

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

RT SCORE

100

Cheesecake Factory Bar

Cheesecake Factory Bar

Cheesecake Factory Bar

Cheesecake Factory Bar

Component On Mobile

City

Nashville

Time in 01:05 PM AM / PM Time out 01:15; PM AM / PM

Inspection Date

Cheesecake Factory Bar

Cheesecake Factory Bar

Component On Mobile

Component

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

Risk Category 🐹 1 O 2 O 3 O 4 Follow-up Required O Yes 💢 No Number of Sea

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 (IM, OUT, MA, NO) for each numbered Item. For Items marked OUT, mark COS or R for each Item as applicable. Deduct points for category or subcategory.

| 10 | 4 ≐in c | ompli | ance | | OUT=not in compliance NA=not applicable NO=not observe | ed | | 0 |
|--------|----------------|---|------|---|---|-----|---|----|
| Compli | | | | | Compliance Status | cos | R | WT |
| | IN | оит | NA | NO | Supervision | | | |
| 1 | 鼷 | Person in charge present, demonstrates knowledge, and performs duties | | 0 | 0 | 5 | | |
| | IN | OUT | NA | NO | Employee Health | | | |
| 2 | 2 0 0 | | | Management and food employee awareness; reporting | 0 | 0 | | |
| 3 | × | 0 | | | Proper use of restriction and exclusion | 0 | 0 | ۰ |
| | 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 | NO | Preventing Contamination by Hands | | | |
| 6 | 凝 | 0 | | 0 | Hands clean and properly washed | 0 | 0 | |
| 7 | 왮 | 0 | 0 | 0 | ternate procedures followed | | 0 | 5 |
| 8 | × | | | | landwashing sinks properly supplied and accessible | | 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 | 0 | 0 | 窳 | | Food separated and protected | 0 | 0 | 4 |
| 14 | × | 0 | 0 | | Food-contact surfaces: cleaned and sanitized | | 0 | 5 |
| 15 | × | 0 | | | Proper disposition of unsafe food, returned food not re- | | 0 | 2 |

| | | | | | Compliance Status | COS | R | WT |
|----|----|-----|-----|----|---|-----------|---|----|
| | IN | оит | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | |
| 16 | 0 | 0 | 寒 | 0 | Proper cooking time and temperatures | 0 | 0 | 5 |
| 17 | 0 | 0 | 300 | 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 | X | 0 | Proper cooling time and temperature | 0 | 0 | |
| 19 | _ | 0 | 文 | 0 | Proper hot holding temperatures | 0 | 0 | |
| 20 | | 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 | × | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| | IN | оит | NA | NO | Chemicals | Chemicals | | |
| 25 | 0 | 0 | X | | Food additives: approved and properly used | 0 | 0 | 5 |
| 26 | 菜 | 0 | | | 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 |

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

| | | | GOO | DR | ΞA | L PRA | CTIC | 5. |
|----|-----|---|---------------|----|----|---------|------|-------|
| | | OUT=not in compliance COS=corr | | | | inspect | on | |
| | | Compliance Status | cos | R | WT | | | |
| | OUT | Safe Food and Water | | | | | OUT | |
| 28 | | Pasteurized eggs used where required | 0 | 0 | 1 | 45 | 0 | Foo |
| 29 | | Water and ice from approved source | 0 | 0 | 2 | 40 | | con |
| 30 | | Variance obtained for specialized processing methods | 0 | 0 | 1 | 46 | 0 | Wa |
| | OUT | Food Temperature Control | | | | 40 | | **** |
| 31 | 0 | Proper cooling methods used; adequate equipment for temperature | 0 | 0 | 2 | 47 | 0 | Nor |
| 31 | 10 | control | " | ٧ | ľI | | OUT | |
| 32 | 0 | Plant food properly cooked for hot holding | 0 | 0 | 1 | 48 | 0 | Hot |
| 33 | Ō | Approved thawing methods used | Ō | Ō | 1 | 49 | ō | Plu |
| 34 | 0 | Thermometers provided and accurate | 0 | 0 | 1 | 50 | 0 | Sev |
| | OUT | Food Identification | 1 | - | - | 51 | ŏ | Toi |
| 35 | 0 | Food properly labeled; original container; required records available | 0 | 0 | 1 | 52 | 0 | Ga |
| | OUT | Prevention of Feed Contamination | | | | 53 | 0 | Phy |
| 36 | 0 | Insects, rodents, and animals not present | 0 | 0 | 2 | 54 | 0 | Ade |
| 37 | 0 | Contamination prevented during food preparation, storage & display | 0 | 0 | 1 | | оит | Γ |
| 38 | 0 | Personal cleanliness | 0 | 0 | 1 | 55 | 0 | Cur |
| 39 | 0 | Wiping cloths; properly used and stored | 0 | 0 | 1 | 56 | 0 | Mo |
| 40 | 0 | Washing fruits and vegetables | 0 | 0 | 1 | | | |
| | OUT | Proper Use of Utensils | $\overline{}$ | | | | | |
| 41 | 0 | In-use utensils; properly stored | 0 | 0 | 1 | 57 | | Cor |
| 42 | 0 | Utensils, equipment and linens; properly stored, dried, handled | 0 | 0 | 1 | 58 | | Tot |
| 43 | 0 | Single-use/single-service articles; properly stored, used | 0 | 0 | 1 | 59 | | If to |
| 44 | 0 | Gloves used properly | 0 | 0 | 1 | | | |

| pecti | | R-repeat (violation of the same code provision Compliance Status | cos | R | W |
|-------|-----|---|-----|-----|-----|
| | OUT | Utensils and Equipment | 1 | | |
| 45 | 0 | Food and norifood-contact surfaces cleanable, properly designed, constructed, and used | 0 | 0 | 1 |
| 46 | 0 | Warewashing facilities, installed, maintained, used, test strips | 0 | 0 | |
| 47 | 0 | Nonfood-contact surfaces clean | 0 | 0 | |
| | OUT | Physical Facilities | | | |
| 48 | 0 | Hot and cold water available; adequate pressure | 0 | 0 | _ |
| 49 | 0 | Plumbing installed; proper backflow devices | 0 | 0 | - 3 |
| 50 | 0 | Sewage and waste water properly disposed | 0 | 0 | - 3 |
| 51 | 0 | Toilet facilities: properly constructed, supplied, cleaned | 0 | 0 | |
| 52 | 0 | Garbage/refuse properly disposed; facilities maintained | 0 | 0 | |
| 53 | 0 | Physical facilities installed, maintained, and clean | 0 | 0 | |
| 54 | 0 | Adequate ventilation and lighting; designated areas used | 0 | 0 | |
| | OUT | Administrative Items | Т | | |
| 55 | 0 | Current permit posted | 0 | 0 | П |
| 56 | 0 | Most recent inspection posted | 0 | 0 | |
| | | Compliance Status | YES | NO | ٧ |
| | | Non-Smokers Protection Act | | | |
| 57 | | Compliance with TN Non-Smoker Protection Act | 0 | 100 | |
| 58 | | Tobacco products offered for sale | 0 | 0 | ١ ١ |
| 59 | | If tobacco products are sold, NSPA survey completed | 0 | 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 reguest a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this center. The proof of the post of the proof of t

05/13/2024

05/13/2024

Signature of Person In Charge

Date Signature of Environmental Health Specialist

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

PH-2267 (Rev. 6-15)

Free food safety training classes are available each month at the county health department.

Please call () 6153405620 to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



| Establishment Information | | | | | | | | |
|--|------------------------------|--------------------------|----------------------|----------|--|--|--|--|
| Establishment Name: Cheesecake Factory Bar | | | | | | | | |
| Establishment Number #: 605186805 | | | | | | | | |
| | | | | | | | | |
| NSPA Survey – To be completed if | | | | | | | | |
| Age-restricted venue does not affirmatively rest twenty-one (21) years of age or older. | | | | | | | | |
| Age-restricted venue does not require each per | son attempting to gain entry | to submit acceptable for | m of identification. | | | | | |
| "No Smoking" signs or the international "Non-Sr | moking" symbol are not cons | picuously posted at ever | y entrance. | | | | | |
| Garage type doors in non-enclosed areas are n | ot completely open. | | | | | | | |
| Tents or awnings with removable sides or vents | in non-enclosed areas are r | not completely removed o | or open. | | | | | |
| Smoke from non-enclosed areas is inflitrating in | nto areas where smoking is p | rohibited. | | | | | | |
| Smoking observed where smoking is prohibited | by the Act. | | | | | | | |
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| Warewashing Info | | | I = | | | | | |
| Machine Name | Sanitizer Type | PPM | Temperature (Fah | renhelt) | | | | |
| | | | | | | | | |
| Equipment Temperature | | | | | | | | |
| Description | | | Temperature (Fahr | renheit) | | | | |
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| Food Formandon | | | - | | | | | |
| Food Temperature | | State of Food | Townson-box (Fabr | | | | | |
| Description | | State of Food | Temperature (Fahr | renneit) | | | | |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Name: Cheesecake Factory Bar

Establishment Information



| Establishment Number: 605186805 | |
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| | |
| Comments/Other Observations | |
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| 1: 2: 3: 4: 5: 6: 7: 8: 9: 10: 11: 12: 13: 14: 15: 16: 17: 18: 19: 20: 21: 22: 23: 24: 25: 26: 27: 57: 58: | |
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Additional Comments See last page for additional comments.

| Establishment Name: Cheesecake Factory Bar | | | | |
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| Establishment Number: 605186805 | | | | |
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| Comments/Other Observations (cont'd) | | | | |
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Establishment Information

| Establishment Information | | | | | | | |
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| Establishment Name: Cheesecake Factory Bar | | | | | | | |
| Establishment Number # 605186805 | | | | | | | |
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| Sources | | | | | | | |
| Source Type: | Source: | | | | | | |
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