TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

6230

								F001	D SERV	ICE ESTA	BL	ISH	IME	IN	F II	NSI	PEC	TI	ON REPORT	SCO	RE		
W		E I	S. S. S.																O Fermer's Market Food Unit	7	ſ		
Estat	xish	men	t Nar	me	Pi:	zza Pe	rfect							_	Tvr	e of l	Establi	ishme	E Parmanant O Mobile			1	
Addre	55				35	7 Cloft	on D)r.							. ,,	20101	2.540.04	General N	O Temporary O Seasonal				
City					Na	shville				Time in	03	3:1	0 F	M	_ A	M/P	M Ti	me o	ut 04:05;PM_AM/PM				
Inspe	ctio	n Da	te		12	2/19/2	202	3 Est	ablishment #	60511427	7		_	Embe	argoe	d C)						
Purpo	se	of In	spec	tion	X.	Routine		O Follo	w-up	O Complaint			O Pr	Nimin	ary		c	Cor	nsuitation/Other				
Risk (Cate				01			X 2		O 3			O 4	_					up Required 🕱 Yes O No	Number of S		64	_
				8.5	cont	are food tributing f	actor	iration is in fo	odborne ill	ness outbreak	s. P	ublic	s mo s Hea	at c ilth	Inte	rven	tions	are	d to the Centers for Disease Cont control measures to prevent illn	ess or injury.	tion		
		(11)	rk de	alga	ated o	ompliance	status	(IN, OUT)	FOODBOR	NE ILLNESS Ri och numbered iter	SK F. n. For		ORS mark	AND 61 01	РU Л, в	BLIC ark Ci	HEA	LTH for e	INTERVENTIONS ach item as applicable. Deduct points for	category or subcate	1007		
IN-i	n co	mpii				T=not in com	pliance	NA=n	not applicable	NO=not observ	ed		CC						spection R=repeat (violation of th	e same code provisi	ion)		
	N	оит	NA	NO			ompli	ance S Super	rvision		cos	R	wr	H		олт		NO	Compliance Status Cooking and Reheating of Time/		COS	ĸ	WT
	-	0			Per		-			nowledge, and	0	0	5						Control For Safety (TCS)	Foods		_	
	N	OUT	NA	NO		forms dutie		Employ	ee Health		-		-		0 家			8	Proper cooking time and temperatures Proper reheating procedures for hot hok	ding	00	8	5
20	_	_			-				oyee awarene	ss; reporting	X		5		IN	ουτ	NA	NO	Cooling and Holding, Date Markin				
		0	NA	NO		per use of			exclusion		0	0	_	18	0	0	0	54	a Public Health Cents Proper cooling time and temperature	lo	0		_
42	K.	0	144	0	Pro		tasting	a drinkin	g, or tobacco	use	0	0	5	19	0	0	0		Proper hot holding temperatures		0	0	
5 2			NA	-	_				e, and mouth mination by		0	0	Ľ		22		8	0	Proper cold holding temperatures Proper date marking and disposition		8	8	5
		0	10-1		Har	nds clean a	nd pro	perly wa	shed		0	0		22	_	6	82		Time as a public health control: procedu	res and records	ō	ŏ	
7 8	8	0	0	0		bare hand- mate proce				ods or approved	0	0	5			-	NA				-	-	_
8 (2	1	NA		Har		sinks p	property s	supplied and	accessible	X	12	2	23		0	X		Consumer advisory provided for raw an food	d undercooked	0	0	4
9 8	2	0			Fox	od obtained	from a	approved	d source		0	0			IN	OUT	NA	NO	Highly Susceptible Popul	rtions			_
10 (11)	2	0	0		S Fox	od received	at pro	per temp	perature and unadulte	rated	8	0	5	24	0	0	88		Pasteurized foods used; prohibited food	s not offered	0	0	5
	_	ŏ	82	0	Re	quired reco			shell stock tag		ŏ	ŏ			IN	олт	NA	NO	Chemicais			_	_
h	N	OUT	NA	NO		truction Pr	otecti	on from	n Contamin	ation	-	-	_	25	0	0	25		Food additives: approved and properly u	used	0	তা	
13 (<u> </u>	篾	0			od separate					_	0		26	0	25		·	Toxic substances properly identified, sto	ored, used	X	×	5
14 3	_		0	J					ed and sanitia food, returned		0	0	5		IN	-	NA	NO	Conformance with Approved I Compliance with variance, specialized p				_
15 }	8	0				ved			,		0	0	2	27	0	0	黨		HACCP plan		0	٥	5
				Go	od R	letail Pra	ctice	s are p	reventive r	measures to co	ontro	l the	intr	oduc	tion	ofp	atho	gens	s, chemicals, and physical object	s into foods.			
											GOO	D R	ar/al	L PR	ACT	TICE	5						
_				0	UT=n	t in complian		ance S	tatus	COS=com		n-site R		inspe	ction				R-repeat (violation of the sar Compliance Status	ne code provision)	COS	R	WT
	_	OUT				81	nte Fo	od and				· · ·			0	UT	_		Utensils and Equipment				
28						ggs used w from appro					8	0	2	4	s				infood-contact surfaces cleanable, prope and used	rly designed,	0	0	1
30	_	0 OUT	Varia	ance	obta				ssing method • Control	5	Ő	0	1	4	6	0 1	Varew	ashin	g facilities, installed, maintained, used, to	est strips	0	0	1
	-	0	Prop	xer co	ooling					or temperature		0		4	7	• •	lonfoo	d-cor	ntact surfaces clean		0	0	1
31	_	-	conb	rol							0		2			UT			Physical Facilities			~	
32	_					perty cooke wing metho			19		8	0	1	4	_				f water available; adequate pressure stalled; proper backflow devices		8	0	2
34		X	Ther			s provided a	and acc	curate			0	0	1	5	0	0 8	Sewag	e and	i waste water properly disposed		0	0	2
	-							dentific		and a surfable				-	_				es: properly constructed, supplied, cleane			0	1
35	_	O	F-000	a proj	peny		-		r, required rec	ords available	0	0	1	5		-	-	·	use properly disposed; facilities maintain ilities installed, maintained, and clean	10	0	0	1
36	-	-	Inse	ots r	roden	ts, and anir				**	0	0	2	-	-				entilation and lighting; designated areas u	sed	õ	ŏ	+
37	+	-								age & display	0	0	1	F	-	UT			Administrative items		-	-	
38	_	_				nliness	Gunng) lood pri	eparation, ac	velle a ashey	6	0	1	5			Jument	toern	nit posted		0	0	_
39		Ó	Wipi	ng ci	loths;	properly us		d stored			0	0	1	-	-				inspection posted		0	0	0
40	_	O	Was	hing	fruits	and veget		ine of i	tensils		0	0	1			_			Compliance Status Non-Smokers Protection	Act	YES	NO	WT
41		0				; properly s	stored					0		5					with TN Non-Smoker Protection Act		0	120	_
42	_								stored, dried rly stored, us		00	0		5	8				oducts offered for sale roducts are sold. NSPA survey completed	4	0	0	۰
44						roperly		-1 bi she				ŏ		Ľ									_
																			Repeated violation of an identical risk factor				
-		of no	at the	-		of increation	report	in a cons	spinuous mann	or. You have the ris	ee	No. Inc.							e. You are required to post the food service filing a written request with the Commissione				
epon			ACUO	-	5	\mathcal{U}		Ja. 00-10		1, 68-14-715, 68-14-7			_						EL L				
	<	\leq		J						12/2	19/2			_					Eubonks	1	12/1		023
Signa	atur	e of	Pers	ion Ir	n Ch	arge						[Date	Si	natu	ire of	Envin	onme	ental Health Specialist				Date

,	Additional food safety information can be found on our website, http://tn.gow/health/article/eh-foodservic	e ****
PH-2267 (Rev. 6-15)	Free food safety training classes are available each month at the county health department. Please call () 6153405620 to sign-up for a class.	RDA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Pizza Perfect Establishment Number #: 605114277

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.	No
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.	<u> </u>
Smoking observed where smoking is prohibited by the Act.	<u> </u>

Warewashing Info			
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
Cloth bucket	QA	200	

Equipment Temperature	
Description	Temperature (Fahrenheit)
Prep cooler	36
Reach in freezer	2
Reach in freezer	8
Reach in cooler	38

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Sliced ham in prep cooler	Cold Holding	42
Meatballs in oven	Reheating	165
Cooked pasta in reach in cooler (sandwiched)	Cold Holding	37
Ricotta cheese in reach in cooler	Cold Holding	42
Sausage in walk in cooler dated 12/18	Cold Holding	37
Chicken in walk in cooler dated 12/18	Cold Holding	37

Total # 8

Repeated # 0

2: Employee Health Policy is not available. CA- A copy of the Employee Health Policy was given to the PIC.

8: No soap or paper towels at a kitchen hand sink. CA- Soap and paper towels were provided at the hand sink.

13: Two cartons of raw shell eggs are stored above ready-to-eat foods in the walk in cooler. CA- Eggs were moved to the bottom shelf.

26: Unlabeled chemical spray bottle containing an orange liquid under the front counter. CA- Chemical spray bottle was labeled. (3rd notice)

34: Thermometers in several coolers are missing or not working.

43: Box of paper bags is stored on the floor in the kitchen.

49: The sprayer hose hangs below the flood rim of the sink at the dish machine.

53: Ceiling, ceiling vent, and ceiling light shields are dirty in the first kitchen area. Floor is dirty in the walk in cooler.



Establishment Information

Establishment Name: Pizza Perfect

Establishment Number : 605114277

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering guestions regarding principles applicable to the food operation. 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: Employees wash hands. 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods. 9: Food source: GFS, Sysco 10: (NO): No food received during inspection. 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. 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: No food was cooked during the inspection. 17: Food temps listed. 18: No foods were cooling during the inspection. 19: No foods were being hot held during the inspection. 20: Food temps listed. 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. 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes. 57: 3: 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 Information

Establishment Name: Pizza Perfect

Establishment Number : 605114277

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Pizza Perfect Establishment Number # 605114277

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

Additional Comments