TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

FOOD SERVICE ESTAR			BL	BLISHMENT INSPECTION REPORT							SCORE									
Pouring la Direct													O Fermer's Merket Food Unit	$\mathbf{\cap}$	ſ	١				
Establishment Name							_	Tvr	e of f	Establi	ishme	Permanent O Mobile	M		1					
Add	ress				823 Hamilto	on Crossing					_	.,,				O Temporary O Seasonal				
City					Antioch		Time in	04	1:4	0 F	M	A	M/P	и ті	me o	ut 04:45; PM AM/PM				
Insp	ectio	on Da	rte		02/28/20	23 Establishment	60524141	7			Embe	argoe	d 0							
Puη	oose	of In	spect	tion	Routine	O Follow-up	O Complaint			O Pro	limin	ary	_	c	Cor	nsuitation/Other				
Risi	sk Category O1 🕱 O3 O4 Follow-up Required O Yes 🕅 No Number of Seats																			
		R	isk I	as c	ors are food pre ontributing fac	paration practice tors in foodborne i	s and employee liness outbreak	beha s. P	vior	s mo ; Hea	st c ilth	omn Inte	nonly rven	repo tions	are	to the Centers for Disease Cont control measures to prevent illn	rol and Preven ass or injury.	tion		
																INTERVENTIONS				
IN	⊨in c	(C) ompli		algas		nce NA=not applicable			lie ma							spection R=repeat (violation of th)	
_	_		_			pliance Status		COS	R		Ē		_	_		Compliance Status			R	WT
		-	NA	NO	Person in charge r	Supervision present, demonstrates	knowledge and			_		IN	ουτ	NA	NO	Cooking and Reheating of Time/ Control For Safety (TCS)				
1	× N	0	NA	NO	performs duties	Employee Health	nanovnicoge, ene	0	0	5	16 17	00	8	Š		Proper cooking time and temperatures Proper reheating procedures for hot hok	lina	0	00	5
	X	0	nes.	110		food employee awarer	ess; reporting	0		5	۲̈́	IN	олт	NA	-	Cooling and Holding, Date Marking	-	-		
3	8		NA	110	,	riction and exclusion		0	0	Ľ		0				a Public Health Contr	ol	0		
4	X	0	NA			od Hygienic Practic ting, drinking, or tobacc		0	0	5	19	0	0	<u>。</u> 意		Proper cooling time and temperature Proper hot holding temperatures		0	0	
5		0	NA	-		eyes, nose, and mout ing Contamination		0	0	<u> </u>		12	8	8	~	Proper cold holding temperatures Proper date marking and disposition		00	8	5
6	×	0	1404		Hands clean and p		oy manes	0	0			o	ŏ	×		Time as a public health control: procedu	res and records	0	ŏ	
7	X	0	0	0	No bare hand cont alternate procedur	tact with ready-to-eat fi res followed	oods or approved	0	0	5	-	IN	OUT		-	Consumer Advisory		-	-	
8		ᅃ	NA	NO	Handwashing sink	s properly supplied an Approved Source	d accessible	0	0	2	23	0	0	X		Consumer advisory provided for raw and food	undercooked	0	0	4
9	黨	0				m approved source			0			IN	ουτ	NA	NO	Highly Susceptible Popula	tions			
			0			ition, safe, and unadul		0	0	5	24	0	0	X		Pasteurized foods used; prohibited food	s not offered	0	0	5
12	0	0	×	0	Required records a destruction	available: shell stock to	ags, parasite	0	0			IN	ουτ			Chemicals				
43		OUT		NO	Prete Food separated an	ction from Contami	nation	_			25	0	0	X	J	Food additives: approved and properly u Toxic substances properly identified, sto		0		5
	×		ő			ces: cleaned and san	tized	ŏ		5	-	IN		NA	NO	Conformance with Approved I			-	
	X	0			Proper disposition served	of unsafe food, returned	ed food not re-	0	0	2	27	0	0	×		Compliance with variance, specialized p HACCP plan	rocess, and	0	0	5
_				-		41					_					s, chemicals, and physical object	- late facto			
						tes are proventive	measures to co			at/Al			-		gena	, chemicals, and physical object	into roous.			
				00	T=not in compliance		COS=corre	cted o	n-site	during						R-repeat (violation of the san	ne code provision)			
	_	OUT				pliance Status Food and Water		COS	R	WT		0	UT			Compliance Status Utensils and Equipment		COS	R	WT
2		0	Past		ed eggs used where	e required			2		4	_	o F			infood-contact surfaces cleanable, prope	fy designed,	0	0	1
_	9 0				tice from approved obtained for special	ized processing metho	ds	8	8	2	4	+				and used	et etcas	0		
		OUT	_			mperature Control					4		_			g facilities, installed, maintained, used, te ntact surfaces clean	st strips	-	0	1
3	1	0	contr		oling methods used	t; adequate equipment	for temperature	0	이	2	-	_	O N	omoo	G-COI	Physical Facilities		0		-
3	2				properly cooked fo thawing methods u			8	8	1	4	_				3 water available; adequate pressure stalled; proper backflow devices		00	8	2
3	_		<u> </u>		eters provided and			ŏ	6	1	5		_			i waste water properly disposed		ŏ	ð	2
	_	OUT			Food	d identification			_		5	_	0 T	oilet fa	scilitie	es: properly constructed, supplied, cleane	đ	0	0	1
3	5		Food	i prop		al container; required re		0	0	1	5		-	-	·	use properly disposed; facilities maintaine	d	0	0	1
	6	OUT	Incor			of Food Contaminat	ion			_	5	_	_			ilities installed, maintained, and clean		0	2	1
	-	-			dents, and animals			0	0	2	P	-	-	dedra	ne ve	entilation and lighting; designated areas u	peq	0	0	1
3	_					ing food preparation, s	torage & display	0	0	1			UT			Administrative items		0		
3	8 9	-	-		ths; properly used	and stored		0	0	1	5	_				nit posted inspection posted		0		0
4	0	-		hing f	ruits and vegetable			0	0	1		_	_	_	_	Compliance Status		YES	NO	WT
-4	1	OUT	_	e ute	Prope nsils; properly store	r Use of Utensils Id		0	0	1	5					Non-Smokers Protection with TN Non-Smoker Protection Act	wet	0		
_	2 3	0	Uten	sils, e	quipment and liner	ns; properly stored, drie cles; properly stored, u	ed, handled	0	0	1	5	8				oducts offered for sale roducts are sold, NSPA survey completed		00		0
	4				ed properly				ŏ		Ľ	- 11	10		pr	and the series in a second second second				
																Repeated violation of an identical risk factor				
man	ner a	nd po	st the	most	recent inspection rep	ort in a conspicuous mar	nner. You have the rig	the to r	eques							e. You are required to post the food service of filing a written request with the Commissioner				
repo	n, T,	<u></u>	Pectio	ns 68-	14-703, 68-14-705, 68-	14-708, 68-14-709, 68-14-7							1		0	Λ				
_		(02/2	28/2			_	Č	$\not\vdash$	1	<u> </u>	ton	()2/2	8/2	023
Sig	natu	re of	Pers	on In	Charge				0	Date	Si	gnatu	ire of	Envir	onme	ental Health Specialist				Date

	*** Additional food safety	information can be found on	our website, http://tn.ge	ow/health/article/eh-fo	odservice ****
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PH-2267 (Rev. 6-15)	Free food safety training cla	RDA 629		
1192201 (Nev. 0-10)	Please call () 6153405620	to sign-up for a class.	hDr 025

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Domino's Pizza Establishment Number #: 605241417

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)						
			l						

Equipment Temperature	
Decoription	Temperature (Fahrenheit)

ecoription	State of Food	Temperature (Fahrenheit

Observed Violations								
Total # 2 Repeated # 0								
Repeated # ()								
34:								
56:								

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Establishment Name: Domino's Pizza Establishment Number : 605241417

comments/Other Observations		

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: Domino's Pizza

Establishment Number : 605241417

Comments/Other Observations (cont'd)

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

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Sources		
Source Type:	Source:	

Additional Comments