

Establishment Name

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

A.O. Smith/Country Concession

Remanent O Mobile Type of Establishment

Follow-up Required

500 Tennessee Waltz Pkwy. Address

KRoutine

O Temporary O Seasonal

O Yes 疑 No

O Farmer's Market Food Unit

Ashland City City

Time in 11:34; AM AM / PM Time out 12:21; PM AM / PM

01/27/2022 Establishment # 605217594

O Follow-up

Inspection Date

Embargoed 0 O Consultation/Other

Risk Category

Purpose of Inspection

O Complaint O Preliminary

Number of Seats 200

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

etus (IN, OUT, NA, NO) for ea

119	4 =in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	d		0
					Compliance Status	cos	R	WT
	IN	оит	NA	NO	Supervision			
1	盔	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	ЭX	0			Management and food employee awareness; reporting	0	0	
3	寒	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	30	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	
		-	NA	NO	Preventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed	0	0	
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×				fandwashing sinks properly supplied and accessible		0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	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	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	窯	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized		0	5
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

	Compliance Status							
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	X	0	0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	3%	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	0	×	Proper cooling time and temperature	0	0	
19	×	0	0	0	Proper hot holding temperatures	0	0	
20	200	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	0	3%		Food additives: approved and properly used	0	0	5
26	菜	0			oxic substances properly identified, stored, used		0	,
	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=corr			
		Compliance Status	cos	R	W
	OUT	Caro i con amo i i mon			
28	0	Pasteurized eggs used where required	0	0	
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	
	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	г
33	0	Approved thawing methods used	0	0	г
34	0	Thermometers provided and accurate	0	0	г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	Γ
	OUT	Prevention of Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	0	Contamination prevented during food preparation, storage & display	0	0	Γ
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	Г
	OUT	Proper Use of Utensils	$\overline{}$		Т
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	Single-use/single-service articles; properly stored, used	0	0	Г
44	10	Gloves used properly	0	0	

specti		R-repeat (violation of the same code provision) Compliance Status	COS	R	W.
	OUT	Utensils and Equipment	1		
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	١.
47	0	Nonfood-contact surfaces clean	0	0	-
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	-
49	0	Plumbing installed; proper backflow devices	0	0	-:
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	١.
53	2%	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	- 100	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	0	

icuous manner. You have the right to request a in (10) days of the date of the

01/27/2022

01/27/2022

Date

**** 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) 6157924318 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: A.O. Smith/Country Concession
Establishment Number ≠: 605217594

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	1.
"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.	\rightarrow
Smoking observed where smoking is prohibited by the Act.	_

Warewashing Info						
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)			
3/comp sink	Chlorine	100				

Equipment Temperature				
Description	Temperature (Fahrenheit)			
Freezer	28			
Egg unit	23			

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Sliced tomatoes prep tp	Cold Holding	41
Chicken prep tp 1 hr	Cooling	45
Turkey lw unit	Cold Holding	34
Ham burger line	Hot Holding	178
Sauce 1 hr	Reheating	101
Chicken hot box	Hot Holding	136
Sauce	Reheating	
Hamburger	Cooking	167
Bacon unit	Cold Holding	30

Observed Violations							
Total # 1							
Repeated # ()							
53: Build up of dust debris on ceiling vents over food prep areas. Light shield							
missing in back dish area. Dust debris build up on fan cover over serving line.							
""See page at the end of this document for any violations that could not be displayed in this space.							

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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Establishment Name: A.O. Smith/Country Concession

Establishment Number: 605217594

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: (IN): PIC has knowledge of symptoms and diseases of foodborne illnesses.
- 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: Proper hand washing observed.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: See source.
- 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.
- 13: (IN) All raw animal food is separated and protected as required.
- 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: (IN) All raw animal foods cooked to proper temperatures.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See temps.
- 20: See temps.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 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.
- 26: (IN) All poisonous or toxic items are properly identified, stored, and used.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57: Signs posted
- 58: N/a

Additional Comments

See last page for additional comments.

^{***}See page at the end of this document for any violations that could not be displayed in this space.

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: A.O. Smith/Country Concession				
Establishment Number: 605217594				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				

Establishment Information

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Establishment Name: A.O. Smith/Country Concession						
Establishment Number #:	605217594					
100						
Sources						
Source Type:	Water	Source:	ACU			
Source Type:	Food	Source:	Sysco, gfs, palmer, walmart.			
Source Type:		Source:				
Source Type:		Source:				
Source Type:		Source:				
Additional Comme	nts					
Excellent hand wash	iing and NBHC pract	ices observed through out insp	ection by all employees.			