

City

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit The Eastern Peak Commissary Kitchen Remanent O Mobile Establishment Name Type of Establishment 411 W Thompson Ln O Temporary O Seasonal Address Nashville Time in 11:20; AM AM / PM Time out 12:30; PM AM / PM 11/07/2023 Establishment # 605308187 Embargoed 0 Inspection Date O Follow-up **K**Routine O Complaint O Preliminary O Consultation/Other Purpose of Inspection

О3

Follow-up Required

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

110	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		0
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	盔	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	ПX	0			Management and food employee awareness; reporting	0	0	
3	寒	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	*	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	l °
	IN	OUT	NA	NO	Proventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed	0	0	
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×				Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	Ŕ	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	涎	0			Proper disposition of unsafe food, returned food not re-	0	0	2

					Compliance Status	COS	R	WT
	IN OUT NA NO Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods							
16	X	0	0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	9
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	×	Proper cooling time and temperature	0	0	
19	×	0	0	0	Proper hot holding temperatures	0	0	
20	24	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 food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	0	凝			Toxic substances properly identified, stored, used	0	0	3
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	×	0	0		Compliance with variance, specialized process, and HACCP plan	0	0	5

级 Yes O No

the introduction of pathoge is, chemicals, and physical objects into foods.

	OUT-not in compliance							
		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	'			
	OUT	Food Temperature Control						
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	:			
32	0	Plant food properly cooked for hot holding	0	0	r			
33	0	Approved thawing methods used	0	0	1			
34	0	Thermometers provided and accurate	0	0	r			
	OUT	Food Identification						
35	0	Food properly labeled; original container; required records available	0	0	,			
	OUT	Prevention of Food Contamination						
36	0	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	188	Wiping cloths; properly used and stored	0	0				
40	0	Washing fruits and vegetables	0	0	'			
	OUT	Proper Use of Utensiis						
41	0	In-use utensils; properly stored	0	0	Г			
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1			
43	0		0	0	r			
		Gloves used properly	0	0	-			

specti	ion	R-repeat (violation of the same code provision)		
		Compliance Status	COS	R	WT
	OUT	Utensiis and Equipment			
45	0	Food and nonfood-contact surfaces cleanable, properly designed, 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	2
49	0	Plumbing installed; proper backflow devices	0	0	2
50	0	Sewage and waste water properly disposed	0	0	2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	- 1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items			
55	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	۰
		Compliance Status	YES	NO	WT
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

icuous manner. You have the right to request a h ten (10) days of the date of th

11/07/2023

11/07/2023

Signature of Person In Charge

Signature of Environmental Health Specialist

Date

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

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: The Eastern Peak Commissary Kitchen

Establishment Number #: |605308187

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)					
Low temp dish machine 3 compartment sink	Chlorine QA	150 250						

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Prep cooler	32				
Walk in cooler 1	37				
Deep freezer	-62				
Walk in cooler 2	36				

Description	State of Food	Temperature (Fahrenheit
Raw beef in walk in cooler	Cold Holding	37
Raw chicken in walk in cooler 1	Cold Holding	39
Half and half	Cold Holding	38
Raw chicken in walk in cooler 2	Cold Holding	38
Raw pork in walk in cooler 2	Cold Holding	40
Fried chicken in walk in cooler 2	Cold Holding	38
Sesame sauce in walk in cooler 2	Cold Holding	38
Raw chicken in walk in cooler 2	Cold Holding	39

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: The Eastern Peak Commissary Kitchen

Establishment Number: 605308187

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Employee health policy is available.
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (IN) Employee drinking from an approved container which is stored properly.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.
- 6: Employees observed properly washing hands at appropriate points.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: See source
- 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: Temperatures recorded on report.
- 17: (NO) No TCS foods reheated during inspection.
- 18: No tcs foods held for cooling during the inspection.
- 19: Temperatures recorded on report.
- 20: Temperatures recorded on report.
- 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.
- 27: HACCP plan and process are reviewed.

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 Name: The Eastern Peak Commissary Kitchen	
Establishment Number: 605308187	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Information								
	ne Eastern Peak Comm	nissary Kitchen						
Establishment Number #:	605308187							
Sources								
Source Type:	Food	Source:	Us foods and GFS					
Source Type:	Water	Source:	City					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Comme	nts							
HACCP plans and re	ecords are reviewed.							