8	0
44	_				sed properly				ŏ	1					p1	and the second sec			-	
																Repeated violation of an identia e. You are required to post the f				
	er ar	nd p	ost ti	te mos	t recent inspection report		er. You have the rig	the to r	eques							filing a written request with the C				
	7	40			m		02/0			2			Į,			$\mathcal{A}$		02/0	)7/2	2022
Sign	atur	, re o	( Pe	rson I	n Charge		02/(			Date	S	gnah	ure of	Envir	onmo	ental Health Specialist	>		, , , 2	Date
						Additional food safety	information can	be fo								ealth/article/eh-foodservi	ce ****			
PH-2	267 (	(Rev	. 6-1	5)		,	training classe	s are	ava		e ead	ch m	onth	at the	e cou	unty health department. p for a class.			R	DA 629

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

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# Establishment Information Establishment Name: RENAISSANCE HOTEL LITTLE FIB BAR Establishment Number #: 605256543

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							
Dishes washed in back										

Equipment Temperature							
Description	Temperature (Fahrenheit)						
N/o							

Food Temperature	State of Food	Temperature (Fahrenheit
I/a		

Observed Violations

Total # 2

Repeated # 0

8: No soap at two hand sinks In bar area

14: Dish washer reading 0ppm /c.a dishes will need to be washed in back till repaired and inspected

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



#### Establishment Information

Establishment Name: RENAISSANCE HOTEL LITTLE FIB BAR

Establishment Number : 605256543

#### 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: (IN) Employee isn't drinking, eating, or using tobacco in a food preparation area.

5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.

6: (NO) No workers present during inspection.

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

9:

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:

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.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.

19: (NA) Establishment does not hot hold TCS foods.

20: (NA) Establishment does not cold hold TCS foods.

21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 24 hours.

22: (NA) No food held under time as a public health control.

23: (NA) Establishment does not serve animal food that is raw or undercooked.

24: (NA) A highly susceptible population is not served.

25: (NA) Establishment does not use any additives or sulfites on the premises.

26: (IN) All poisonous or toxic items are properly identified, stored, and used.

27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes. 57:

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.

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

# Establishment Information

Establishment Name: RENAISSANCE HOTEL LITTLE FIB BAR Establishment Number : 605256543

Comments/Other Observations (cont'd)

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

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Establishment Name: RENAISSANCE HOTEL LITTLE FIB BAR Establishment Number #: 605256543

Sources		
Source Type:	Source:	

# Additional Comments