

Establishment Name

Address

City

TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

Type of Establishment

Time in 09:05 AM AM / PM Time out 09:20: AM AM / PM

O Farmer's Market Food Unit

Remanent O Mobile

SCORE

O Temporary O Seasonal

04/14/2023 Establishment # 605261317 Embargoed 0 Inspection Date

HOLIDAY INN EXPRESS BREAKFAST

1111 AIRPORT CENTER DR

Nashville

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

Number of Seats 65 Risk Category Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		0	
	Compliance Status						R	WT	
	IN	OUT	NA	NO	Supervision				
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	
	IN	OUT	NA	NO	Employee Health				
2	-MC	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	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	0	
	IN	OUT	NA	NO	Preventing Contamination by Hands	Preventing Contamination by Hands			
6	黨	0		0	Hands clean and properly washed		0		
7	왮	0	0	0	ternate procedures followed		5		
8	×	0			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		
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	
12	0	0	×	0	required records available: shell stock tags, parasite				
	IN	OUT	NA	NO	Protection from Contamination	Protection from Contamination			
13	0	0	1		Food separated and protected	0	0	4	
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5	
15	×	0			Proper disposition of unsafe food, returned food not re- served				

					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	黨	0	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	0	×	Proper cooling time and temperature	0	0	
19	×	0	0	0	Proper hot holding temperatures	0	0	
20	243	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	×		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

eduction of pathogens, chemicals, and physical objects into foods.

			GOO			
		OUT=not in compliance COS=con				
		Compliance Status	cos	R	W	
	OUT	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	1	
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	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	:	
37	0	Contamination prevented during food preparation, storage & display	0	0	1	
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	
4.5	1902	Single-use/single-service articles; properly stored, used	0	0	Т	
43	1 000					

pecti		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	ŀ
46	題	Warewashing facilities, installed, maintained, used, test strips	0	0	-
47	凝	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	-
50	0	Sewage and waste water properly disposed	0	0	- :
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	_
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	٠
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	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 100	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	_ 0	0	

conspicuous manner. You have the right to request a h 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. n (10) days of the date of the

04/14/2023

04/14/2023

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



Fatablish and Information						
Establishment Information						
Establishment Name: HOLIDAY INN EXPRESS BREAKFAST						
Establishment Number #: [605261317						
NSPA Survey - To be completed if	#57 in #Ma#					
Age-restricted venue does not affirmatively rest		facilities at all times to per	mons who are			
twenty-one (21) years of age or older.	rict access to its buildings or	lacilities at all times to per	isons who are			
Age-restricted venue does not require each per	son attempting to gain entry	to submit acceptable form	of identification.			
"No Smoking" signs or the international "Non-S	moking" symbol are not cons	picuously posted at every	entrance.			
Garage type doors in non-enclosed areas are n	ot completely open.					
Tents or awnings with removable sides or vents	s in non-enclosed areas are n	ot completely removed or	open.			
Smoke from non-enclosed areas is infiltrating in	nto areas where smoking is p	rohibited.				
Smoking observed where smoking is prohibited	by the Act.					
Warewashing Info						
Machine Name	Sanitizer Type	PPM	Temperature (Fah	renheit)		
Equipment Temperature						
Description			Temperature (Fah	renheit)		
Food Temperature						
Description		State of Food	Temperature (Fah	renhelt)		

bserved Violations	
otal # B epeated # 0	
epeated # 0	
3:	
6:	
7:	
"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: 605261317

Comments/Other Observations	
1: PIC provided	
2: 3: 4: 5:	
3:	
4:	
6: Employees properly washing hands	
7:	
8: Handsink in back area available for use	
8: Soap and paper towels provided at hand sink	
9: 10:	
11: No dented cans present	
12:	
13:	
14: Sanitizer provided and sink set up properly	
15:	
16:	
16: 17:	
118·	
19: TCS food properly hot held 20: 21: 22: 23: 24:	
20:	
21:	
22:	
[23:	
[24]:	
ZJ.	
26: Chemical spray bottles labeled 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 Name: HOLIDAY INN EXPRESS BREAKFAST		
Establishment Number: 605261317		
Comments/Other Observations (cont'd)		
Additional Comments (cont'd)		
See last page for additional comments.		

Establishment Information

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Establishment Number #: 605261317				
Sources				
Source Type:	Source:			
Source Type:	Source:			
Source Type:	Source:			
Source Type:	Source:			
Source Type:	Source:			
Additional Comments				

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