

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Toot's Permanent O Mobile Establishment Name Type of Establishment 860 Nw Broad St. O Temporary O Seasonal Address Murfreesboro Time in 10:00 AM AM / PM Time out 10:45: AM AM / PM City 12/19/2022 Establishment # 605187805 Embargoed 0 Inspection Date **M**Complaint Purpose of Inspection Routine O Follow-up O Preliminary O Consultation/Other

Number of Seats 176 Risk Category **O**3 04 Follow-up Required 级 Yes O No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

12	4 ≐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	DK.	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	*	0		0	No discharge from eyes, nose, and mouth	0	0	
	IN	OUT	NA	1100	Proventing Contamination by Hands			
6	凝	0		0	Hands clean and properly washed	0	0	
7	釵	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	0	26			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	1
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	Ħ	0	0	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	×	0	0		Food separated and protected	0	0	4
14	0	X	0		od-contact surfaces: cleaned and sanitized		5	
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

	Compliance Status							WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	寒	Proper cooking time and temperatures	0	0	5
17	*	0	0	0	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	0	×	Proper cooling time and temperature	0	0	
19	×	0	0	0	Proper hot holding temperatures	0	0	
20		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	Ж		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT	NA	NO	Chemicals			
25		0	X		Food additives: approved and properly used	0	0	5
26	黨	0			Toxic substances properly identified, stored, used	0	0	,
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

als, 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	

pect	on	R-repeat (violation of the same code provision)			
		Compliance Status	cos	R	W
	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	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	П		
55	0	Current permit posted	0	0	Г ₀
56	0	Most recent inspection posted	0	0	ľ
		Compliance Status	YES	NO	W
		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	

cuous manner. You have the right to request a h ten (10) days of the date of the 8-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320

12/19/2022

Date Signat

12/19/2022

Signature of Person In Charge

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: Toot'S

Establishment Number #: |605187805

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 inflitrating into areas where smoking is prohibited.

Smoking observed where smoking is prohibited by the Act.

Warewashing Info						
Machine Name	8anitizer Type	PPM	Temperature (Fahrenheit)			
Dish machine	CI	0				
3 comp not set up	Quat	200				

Equipment Temperature				
Description	Temperature (Fahrenheit)			
Wing cooler	38			
Pc	37			
Ric	36			
Pc #2	36			

Description	State of Food	Temperature (Fahrenheit
Chicken wings in wing cooler	Cold Holding	40
Diced tomatoes in pc	Cold Holding	39
Burger patties in ric	Cold Holding	39
Fish in ric	Cold Holding	38
Reheated chili	Reheating	197
Ribs in pc #2	Cold Holding	39
Chicken tenders in pc #2	Cold Holding	39
Oysters in wic#1	Cold Holding	39
Steaks in wic #1	Cold Holding	39
Milk in wic #2	Cold Holding	40

Observed Violations						
Total # B						
Repeated # ()						
8: No soap at handsink near wash room. Cos by pic replacing.						
14: Dish machine reading 0 ppm of cl. Cos by having pic change cl bucket. Now						
reading 50 ppm						
53: Damaged ceiling tiles.						
barragea centring tites.						

[&]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 Information

Establishment Name: Toot's

Establishment Number: 605187805

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 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 drinking from an approved container which is stored properly.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.
- 6: Observed good hand washing.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 9: See Source
- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: Verified up to date tags are kept with oysters. Oyster. Comes from what chefs want.
- 13: (IN) All raw animal food is separated and protected as required.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NO) No raw animal foods cooked during inspection.
- 17: (IN) All TCS foods are properly reheated for hot holding.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: In range
- 20: In range
- 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: Verified advisory with designated menu items.
- 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 Number: 605187805	Establishment Name: Toot's	
Additional Comments (cont'd)	Establishment Number: 605187805	
Additional Comments (cont'd)		
Additional Comments (cont'd)	Comments/Other Observations (cont'd)	
See last page for additional comments.		
	See last page for additional comments.	

Establishment Information

Establishment Information				
THE RESIDENCE OF THE PROPERTY	ot's			
Establishment Number #:	605187805			
Sources				
Source Type:	Food	Source:	Halsey	
Source Type:	Water	Source:	City	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comme	nts			
Madw pic aware of c	e that the place was filt complaint. I did not obso Did not onserve any fil	erve any roaches. He had a r	d walls and salad was sitting in water. receipt from where pest control company	