TENNESSEE DEPARTMENT OF HEALTH VICE ESTABLISHMENT INSPEC

					FOOD SERVICE ESTABLISHMENT INSPECTION REPORT										SCO	DRE				
100		H	S. S. S.		Waffle House	#561										O Fermer's Market Food Unit			7	
Est	Establishment Name		ne ,	Type of Establishment O Mobile																
Add	ress				7676 Hwy 70 S. O Temporary O Seasonal															
City					Nashville		Time in	03	3:1	5 F	M	AJ	/ / PI	M Tir	me o	ut 03:25; PM AM / PM				
Insp	ectic	n Da	te	(03/14/202	2 Establishment #	60521104	1			Emba	rgoe	d 0)						
Pur	pose	of In:	spect		ORoutine	御 Follow-up	O Complaint			- O Pro			-		Cor	nsultation/Other				
Risi	Cat	egon	,		O 1	\$ 2 (2	03			O 4				Fo	low-	up Required O Yes 🕱 No	Number of S	eats	48	;
			isk F													to the Centers for Disease Cont control measures to prevent illne	rol and Prevent	tion	_	
				as c	ontributing factor											INTERVENTIONS	as or injury.			
		(He	rk de	elgnet	ed compliance status											each liem an applicable. Deduct points for e	ategory or subcate	gory.)	
IN	⊨in c	ompili	ance		OUT=not in compliance Compli	NA=not applicable	NO=not observe	d COS	R		S=cor	recte	d on-s	ite duri	ng ins	spection R*repeat (violation of th Compliance Status			R	WT
	IN	OUT	NA	NO		Supervision				_		IN	оит	NA	NO	Cooking and Reheating of Time/				
1	鬣	0	_			isent, demonstrates kn	owledge, and	0	0	5	10					Control For Safety (TCS) Proper cooking time and temperatures	foods	0		
			NA	NO	performs duties	Employee Health		-	-	_		o	0	8		Proper reheating procedures for hot hold	ling	00	읭	5
	X					od employee awarenes	is; reporting	0		5		IN	оυт		NO	Cooling and Holding, Date Marking				
3	8	0	NA		Proper use of restrict	tion and exclusion Hygienic Practices		0	0	<u> </u>	12	0	0	0		a Public Health Contr Proper cooling time and temperature	le	_		
4	1	0	NA			a drinking, or tobacco		0	0	_	18		8			Proper cooling time and temperature Proper hot holding temperatures		00	8	
5	25	0		0	No discharge from ey	yes, nose, and mouth		Ō	Ō	5	20	25	0	0		Proper cold holding temperatures		0	0	5
6		001	NA	and the second second	Preventing Hands clean and pro	g Contamination by	Hands	0				×	0	0	0	Proper date marking and disposition			0	
7	直区	0	0	_		t with ready-to-eat foo	ds or approved	0	ō	5	22	X	0	0	0	Time as a public health control: procedu	res and records	0	0	
· 1			•	-	alternate procedures					_		IN	OUT		NO					
8	N IN	ᇞ	NA			properly supplied and a pproved Source	ICCESSIDIE	0	0	2	23	0	0	図		Consumer advisory provided for raw and food	undercooked	0	0	4
	嵐				Food obtained from a	approved source		0				IN	OUT	NA	NO	Highly Susceptible Popula	tions			
10	0 ※	8	0		Food received at pro	per temperature on, safe, and unadulter	rahari	00	0	5	24	0	0	X		Pasteurized foods used; prohibited foods	s not offered	0	0	5
12	õ	ŏ	×			ailable: shell stock tags		ō	ŏ		H	IN	OUT	NA	NO	Chemicals			_	
			NA	-	destruction	ion from Contamina	tion	•	-	_	25	0		22		Food additives: approved and properly u	sad	0		
13	12	0	0	110	Food separated and			0	0	4	26	Ř	ŏ	<u> </u>		Toxic substances properly identified, sto			ŏ	5
14	X	0	0			s: cleaned and sanitiz		0	0	5				NA	NO	Conformance with Approved P	rocedures			
15	×	0			Proper disposition of served	unsafe food, returned	food not re-	0	0	2	27	ο	0	×		Compliance with variance, specialized p HACCP plan	rocess, and	ο	0	5
	_			C							_	4 1					- late finds			
				600	d Retail Practices	s are preventive in							_		gena	s, chemicals, and physical object	s into toods.			
				-00	f=not in compliance		COS=corre	COO cled or					IGB	5		R-repeat (violation of the sam	te code provision)			
	_					ance Status		COS	R	WT						Compliance Status		COS	R	WT
- 2	8	001	Past	euríze	Safe Fo d eggs used where re	od and Water		0	0	1		_	UT	ood ar	nd no	Utensils and Equipment prood-contact surfaces cleanable, proper	fy designed.	-		
2	9	0	Wate	r and	ice from approved so	ource		0	0	2	4	5				and used	ny designed,	0	0	1
3	0	0 001	Varia	nce c		d processing methods perature Control		0	0	1	4	5 0	o v	Varewa	ashin	g facilities, installed, maintained, used, te	st strips	0	0	1
Ε.			Prop	er coo		dequate equipment fo	r temperature	0			4	7 0	0	lonfoo	d-cor	ntact surfaces clean		0	0	1
	1	~	contr	ol				0	0	2		_	UT			Physical Facilities			_	
_	23				properly cooked for h thawing methods use			0	00	1	4	_				I water available; adequate pressure stalled; proper backflow devices		00	0	2
	4		<u> </u>		ters provided and ac			0	8	$\frac{1}{1}$	4	_				i waste water properly disposed		0	8	2
		OUT				dentification					5	_	-			es: properly constructed, supplied, cleane	đ	ŏ	ŏ	1
3	5	0	Food	prop	erly labeled; original c	container; required reco	ords available	0	0	1	5	2 0	0	Sarbag	e/refi	use properly disposed; facilities maintaine	d	0	0	1
		OUT			Prevention of	Food Contamination	n				5	5 3	R P	hysica	al faci	ilities installed, maintained, and clean		0	0	1
3	6	0	Insec	ts, ro	dents, and animals no	ot present		0	0	2	5	1 (0 A	dequa	nte ve	entilation and lighting; designated areas us	Jed	0	0	1
3	7	0	Cont	amina	tion prevented during	food preparation, stor	rage & display	0	0	1		0	UΤ			Administrative Items				
3	8	0	Pers	onal c	leanliness			0	0	1	5					mit posted			0	0
3	9	25	Wipir	ng clo	ths; properly used and	d stored		0	0	1	54	5 0	O N	lost re	cent	inspection posted		0	0	

20	•	reisonal cleaniness					33		Current permit posted	0		0
39	25	Wiping cloths; properly used and stored	0	0	1	11	56	0	Most recent inspection posted	0	0	v
40	0	Washing fruits and vegetables	0	0	1] [Compliance Status	YES	NO	WT
	OUT	Proper Use of Utensils				11			Non-Smokers Protection Act			
41	0	In-use utensils; properly stored	0	0	1] [57		Compliance with TN Non-Smoker Protection Act	0		
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1	11	58	1	Tobacco products offered for sale	0	0	0
43	20	Single-use/single-service articles; properly stored, used	0	0	1	11	59	1	If tobacco products are sold, NSPA survey completed	0	0	
44	0	Gloves used properly	0	0	1] .						
						_						
illure to	com	ect any violations of risk factor items within ten (10) days may result in suspen	sion o	f you	r food	i se	rvice e	istab	dishment permit. Repeated violation of an identical risk factor may result in revoci	dion (of you	ar foo

correct any ner 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 rt. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-719, 68-14-715, 68-14-716, 4-5-320. to

	V	$\boldsymbol{\gamma}$		\mathcal{V}
Signature of	Person	In C	harge	e

03/14/202	2
	Date

ohn John Michal Signature of Environmental Health Specialist

03/14/2022

Date

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

Free food safety training classes are available each month at the county health department. Please call () 6153405620 to sign-up for a class.

PH-2267 (Rev. 6-15)

RDA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Waffle House #561 Establishment Number # 605211041

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							

Equipment Temperature								
Decoription	Temperature (Fahrenheit)							

ecoription	State of Food	Temperature (Fahrenheit

Observed Violations	
Total # 3 Repeated # 0	
Repeated # ()	
39:	
43:	
53:	

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Waffle House #561 Establishment Number : 605211041

Comments/Other Observations

2: 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.

4: 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.

6: 7:

1:

8: 9: 10:

- 11:
- 12: 13:
- 14:
- 15: 16:
- 17:
- 18: 19:
- 20:
- 21:
- 22:
- 23: 24:
- 25:
- 26:
- 27: 57:
- 58:
- 100

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***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.

E	st	ab	list	hment	Information
-	-				The St.

Establishment Name: Waffle House #561 Establishment Number: 605211041

Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

Establishment Information

Establishment Name: Waffle House #561 Establishment Number #. 605211041

Sources		
Source Type:	Source:	

Additional Comments