

Establishment Name

Purpose of Inspection

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

Time in 01:55 PM AM/PM Time out 03:00: PM AM/PM

O Farmer's Market Food Unit

SCORE

Permanent O Mobile Type of Establishment

O Temporary O Seasonal

12/14/2023 Establishment # 605305334 Embargoed 0 Inspection Date

Pizza Hut #4403

Antioch

2701 Murfreesboro Road

O Follow-up **E**Routine O Complaint O Preliminary O Consultation/Other

Risk Category О3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

m (IN, OUT, NA, HO) for

10	4=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		CC)\$=co	rrecte	d on-si	te di
					Compliance Status	cos	R	WT				
	IN	OUT	NA	NO	Supervision					IN	оит	NA
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	0	0	0
	IN	ОИТ	NA	NO	Employee Health		-		17		ŏ	ŏ
2	MC	0			Management and food employee awareness; reporting	0	0		-	Ť	Ť	Ť
3	×	0			Proper use of restriction and exclusion	0	0	5		IN	ОUТ	N/
	IN	ОИТ	NA	NO	Good Hygienic Practices				18	0	0	0
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19	0	0	0
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	l ° l	20	125	0	0
	IN	OUT	NA	NO	Preventing Contamination by Hands				21	*	0	0
6	100	0		0	Hands clean and properly washed	0	0		22	0	0	N
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5		IN	OUT	N/A
8	XX.	0			alternate procedures followed Handwashing sinks properly supplied and accessible	0	0	2			-	-
	IN	OUT	NA	NO	Approved Source		_		23	0	0	×
9	黨	0			Food obtained from approved source	0	0			IN	OUT	N.A
10	×	0	0	0	Food received at proper temperature	0	0	1	- I	0		22
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	24	10	0	100
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			IN	оит	N
	IN	OUT	NA	NO	Protection from Contamination				25		0	20
13	黛	0	0		Food separated and protected	0	0	4	26	嶷	0	
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	N/
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	M

Compliance Status		cos	R	WT				
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	黨	Proper cooking time and temperatures	0	0	5
17	0	0	0	3%	Proper reheating procedures for hot holding	0	0	۰
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	_	0	0	×	Proper cooling time and temperature	0	0	
19	0	0	0	寒	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	300		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	80	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

to control the introduction of pathogens, chemicals, and physical objects into foods.

PRACTICES

	OUT=not in compliance COS=o Compliance Status OUTI Safe Food and Water							
			cos	R	W			
		Caro i con amo i i mori	_		_			
28	0	Pasteurized eggs used where required	0	0	1			
29	0		0	0				
30	0	Variance obtained for specialized processing methods	0	0	1			
	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	r			
33	0	Approved thawing methods used	0	0	7			
34	0	Thermometers provided and accurate	0	0	Г			
	OUT	Food Identification						
35	0	Food properly labeled; original container; required records available	0	0	ŀ			
	OUT	Prevention of Food Contamination						
36	0	Insects, rodents, and animals not present	0	0	1			
37	0	Contamination prevented during food preparation, storage & display	0	0	ŀ			
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			Π			
41	0	In-use utensils; properly stored	0	0				
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г			
43	0		0	0	r			

		Compliance Status	cos	R	WT
	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	凝	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	Т		
55	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	۰
		Compliance Status	YES	NO	WT
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	100	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request a l (10) days of the date of the

12/14/2023

Signature of Environmental H

12/14/2023

Date

Signature of Person In Charge

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

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629) 6153405620 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Pizza Hut #4403
Establishment Number #: 605305334

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.	\neg
"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.	\top
Smoking observed where smoking is prohibited by the Act.	+

Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)					
Dish washing machine	Chlorine	100						

Equipment Temperature						
Description	Temperature (Fahrenheit)					
Walk-in cooler	35					
Freezer	13					
Freezer	-2					
Refrigerator	39					

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Sliced ham in walk-in cooler	Cold Holding	42
Bacon in walk-in cooler	Cold Holding	39
Shredded cheese	Cold Holding	44
Sausage in top prep cooler	Cold Holding	39
Bacon on top cooler	Cold Holding	39
Diced tomatoes on top prep cooler	Cold Holding	42
Olives on top prep cooler	Cold Holding	40
Mozarella cheese on top prep cooler	Cold Holding	37

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Pizza Hut #4403 Establishment Number: 605305334

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: An employee health policy is posted on-site. Staff is aware of reportable symptoms and illnesses.
- 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 employees washing their hands at appropriate times and with correct technique.
- 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: See source information.
- 10: (IN) All food received was in good condition and at the proper temperature.
- 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: Proper cooking time and temperatures were not observed during the time of inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Proper cooling time and temperatures were not observed during time of inspection.
- 19: (NO) TCS food is not being held hot during inspection.
- 20: Observed proper cold holding temperatures. Temperatures recorded on report.
- 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:

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: Pizza Hut #4403	
Establishment Number: 605305334	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
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Establishment Information

Establishment Informa	ation			
CONTRACTOR OF THE PROPERTY OF	a Hut #4403			
Establishment Number #:	605305334			
Sources				
Source Type:	Water	Source:	City	
Source Type:	Food	Source:	Mclain food services	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comment	rs			
Ha038280@hutamerid	can.com			