

City

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

SCORE

O Farmer's Market Food Unit Calabria Brickoven Pizza Auxillary Remanent O Mobile Establishment Name Type of Establishment 1209 N Mt. Juliet Rd O Temporary O Seasonal Address **Mount Juliet** Time in 01:07: PM AM/PM Time out 01:21: PM AM/PM 02/07/2022 Establishment # 605248303 Embargoed 0 Inspection Date

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

Risk Category О3 Follow-up Required O Yes 疑 No

# FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

II.	<b>e</b> in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		0
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	盔	٥			Person in charge present, demonstrates knowledge, and performs duties		0	5
	IN	OUT	NA	NO	Employee Health			
2	$\mathbb{R}^{\mathbb{C}}$	0			Management and food employee awareness; reporting		0	l .
3	×	0			Proper use of restriction and exclusion		0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	0	0		X	Proper eating, tasting, drinking, or tobacco use	0	0	
5	0	0		300	No discharge from eyes, nose, and mouth	0	0	
		OUT	NA	NO	Preventing Contamination by Hands			
6	0	0		300	Hands clean and properly washed	0	0	
7	0	0	0	×	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×	0			Handwashing sinks properly supplied and accessible		0	2
	IN	OUT	NA	NO	Approved Source			
9	窓	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	5
12	0	0	Ж	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	×	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	338	0			Proper disposition of unsafe food, returned food not re-		0	2

					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	×	0	Proper cooking time and temperatures	0	0	5
17	0	0	3%	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	0	×	Proper cooling time and temperature	0	0	
19	0	0	文	0	Proper hot holding temperatures	0	0	
20	145	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	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25		0	3%		Food additives: approved and properly used	0	0	5
26	黨	0			Toxic substances properly identified, stored, used	0	0	۰
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

### s, 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	:	
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	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	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	г	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г	
43	0		0	0	r	
-						

pecti	on	R-repeat (violation of the same code provision		_	
		Compliance Status	cos	R	W
	OUT	Utensils 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	0	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	-
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	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	-
54	0	Adequate ventilation and lighting; designated areas used	0	0	'
	OUT	Administrative Items			
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	- 3%	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	0	

er. You have the right to request a n (10) days of the date of the

> 02/07/2022 Date

02/07/2022

\*\*\*\* 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 ) 6154445325 Please call ( to sign-up for a class.

Date

#### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Facility of the state of								
Establishment Information								
Establishment Name: Calabria Brickoven Pizza Auxillary								
Establishment Number #: [60524830	93							
NODA C. T. L	:							
NSPA Survey – To be completed Age-restricted venue does not affirmatively n		facilities at all times to an						
twenty-one (21) years of age or older.	estrict access to its buildings or	raciities at all times to pe	rsons wno are					
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 cons	picuously posted at every	entrance.					
Garage type doors in non-enclosed areas ar	e not completely open.							
Tents or awnings with removable sides or ve	nts in non-enclosed areas are r	not completely removed o	r open.					
Smoke from non-enclosed areas is inflitrating	g into areas where smoking is p	rohibited.						
Smoking observed where smoking is prohibi	ted by the Act.							
				-				
Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature ( Fah	renhelt)				
Equipment Temperature								
Description			Temperature ( Fah	renhelt)				
Food Temperature								
Description		State of Food	Temperature ( Fah	renhelf)				
- Contract		0.000	Tomporatare (Tan					
			I					
			1					

# TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Information



Establishment Name: Calabria Brickoven Pizza Auxillary	
Establishment Number: 605248303	
The same of the sa	
Comments/Other Observations	
1: 2: 3: 4: 5: 6: 7:	
Z: 2:	
3. 4.	
4.   <sub>F</sub> .	
5. 6.	
0. 7.	
().	
7: 8: Item corrected 9: 10: 11: 12: 13: 14: 15: 16: 17: 18: 19: 20: 21: 22: 23: 24: 25: 26: 27: 57:	
10.	
10. 11.	
12.	
12. 13.	
14.	
14. 15.	
15. 16:	
17.	
17. 10.	
10. 10·	
20.	
20.	
21. 22.	
22. 22.	
23. 24:	
24. 25·	
23. 26·	
20. 27.	
21.  57·	
57: 58:	
<b>30</b> .	
***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	r additional com	ments.	
and a paragraph			

<sup>\*\*\*</sup>See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Calabria Brickoven Pizza Auxillary		
Establishment Number: 605248303		
Comments/Other Observations (cont'd)		
Additional Comments (cont'd)		
See last page for additional comments.		

Establishment Information

Establishment Name: Calabria Brickoven Pizza Auxillary					
Establishment Number #: 605248303					
Sources	7				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Additional Comments					
See routine inspection for comments					

Establishment Information