



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE  
**98**

Establishment Name Romans Pizza Type of Establishment  Farmer's Market Food Unit  
 Permanent  Mobile  
Address 5117 Nolensville Pike  
 Temporary  Seasonal  
City Nashville Time in 01:30 PM AM / PM Time out 02:00 PM AM / PM  
Inspection Date 06/09/2023 Establishment # 605308653 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 \_\_\_\_\_

**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.)

Compliance Status					COS	R	WT
IN	OUT	NA	NO				
<b>Supervision</b>							
1	<input checked="" type="radio"/>	<input type="radio"/>					5
Person in charge present, demonstrates knowledge, and performs duties							
<b>Employee Health</b>							
2	<input checked="" type="radio"/>	<input type="radio"/>					5
Management and food employee awareness, reporting							
3	<input checked="" type="radio"/>	<input type="radio"/>					5
Proper use of restriction and exclusion							
<b>Good Hygienic Practices</b>							
4	<input checked="" type="radio"/>	<input type="radio"/>					5
Proper eating, tasting, drinking, or tobacco use							
5	<input checked="" type="radio"/>	<input type="radio"/>					5
No discharge from eyes, nose, and mouth							
<b>Preventing Contamination by Hands</b>							
6	<input checked="" type="radio"/>	<input type="radio"/>					5
Hands clean and properly washed							
7	<input checked="" type="radio"/>	<input type="radio"/>					5
No bare hand contact with ready-to-eat foods or approved alternate procedures followed							
8	<input checked="" type="radio"/>	<input type="radio"/>					2
Handwashing sinks properly supplied and accessible							
<b>Approved Source</b>							
9	<input checked="" type="radio"/>	<input type="radio"/>					5
Food obtained from approved source							
10	<input checked="" type="radio"/>	<input type="radio"/>					5
Food received at proper temperature							
11	<input checked="" type="radio"/>	<input type="radio"/>					5
Food in good condition, safe, and unadulterated							
12	<input checked="" type="radio"/>	<input type="radio"/>					5
Required records available: shell stock tags, parasite destruction							
<b>Protection from Contamination</b>							
13	<input checked="" type="radio"/>	<input type="radio"/>					4
Food separated and protected							
14	<input checked="" type="radio"/>	<input type="radio"/>					5
Food-contact surfaces: cleaned and sanitized							
15	<input checked="" type="radio"/>	<input type="radio"/>					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

Compliance Status					COS	R	WT
OUT							
<b>Safe Food and Water</b>							
28	<input type="radio"/>						1
Pasteurized eggs used where required							
29	<input type="radio"/>						2
Water and ice from approved source							
30	<input type="radio"/>						1
Variance obtained for specialized processing methods							
<b>Food Temperature Control</b>							
31	<input type="radio"/>						2
Proper cooling methods used; adequate equipment for temperature control							
32	<input type="radio"/>						1
Plant food properly cooked for hot holding							
33	<input type="radio"/>						1
Approved thawing methods used							
34	<input type="radio"/>						1
Thermometers provided and accurate							
<b>Food Identification</b>							
35	<input type="radio"/>						1
Food properly labeled; original container; required records available							
<b>Prevention of Food Contamination</b>							
36	<input type="radio"/>						2
Insects, rodents, and animals not present							
37	<input type="radio"/>						1
Contamination prevented during food preparation, storage & display							
38	<input type="radio"/>						1
Personal cleanliness							
39	<input type="radio"/>						1
Wiping cloths: properly used and stored							
40	<input type="radio"/>						1
Washing fruits and vegetables							
<b>Proper Use of Utensils</b>							
41	<input type="radio"/>						1
In-use utensils; properly stored							
42	<input type="radio"/>						1
Utensils, equipment and linens; properly stored, dried, handled							
43	<input type="radio"/>						1
Single-use/single-service articles; properly stored, used							
44	<input type="radio"/>						1
Gloves used properly							

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 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 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, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

*A. Rival* 06/09/2023 *Jack Chopin* 06/09/2023  
Signature of Person In Charge Date Signature of Environmental Health Specialist Date

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

TENNESSEE DEPARTMENT OF HEALTH  
 DIVISION OF ENVIRONMENTAL HEALTH  
 FOOD INSPECTION DATA



**Establishment Information**

Establishment Name: Romans Pizza  
 Establishment Number #: 605308653

**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)
Open top prep cooler	36

**Food Temperature**

Description	State of Food	Temperature ( Fahrenheit)
Sausage crumbles in open top prep cooler	Cold Holding	41
Shredded mozzarella cheese in open top prep	Cold Holding	40
Ricotta cheese in prep cooler	Cold Holding	40
Chicken wings in prep cooler	Cold Holding	40

**Observed Violations**

Total # 2

Repeated # 0

47:

54:



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***Comments/Other Observations***

- 1:
- 2:
- 3:
- 4:
- 5:
- 6:
- 7:
- 8:
- 9:
- 10:
- 11:
- 12:
- 13:
- 14:
- 15:
- 16:
- 17:
- 18:
- 19:
- 20: Open top prep cooler at 36°F . Cooler is maintaining safe food temperatures.
- 21:
- 22:
- 23:
- 24:
- 25:
- 26:
- 27:
- 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***

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***Comments/Other Observations (cont'd)***

***Additional Comments (cont'd)***

***See last page for additional comments.***

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**Sources**

Source Type: Source:

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**Additional Comments**