



**TENNESSEE DEPARTMENT OF HEALTH**  
**FOOD SERVICE ESTABLISHMENT INSPECTION REPORT**

Establishment Name: Waffle House #963  
Address: 811 S. James Campbell Blvd.  
City: Columbia  
Inspection Date: 11/09/2023  
Time in: 02:45 PM AM / PM  
Type of Establishment: Permanent  
Risk Category: O1  
Establishment #: 605211013  
Embargoed: 0  
Follow-up Required:  Yes  No  
Number of Seats: 48

Farmer's Market Food Unit  
 Permanent  Mobile  
 Temporary  Seasonal

SCORE

95

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			
1 <input checked="" type="checkbox"/>	<input type="radio"/>			Person in charge present, demonstrates knowledge, and performs duties	<input type="radio"/>	5
2 <input checked="" type="checkbox"/>	<input type="radio"/>			Management and food employee awareness, reporting	<input type="radio"/>	
3 <input checked="" type="checkbox"/>	<input type="radio"/>			Proper use of restriction and exclusion	<input type="radio"/>	5
4 <input checked="" type="checkbox"/>	<input type="radio"/>			Good Hygienic Practices		
5 <input checked="" type="checkbox"/>	<input type="radio"/>			Proper eating, tasting, drinking, or tobacco use	<input type="radio"/>	
6 <input checked="" type="checkbox"/>	<input type="radio"/>			No discharge from eyes, nose, and mouth	<input type="radio"/>	5
7 <input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Preventing Contamination by Hands		
8 <input checked="" type="checkbox"/>	<input type="radio"/>			Hands clean and properly washed	<input type="radio"/>	
9 <input checked="" type="checkbox"/>	<input type="radio"/>			No bare hand contact with ready-to-eat foods or approved alternate procedures followed	<input type="radio"/>	5
10 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>		Handwashing sinks properly supplied and accessible	<input type="radio"/>	2
11 <input checked="" type="checkbox"/>	<input type="radio"/>			Approved Source		
12 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Food obtained from approved source	<input type="radio"/>	
13 <input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>		Food received at proper temperature	<input type="radio"/>	
14 <input checked="" type="checkbox"/>	<input type="radio"/>			Food in good condition, safe, and unadulterated	<input type="radio"/>	5
15 <input checked="" type="checkbox"/>	<input type="radio"/>			Required records available: shell stock tags, parasite destruction	<input type="radio"/>	
Protection from Contamination						
16 <input type="radio"/>	<input type="radio"/>			Food separated and protected	<input type="radio"/>	4
17 <input checked="" type="checkbox"/>	<input type="radio"/>			Food-contact surfaces: cleaned and sanitized	<input type="radio"/>	5
18 <input checked="" type="checkbox"/>	<input type="radio"/>			Proper disposition of unsafe food, returned food not re-served	<input type="radio"/>	2
COS=corrected on-site during inspection R=repeat (violation of the same code provision)						
Compliance Status				COS	R	WT
19 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods		
20 <input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper cooking time and temperatures	<input type="radio"/>	
21 <input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	<input type="radio"/>	5
22 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>			
23 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Cooling and Holding, Date Marking, and Time as a Public Health Control		
24 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Proper cooling time and temperature	<input type="radio"/>	
25 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Proper hot holding temperatures	<input type="radio"/>	
26 <input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper cold holding temperatures	<input type="radio"/>	
27 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Proper date marking and disposition	<input type="radio"/>	
28 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Time as a public health control: procedures and records	<input type="radio"/>	
Consumer Advisory						
29 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Consumer advisory provided for raw and undercooked food	<input type="radio"/>	4
Highly Susceptible Populations						
30 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	5
Chemicals						
31 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Food additives: approved and properly used	<input type="radio"/>	
32 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Toxic substances properly identified, stored, used	<input type="radio"/>	5
Conformance with Approved Procedures						
33 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Compliance with variance, specialized process, and HACCP plan	<input type="radio"/>	5

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES				R=repeat (violation of the same code provision)		
Compliance Status				COS	R	WT
OUT						
28 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Safe Food and Water		
29 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Pasteurized eggs used where required	<input type="radio"/>	1
30 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Water and ice from approved source	<input type="radio"/>	2
	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Variance obtained for specialized processing methods	<input type="radio"/>	1
Food Temperature Control						
31 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	2
32 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Plant food properly cooked for hot holding	<input type="radio"/>	1
33 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Approved thawing methods used	<input type="radio"/>	1
34 <input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Thermometers provided and accurate	<input type="radio"/>	1
Food Identification						
35 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Food properly labeled; original container; required records available	<input type="radio"/>	1
Prevention of Food Contamination						
36 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Insects, rodents, and animals not present	<input type="radio"/>	2
37 <input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Contamination prevented during food preparation, storage & display	<input type="radio"/>	1
38 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Personal cleanliness	<input type="radio"/>	1
39 <input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Wiping cloths; properly used and stored	<input type="radio"/>	1
40 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Washing fruits and vegetables	<input type="radio"/>	1
Proper Use of Utensils						
41 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	In-use utensils; properly stored	<input type="radio"/>	1
42 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Utensils, equipment and linens; properly stored, dried, handled	<input type="radio"/>	1
43 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Single-use/single-service articles; properly stored, used	<input type="radio"/>	1
44 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Gloves used properly	<input type="radio"/>	1
Utensils and Equipment						
45 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	<input type="radio"/>	1
46 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Warewashing facilities, installed, maintained, used, test strips	<input type="radio"/>	1
47 <input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Nonfood-contact surfaces clean	<input type="radio"/>	1
Physical Facilities						
48 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Hot and cold water available; adequate pressure	<input type="radio"/>	2
49 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Plumbing installed; proper backflow devices	<input type="radio"/>	2
50 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Sewage and waste water properly disposed	<input type="radio"/>	2
51 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Toilet facilities: properly constructed, supplied, cleaned	<input type="radio"/>	1
52 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Garbage/refuse properly disposed; facilities maintained	<input type="radio"/>	1
53 <input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Physical facilities installed, maintained, and clean	<input type="radio"/>	1
54 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Adequate ventilation and lighting; designated areas used	<input type="radio"/>	1
Administrative Items						
55 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Current permit posted	<input type="radio"/>	
56 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Most recent inspection posted	<input type="radio"/>	0
Compliance Status				YES	NO	WT
57 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Non-Smokers Protection Act	<input checked="" type="checkbox"/>	
58 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	Tobacco products offered for sale	<input checked="" type="checkbox"/>	
59 <input type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	If tobacco products are sold, NSPA survey completed	<input checked="" type="checkbox"/>	0

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.

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: Waffle House #963

Establishment Number #: 605211013

**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)
Warewasher	Heat		160.20

**Equipment Temperature**

Description	Temperature ( Fahrenheit)

**Food Temperature**

Description	State of Food	Temperature ( Fahrenheit)

**Observed Violations**

Total # 5

Repeated # 0

34:

37:

39:

47:

53:



***Establishment Information***

Establishment Name: Waffle House #963

Establishment Number : 605211013

***Comments/Other Observations***

1: (IN): ANSI Certified Manager present.

2:

3:

4: Critical corrected. No employees observed eating or drinking in the kitchen.

5:

6:

7:

8: Critical corrected. All hand sinks adequately supplied.

9:

10:

11:

12:

13:

14: Critical corrected. Warewasher sanitizing properly at 160.2 degrees F.

15:

16:

17:

18:

19:

20:

21:

22:

23:

24:

25:

26: Critical corrected. All chemicals stored in the proper places not intermixed with food items.

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***

Establishment Name: Waffle House #963

Establishment Number : 605211013

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

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

**Establishment Information**

Establishment Name: Waffle House #963

Establishment Number #: 605211013

**Sources**

Source Type: Water Source: CPWS

Source Type: Source:

Source Type: Source:

Source Type: Source:

Source Type: Source:

***Additional Comments***

Corrected critical violations #4, 8, 14, 26