

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

SCORE

Church's Chicken #2069 Permanent O Mobile Establishment Name Type of Establishment 515 Bell Rd. O Temporary O Seasonal Address Nashville Time in 02:00 PM AM/PM Time out 03:15: PM AM/PM 12/15/2023 Establishment # 605210322 Embargoed 0 Inspection Date

Purpose of Inspection **K**Routine O Follow-up O Complaint O Preliminary O Consultation/Other

Number of Seats 46 Risk Category О3 04 Follow-up Required O Yes 疑 No

18	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	_)S=c	orre	cted o
二	_		_		Compliance Status	cos	R	WT		_	
	IN	OUT	NA	NO	Supervision					b	N O
1	×	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	1	6 X	E (
	IN	OUT	NA	NO	Employee Health				1	7 (õΙ
2	300	0			Management and food employee awareness; reporting	0	0			т	
3	×	0			Proper use of restriction and exclusion	0	0	5	Ш	'	N O
	IN	OUT	NA	NO	Good Hygienic Practices				1	8 (ा र
4	300	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	1		X
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	l ° l	2	0	8 0
	IN	OUT	NA	NO	Preventing Contamination by Hands				2	1 8	K (
6	黨	0		0	Hands clean and properly washed	0	0		9	2 (ه ا د
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	ŀ		N O
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2		3 (٥١٥
	IN	OUT	NA	NO	Approved Source				Ľ	۹ ۱	<u>'l'</u>
9	黨	0			Food obtained from approved source	0	0			1	N O
10	0	0	0	×	Food received at proper temperature	0	0	1	I	4 (ماه
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	Ľ	<u>"L`</u>	<u> </u>
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			1	N O
	IN	OUT	NA	NO	Protection from Contamination						ा ०
13	Ŕ	0	0		Food separated and protected	0	0	4	2	6 8	2 (
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		T	N O
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	2	7 (0 0

	Compliance Status					cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	凝		0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	3%	Proper reheating procedures for hot holding	0	0	٠
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	X	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	3%		Food additives: approved and properly used	0	0	5
26	黨	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 HACCP plan	0	0	5

the introduction of pathogo ns, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	-
30	0	Variance obtained for specialized processing methods	0	0	١,
	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	Г
33	0	Approved thawing methods used	0	0	
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	0	Insects, rodents, and animals not present	0	0	
37	0	Contamination prevented during food preparation, storage & display	0	0	
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	
43	0	Single-use/single-service articles; properly stored, used	0	0	Г
44	10	Gloves used properly	0	0	

spect	ion	R-repeat (violation of the same code provision)		
		Compliance Status	COS	R	WT
	OUT	Utensiis and Equipment			
45	M	Food and norfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	温	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	2
49	黨	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	2%	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	Т		
55	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	۰
Compliance Status					WT
57		Compliance with TN Non-Smoker Protection Act	0	100	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	_ 0	0	

cuous manner. You have the right to request a h n (10) days of the date of the 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

12/15/2023

12/15/2023

Signature of Person In Charge

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: Church's Chicken #2069

Establishment Number #: 605210322

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.	\vdash
Garage type doors in non-enclosed areas are not completely open.	\vdash
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	\vdash
Smoke from non-enclosed areas is inflitrating into areas where smoking is prohibited.	\vdash
Smoking observed where smoking is prohibited by the Act.	+-

Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)					
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Chlorine Quaternary	200 200						

Equipment Temperature							
Description	Temperature (Fahrenheit)						
Walk in cooler	38						
Walk in freezer	0						

Hot Holding Hot Holding Hot Holding Hot Holding Cooking Cold Holding	135 162 148 137 209
Hot Holding Hot Holding Cooking	148 137 209
Hot Holding Cooking	137 209
Cooking	209
Cold Holding	40
	-1 0
Cold Holding	40
	Cold Holding

Observed Violations								
Total # 10								
Repeated # 0								
45: Walk in cooler door is rusty and shelves in walk in cooler are rusty 45: Cabinet at drive thru is damaged								
15: Condensation leak in walk in freezer								
17: Inside of reach in freezer is dirty								
19: No backflow preventer on faucet of mopsink								
53: Floor dirty under equipment								
53: Exhaust hood is dirty								
53: Fan guards dirty in walk in cooler								
53: Walls are dirty								
53: Floor damaged in walk in cooler and freezer								
33. I loof damaged in walk in cooler and neezer								

[&]quot;"See page at the end of this document for any violations that could not be displayed in this space.

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Establishment Number: 605210322

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Manager provided a written copy of the employee health policy with the symptoms and diseases
- 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: Observed several employees properly washing hands
- 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: Pfg
- 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: Fried chicken cooked above 165F
- 17: (NO) No TCS foods reheated during inspection.
- 18: No cooling of time and temperature control for safety foods
- 19: Hot food at 135F and above
- 20: Cold food at 41F and below
- 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: No smoking signs not posted at all entrances into the building

58:

Additional Comments

See last page for additional comments.

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

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

Establishment Name: Church's Chicken #2069					
Establishment Number: 605210322					
Comments/Other Observations (cont'd)					
A -L-Pat L O A A At-III					
Additional Comments (cont'd)					
See last page for additional comments.					

Establishment Information

Establishment Name: Church's Chicken #2069							
	605210322						
Sources							
Source Type:	Water	Source:	City				
Source Type:		Source:					
Source Type:		Source:					
Source Type:		Source:					
Source Type:		Source:					
Additional Comment	ts .						

Establishment Information