

Establishment Name

Risk Category

# TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Type of Establishment

Remanent O Mobile

213 Indian Lake Blvd. Address Hendersonville

Time in 11:32; AM AM / PM Time out 11:34; AM

O Temporary O Seasonal

City 05/06/2024 Establishment # 605202293 Inspection Date

Embargoed 0

Purpose of Inspection

∰ Follow-up Routine

Cracker Barrel #630

O Complaint O Preliminary

О3

Follow-up Required O Yes 疑 No

O Consultation/Other

Number of Seats 205

SCORE

### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

IN-in compliance OUT-not in compliance NA-not applicable NO-not observed C								
Compliance Status								WT
	IN	OUT	NA	NO	Supervision			
1	×	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	ЭK	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	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	黨	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	X	0			Handwashing sinks properly supplied and accessible	0	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	×	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	×	0			roper disposition of unsafe food, returned food not re- erved		2	

Compliance Status						000	n	***
	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	۰
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	X	Proper cooling time and temperature	0	0	
19		0	0	0	Proper hot holding temperatures	0	0	
20	24	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	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	2	0			Toxic substances properly identified, stored, used	0	0	9
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

#### to control the introduction of pathoge ns, chemicals, and physical objects into foods.

L PRACTICES

			GOO			
		OUT=not in compliance COS=con				
		Compliance Status	cos	R	W	
	OUT	Caro rocc and comes				
28	0	Pasteurized eggs used where required	0	0	1	
29	0		0	0	_2	
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	1	
32	0	Plant food properly cooked for hot holding	0	0	1	
33	0	Approved thawing methods used	0	0	,	
34	0	Thermometers provided and accurate	0	0	Ī	
	OUT	UT Food Identification				
35	0	Food properly labeled; original container; required records available	0	0	1	
	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	1	
38	0	Personal cleanliness	0	0	r	
39	0	Wiping cloths; properly used and stored	0	0	ľ	
40	0	Washing fruits and vegetables	0	0	'	
	OUT	Proper Use of Utensils				
41	0	In-use utensils; properly stored	0	0	Γ.	
42	120	Utensils, equipment and linens; properly stored, dried, handled	0	0	,	
43	0		0	0	r	
44	10	Gloves used properly	0	0	-	

pecti		R-repeat (violation of the same code provision)  Compliance Status	cos	R	W
	OUT	Utensiis and Equipment	-	-	
45	H	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	- 3
49	0	Plumbing installed; proper backflow devices	0	0	- 2
50	0	Sewage and waste water properly disposed	0	0	- 3
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	1
	OUT	Administrative Items			
55	0	Current permit posted	0	0	Г
56	0	Most recent inspection posted	0	0	'
		Compliance Status	YES	NO	V
		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	

ten (10) days of the date of the

05/06/2024

05/06/2024 Date

Signature of Person In Charge

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

Date

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629 ) 6152061100 Please call ( to sign-up for a class.

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



Establishment Information									
Establishment Name: Cracker Barrel #									
Establishment Number #:  605202293									
NSPA Survey - To be completed if									
Age-restricted venue does not affirmatively resi twenty-one (21) years of age or older.	trict access to its buildings o	r facilities at all times to	persons who are						
Age-restricted venue does not require each per	rson attempting to gain entry	to submit acceptable f	form of identification.						
"No Smoking" signs or the international "Non-S	moking" symbol are not con	spicuously posted at ev	very entrance.						
Garage type doors in non-enclosed areas are not completely open.									
Tents or awnings with removable sides or vents	s in non-enclosed areas are	not completely remove	d or open.						
Smoke from non-enclosed areas is infiltrating in	nto areas where smoking is	prohibited.							
Smoking observed where smoking is prohibited	i by the Act.								
Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature ( Fat	renhelt)					
			•						
Equipment Temperature									
Description			Temperature ( Fah	renhelt)					
			_						
Food Temperature									
Description		State of Food	Temperature ( Fah	renhelf)					
- Contract		0.0.0	Tomporocaro (Tun						
I .									

Observed Violations
Total # 2 Repeated # 0
Repeated # 0
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45:
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# TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information	
Establishment Name: Cracker Barrel #630	
Establishment Number: 605202293	
Comments/Other Observations	
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Additional Comments				
See last page for	additional con	nments.		
7 3				

<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: Cracker Barrel #630 Establishment Number: 605202293			
Comments/Other Observations (cont'd)			
dditional Comments (cont'd)			
See last page for additional comments.			

Establishment Information

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Establishment Name: Cracker Barrel #630							
Establishment Number #. 605202293							
Sources							
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Additional Comments							