

Establishment Name

# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Permanent O Mobile

1184 Long Hollow Pike. Address

Type of Establishment

O Temporary O Seasonal

Gallatin City

Time in 03:00 PM AM / PM Time out 03:45; PM

Inspection Date

06/28/2021 Establishment # 605227685

O Follow-up O Complaint O Preliminary

Embargoed 0

O Consultation/Other

**K**Routine Purpose of Inspection Risk Category О3

Last Call Bar and Grill

04

Follow-up Required

O Yes 疑 No

Number of Seats 110

SCORE

e Control and Prevention

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

| 117 | ¥=in c | ompli | ance |     | OUT=not in compliance NA=not applicable NO=not observe                                    | id  |   | Ö  | 05=c | orrec | tec    |
|-----|--------|-------|------|-----|---|-----|---|----|------|-------|--------|
|     |        |       |      |     | Compliance Status   | cos | R | WT |      |       |        |
|     | IN     | оит   | NA   | NO  | Supervision   |     |   |    | П    | IN    | ٦      |
| 1   | 盔      | 0     |      |     | Person in charge present, demonstrates knowledge, and<br>performs duties                  | 0   | 0 | 5  | 1    | 6 C   | ,      |
|     | IN     | OUT   | NA   | NO  | Employee Health   |     |   |    | 1    |       |        |
| 2   | 100    | 0     |      |     | Management and food employee awareness; reporting   | 0   | 0 |    | ı    |       | 1      |
| 3   | ×      | 0     |      |     | Proper use of restriction and exclusion   | 0   | 0 | 5  | ш    | IN    | 4      |
|     | IN     | OUT   | NA   | NO  | Good Hygienic Practices   |     |   |    | 1    | 8 C   | গ      |
| 4   | X      | 0     |      | 0   | Proper eating, tasting, drinking, or tobacco use  | 0   | 0 |    | 1    |       |        |
| 5   | 黨      | 0     |      | 0   | No discharge from eyes, nose, and mouth   | 0   | 0 | ٥  | 2    | 0 2   | П      |
|     | IN     | OUT   | NA   | NO  | Preventing Contamination by Hands   |     |   |    | 2    | 1 2   | डी     |
| 6   | 0      | 0     |      | 300 | Hands clean and properly washed   | 0   | 0 |    | l 2  | 2 0   | Л      |
| 7   | 0      | 0     | 0    | ×   | No bare hand contact with ready-to-eat foods or approved<br>alternate procedures followed | 0   | 0 | 5  | ۱    | IN    | $\Box$ |
| 8   | 300    | 0     |      |     | Handwashing sinks properly supplied and accessible  | 0   | 0 | 2  | l E  | -     | 7      |
| Ť   | IN     | OUT   | NA   | NO  | Approved Source   |     | _ | -  | 2    | 3 C   | ۱,     |
| 9   | 窓      | 0     |      |     | Food obtained from approved source  | 0   | 0 |    |      | IN    | đ      |
| 10  | 0      | 0     | 0    | 28  | Food received at proper temperature   | 0   | 0 |    | 1 2  | 4 0   | ╗      |
| 11  | ×      | 0     |      |     | Food in good condition, safe, and unadulterated   | 0   | 0 | 5  | Ιľ   | ۹ ۲   | Ί.     |
| 12  | 0      | 0     | ×    | 0   | Required records available: shell stock tags, parasite<br>destruction                     | 0   | 0 |    | П    | IN    | 4      |
|     | IN     | OUT   | NA   | NO  | Protection from Contamination   |     |   |    | 2    | 5 C   | л      |
| 13  | 黛      | 0     | 0    |     | Food separated and protected  | 0   | 0 | 4  | 2    | 6 8   | हो     |
| 14  | ×      | 0     | 0    |     | Food-contact surfaces: cleaned and sanitized  | 0   | 0 | 5  |      | IN    | П      |
| 15  | Ħ      | 0     |      |     | Proper disposition of unsafe food, returned food not re-<br>served                        | 0   | 0 | 2  | 2    | 7 C   | ,      |

|    |     |     |     |     | Compliance Status   | cos | к | WI |
|----|-----|-----|-----|-----|---|-----|---|----|
|    | IN  | OUT | NA  | NO  | Cooking and Reheating of Time/Temperature<br>Control For Safety (TCS) Foods |     |   |    |
| 16 |     | 0   | 0   | 黨   | Proper cooking time and temperatures  | 0   | 0 | 5  |
| 17 | 0   | 0   | 0   | 300 | Proper reheating procedures for hot holding                                 | 0   | 0 | ٠  |
|    | IN  | оит | NA  | NO  | Cooling and Holding, Date Marking, and Time as<br>a Public Health Control   |     |   |    |
| 18 | 0   | 0   | ×   | 0   | Proper cooling time and temperature   | 0   | 0 |    |
| 19 | 0   | 0   | 文   | 0   | Proper hot holding temperatures   | 0   | 0 |    |
| 20 | 243 | 0   | 0   |     | Proper cold holding temperatures  | 0   | 0 | 5  |
| 21 | *   | 0   | 0   | 0   | Proper date marking and disposition   | 0   | 0 | •  |
| 22 | 0   | 0   | ×   | 0   | Time as a public health control: procedures and records                     | 0   | 0 |    |
|    | IN  | OUT | NA  | NO  | Consumer Advisory   |     |   |    |
| 23 | 0   | 0   | ×   |     | Consumer advisory provided for raw and undercooked<br>food                  | 0   | 0 | 4  |
|    | IN  | OUT | NA  | NO  | Highly Susceptible Populations  |     |   |    |
| 24 | 0   | 0   | 333 |     | Pasteurized foods used; prohibited foods not offered                        | 0   | 0 | 5  |
|    | IN  | оит | NA  | NO  | Chemicals   |     |   |    |
| 25 | 0   | 0   | 3%  |     | Food additives: approved and properly used                                  | 0   | 0 | 5  |
| 26 | 80  | 0   |     |     | Toxic substances properly identified, stored, used                          | 0   | 0 | 9  |
|    | IN  | OUT | NA  | NO  | Conformance with Approved Procedures  |     |   |    |
| 27 | 0   | 0   | ×   |     | Compliance with variance, specialized process, and<br>HACCP plan            | 0   | 0 | 5  |

### to control the introduction of pathogens, chemicals, and physical objects into foods.

|    |     |  | GOO    |   |    |
|----|-----|--|--------|---|----|
|    |     | OUT=not in compliance COS=corr   |        |   |    |
|    |     | Compliance Status  | cos    | R | W  |
|    | OUT | Caro rocc and comes  |        |   | _  |
| 28 | 0   | Pasteurized eggs used where required                                       | 0      | 0 | 1  |
| 29 | 0   |  | 0      | 0 | _; |
| 30 | 0   | Variance obtained for specialized processing methods                       | 0      | 0 | 1  |
|    | OUT | Food Temperature Control   |        |   |    |
| 31 | 0   | Proper cooling methods used; adequate equipment for temperature<br>control | 0      | 0 | :  |
| 32 | 0   | Plant food properly cooked for hot holding                                 | 0      | 0 | Г  |
| 33 | 0   | Approved thawing methods used  | 0      | 0 | 1  |
| 34 | 0   | Thermometers provided and accurate   | 0      | 0 | Т  |
|    | OUT | Food Identification  |        |   |    |
| 35 | 0   | Food properly labeled; original container; required records available      | 0      | 0 |    |
|    | OUT | Prevention of Food Contamination   |        |   |    |
| 36 | 涎   | Insects, rodents, and animals not present                                  | 0      | 0 |    |
| 37 | 0   | Contamination prevented during food preparation, storage & display         | 0      | 0 | 1  |
| 38 | 0   | Personal cleanliness   | 0      | 0 | Г  |
| 39 | 0   | Wiping cloths; properly used and stored                                    | 0      | 0 |    |
| 40 | 0   | Washing fruits and vegetables  | 0      | 0 | '  |
|    | OUT | Proper Use of Utensils   | $\top$ |   |    |
| 41 | 0   | In-use utensils; properly stored   | 0      | 0 | г  |
| 42 | 0   | Utensils, equipment and linens; properly stored, dried, handled            | 0      | 0 | Г  |
| 43 | 280 | Single-use/single-service articles; properly stored, used                  | 0      | 0 | r  |
|    |     | Gloves used properly   |        |   |    |

| pect | on  | R-repeat (violation of the same code provision)  |      | -  | 147 |
|------|-----|--|------|----|-----|
|      |     | Compliance Status  | cos  | R  | W   |
|      | OUT | Utensiis and Equipment   | _    | _  | _   |
| 45   | 0   | Food and nonfood-contact surfaces cleanable, properly designed,<br>constructed, and used | 0    | 0  | 1   |
| 46   | 0   | Warewashing facilities, installed, maintained, used, test strips                         | 0    | 0  | 1   |
| 47   | 0   | Nonfood-contact surfaces clean   | 0    | 0  | 1   |
|      | OUT | Physical Facilities  |      |    |     |
| 48   | 0   | Hot and cold water available; adequate pressure  | 0    | 0  | -   |
| 49   | 0   | Plumbing installed; proper backflow devices  | 0    | 0  | -:  |
| 50   | 0   | Sewage and waste water properly disposed   | 0    | 0  | - 2 |
| 51   | 0   | Toilet facilities: properly constructed, supplied, cleaned                               | 0    | 0  |     |
| 52   | 0   | Garbage/refuse properly disposed; facilities maintained                                  | 0    | 0  | ٠   |
| 53   | 2%  | Physical facilities installed, maintained, and clean                                     | 0    | 0  | ,   |
| 54   | 0   | Adequate ventilation and lighting; designated areas used                                 | 0    | 0  | 1   |
|      | OUT | Administrative Items   | Т    |    |     |
| 55   | 0   | Current permit posted  | 0    | 0  | П   |
| 56   | 0   | Most recent inspection posted  | 0    | 0  | _ ` |
|      |     | Compliance Status  | YES  | NO | W   |
|      |     | Non-Smokers Protection Act   |      |    |     |
| 57   |     | Compliance with TN Non-Smoker Protection Act   | - 3% | 0  |     |
| 58   |     | Tobacco products offered for sale  | 0    | 0  | ١.  |
| 59   |     | If tobacco products are sold, NSPA survey completed                                      | 0    | 0  |     |

You have the right to request a h ten (10) days of the date of the

ignature of Person In Charge

06/28/2021

Date Signature of Environmental Health Specialist

06/28/2021

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

Free food safety training classes are available each month at the county health department. ) 6152061100 Please call ( to sign-up for a class.

RDA 629

Date

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



| _     |      |       |    |          |
|-------|------|-------|----|----------|
| ⊢ctal | hire | hmant | mt | ormation |

Establishment Name: Last Call Bar and Grill
Establishment Number # | 605227685

| 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 ( Fahrenhelt) |  |  |  |  |
| 3 comp sink not set up |                |     |                           |  |  |  |  |

| Equipment Temperature |                           |  |  |  |  |
|-----------------------|---------------------------|--|--|--|--|
| Description           | Temperature ( Fahrenheit) |  |  |  |  |
| Wic                   | 37                        |  |  |  |  |
| Fridge                | 40                        |  |  |  |  |
|                       |                           |  |  |  |  |
|                       |                           |  |  |  |  |

| Food Temperature |               |                           |
|------------------|---------------|---------------------------|
| Description      | State of Food | Temperature ( Fahrenheit) |
| Pepperoni        | Cold Holding  | 40                        |
| Sausage          | Cold Holding  | 40                        |
| Bologna          | Cold Holding  | 38                        |
|                  |               |                           |
|                  |               |                           |
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| Observed Violations                             |
|---|
| Total # B                                       |
| Repeated # ()                                   |
| 36: Two labradors in front of bar with customer |
| 43: To go containers not inverted on top shelf  |
| 53: Floor dirty around fryer                    |
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# TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



### Establishment Information

Establishment Name: Last Call Bar and Grill

Establishment Number: 605227685

### Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: (IN): PIC has knowledge of symptoms and diseases of foodborne illnesses.
- 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 food prep during inspection
- 7: No prep during food inspection
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: Csf
- 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: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 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: Cold food held at proper temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 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:

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## Additional Comments

See last page for additional comments.

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

| Establishment Name: Last Call Bar and Grill |  |  |  |  |
|---|--|--|--|--|
| Establishment Number: 605227685             |  |  |  |  |
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| Comments/Other Observations (cont'd)        |  |  |  |  |
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| Additional Comments (cont'd)                |  |  |  |  |
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Establishment Information

| Establishment Information |                       |         |      |   |  |  |  |  |
|---------------------------|-----------------------|---------|------|---|--|--|--|--|
| Establishment Name: La    | st Call Bar and Grill |         |      |   |  |  |  |  |
| Establishment Number #:   | 605227685             |         |      | 1 |  |  |  |  |
|                           |                       |         |      |   |  |  |  |  |
| Sources                   |                       |         |      |   |  |  |  |  |
| Source Type:              | Water                 | Source: | City |   |  |  |  |  |
| Source Type:              | Food                  | Source: | Csf  |   |  |  |  |  |
| Source Type:              |                       | Source: |      |   |  |  |  |  |
| Source Type:              |                       | Source: |      |   |  |  |  |  |
| Source Type:              |                       | Source: |      |   |  |  |  |  |
| Additional Comme          | nts                   |         |      |   |  |  |  |  |
|                           |                       |         |      |   |  |  |  |  |
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