TENNESSEE DEPARTMENT OF HEALTH

A CONTRACTOR					FOOD SERVICE ESTABLISHMENT INSPECTION REPORT												SCORE							
W		H	S.		Drury Inn											O Fermer				(C		
		nem	t Nan		Type of Establishment O Mobile										ノ	J								
Add	ress																							
City								_). <u> </u>			_			me o	ut <u>U8.15</u> ;	AIV	AM	/ PM					
Insp	ectio	n Da	te	÷	10/13/202	21 Establishment #	60515503	5		-	Embe	irgoe	d _	5					l					
Puŋ	oose	of In	spect	tion	O Routine	鎆 Follow-up	O Complaint			O Pr	elimin	ary		0	Cor	nsultation/Other								
Risi	Cat	egon			01	X 2	O 3			O 4	_					up Required		Yes 🕅			ber of S		64	
		R				paration practices ors in foodborne ill																ion		
							E ILLNESS RI																	
IN	=in cr	(CD)		elgnet		e (IN, OUT, NA, NO) for e	NO=not observe		Romp							spection				e same cod				
	_		_	_		pliance Status	110 100 0000110	COS	R		Ē					Comp	lianc	e Statu	8				R	WT
Ц	_	ουτ	NA	NO	Decree is chosen a	Supervision	andadaa aad					IN	ουτ	NA	NO	Cooking an Com		-	of Time/ ty (TCS)		ture			
1	鬣	٥			performs duties	resent, demonstrates k	nowledge, and	0	0	5		0	0		0	Proper cooking	time a	ind temps	eratures			0	8	5
2	X		NA	NO	Management and f	Employee Health ood employee awarene	ss; reporting	0	0		17	0	0			Proper reheatin Ceeling and					me 83	0	0	
3	黨	0			Proper use of restri	iction and exclusion		0	0	5		IN	OUT	NA	NO				th Contr					
	IN 送	OUT O	NA			ng, drinking, or tobacco		0	0	_		0 溪	0	0		Proper cooling t Proper hot hold						0	0	
5	澎	0		0	No discharge from	eyes, nose, and mouth		ŏ	ŏ	5	20	25	0	0		Proper cold hok	ding te	mperatu	res			0	0	5
6	IN X	OUT O	NA	and the second sec	Preventi Hands clean and p	ng Contamination by month washed	y Hands	0	0	_		20				Proper date ma							0	
7	<u>R</u>	ŏ	0		No bare hand conta	act with ready-to-eat foo	ds or approved	0	ō	5	22	0	0	×		Time as a publi					cords	0	0	
8	X	0			alternate procedure Handwashing sinks	is followed s properly supplied and	accessible		0	2	23	IN O	OUT	NA X	NO	Consumer advi			Advisory or raw and		ked	0	0	-
	IN 嵐	OUT	NA		Food obtained from	Approved Source		0			23	IN	OUT		NO	food	aber @ur	ac antibi	le Popula	stions	_	•	9	•
10	0		0		Food received at p			ŏ	0					200	NO									
	×	0		_		ition, safe, and unadulte vailable: shell stock tag		0	0	5	24		0	_		Pasteurized foo	X35 US4			s not offere	eq	0	0	•
		0	×	•	destruction	-		0	0			IN	OUT					Chemi						
		OUT	NA	NO	Food separated an	tion from Contamina d protected	ation	0	0	4	25	0 溪	8	X	J	Food additives: Toxic substance						0	응	5
		ŏ				ces: cleaned and saniti	zed		ŏ			IN		NA	NO					Procedure		Ŭ	-	
15	12	0			Proper disposition (served	of unsafe food, returned	food not re-	0	0	2	27	0	0	×		Compliance wit HACCP plan	th varia	ance, spe	cialized p	rocess, an	d	0	0	5
	_	_		-									_											
				Goo	d Retail Practic	es are preventive r							_	_	gens	s, chemicals,	and	physica	l object	s into fo	ods.			
				00	I=not in compliance		COS=corre	COO cled or						5		R	-repea	(violation	of the sam	ne code pro	vision)			
	_	OUT				liance Status		COS	R	WT								ce Stat				COS	R	WT
2	8	0			d eggs used where				0		4	_	NUT O ^F	ood ar	nd no	onfood-contact si		d Equip: s cleanat		rly designe	rd,	0	0	1
2	9 0				ice from approved	source zed processing method	*	0	0	2	\vdash	+	<u> </u>	onstru	cted,	and used						-	4	1
	·	OUT	vana	nice c		mperature Control	>	0			4	6	0 V	Varewa	ashin	g facilities, insta	illed, m	naintaineo	d, used, te	est strips		0	0	1
3	1		Prop		oling methods used;	adequate equipment fo	or temperature	0	0	2	4	_	₩ UT	lonfoo	d-cor	ntact surfaces ck		Real links				0	0	1
3	2				properly cooked for	r hot holding		0	0	1	4			lot and	1 cold	i water available		Facilitie uate pres				0	o	2
3	_	0	Appr	oved	thawing methods us	sed		0	0	1	4	_				stalled; proper ba						0	0	2
3	4	0 001	Then	mome	eters provided and a Food	occurate		0	0	1	5	_	-			waste water pro es: properly cons				d		0	0	2
3	5		Food	prop		I container; required rec	ords available	0	0	1	5					use properly disp						0	ō	1
	_	OUT				f Food Contaminatio		-	-		5		-	-	·	ilities installed, m						0	0	1
3	6	0	Insec	ts, ro	dents, and animals	not present		0	0	2	5	4	0 /	\dequa	ite ve	entilation and ligh	nting; d	lesignate	d areas u	sed		0	0	1
3	7	0	Cont	amina	ition prevented duri	ng food preparation, sto	rage & display	0	0	1		0	UT			Admi	inistra	ntive ite	ms					
3	8	0	Pers	onal c	leanliness			0	0	1	5					nit posted	-					0	0	•
3	9				ths; properly used a	and stored		0		1	5					inspection poste	bd					0	0	0

10/13/2021 Date

<u>美</u> 0 0 0 0 0

YES NO WT

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SIGNAL	1.210	CIE.	PPR	ROD	in i	ເກ	ana	FR
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And

44 O Gloves used properly

O Wiping cloths; properly used and stored O Washing fruits and vegetables

Proper Use of Utensils

ns within ten (10) days

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O In-use utensils; properly stored
O Utensils, equipment and linens; properly stored, dried, handled
O Single-use/single-service articles; properly stored, used

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10/13/2021

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1 Signature of Environment interain Specialist

pection 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 thi 14-706, 68-14-708, 68-14-708, 68-14-719, 68-14-715, 68-14-716, 4-5-329.

Compliance Status

Compliance with TN Non-Smoker Protection Act Tobacco products offered for sale

If tobacco products are sold, NSPA survey completed

Non-Smokers Protection Act

ment permit. Repeated violation of an identical risk factor may result in revocation of your foo ms shall cease. You are required to post the food service establishment permit in a conspicuou

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

ion of your food service establishe corrected immediately or operation

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PH-2267 (Rev. 6-15)	Free food safety training clas	RDA 625		
(192201 (1997. 0-10)	Please call () 6153405620	to sign-up for a class.	ndr ozs

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Drury Inn Establishment Number # 605155035

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.	
"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.	
Smoking observed where smoking is prohibited by the Act.	

Warewashing Info			
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)

Equipment Temperature	
Description	Temperature (Fahrenheit)
	· · · · · · · · · · · · · · · · · · ·

ecoription	State of Food	Temperature (Fahrenheit

Observed Violations
Total # 1 Repeated # 0
Repeated # 0
47:

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Establishment Information

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Comments/Other Observations		
D: L: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 8: 9: 9: 9: 9: 9: 9: 9: 9: 9: 9		
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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 Information

Establishment Name: Drury Inn

Establishment Number: 605155035

Comments/Other Observations (cont'd)

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

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SourcesSource Type:Source:Source Type:Source:Source Type:Source:Source Type:Source:Source Type:Source:

Additional Comments