

Establishment Name

Address

Risk Category

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Follow-up Required

Type of Establishment

O Farmer's Market Food Unit Remanent O Mobile

级 Yes O No

O Temporary O Seasonal Time in 08:30 AM AM / PM Time out 10:00; AM AM / PM

12/03/2021 Establishment # 605245738 Embargoed 0 Inspection Date

ERoutine O Follow-up O Complaint O Preliminary O Consultation/Other Purpose of Inspection О3

04

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	4 =in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		0
					Compliance Status	COS	R	WT
	IN	OUT	NA	NO	Supervision			
1	糕	0			Person in charge present, demonstrates knowledge, and performs duties		0	5
	IN	OUT	NA	NO	Employee Health			
2	$\mathbb{R}^{\mathbb{C}}$	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	0
	IN	OUT	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	X	0			Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	窓	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	Ä	0	0		Food separated and protected	0	0	4
14	0	X	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	×	0			Proper disposition of unsafe food, returned food not re-		0	2

Dream Events & Catering

200 Hill Avenue

Nashville

					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	黨	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	,
	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	243	0	0		Proper cold holding temperatures	0	0	5
21	250	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	X		Food additives: approved and properly used	0	0	5
26	0	28			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

trol the introduction of pathogens, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	Γ.
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	1
32	0	Plant food properly cooked for hot holding	0	0	Т
33	0	Approved thawing methods used	0	0	Т
34	0	Thermometers provided and accurate	0	0	г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	
	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	ŀ
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	·
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	
44	10	Gloves used properly	0	0	

pecti	on	R-repeat (violation of the same code provision		_	
		Compliance Status	cos	R	WT
	OUT	Utensiis and Equipment			_
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	1
47	0	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	ा	2
49	0	Plumbing installed; proper backflow devices	0	0	2
50	0	Sewage and waste water properly disposed	0	0	2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	T		
55	0	Current permit posted	ा	0	0
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	- 3%	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	- 0	0	

nd post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by fill C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320. ten (10) days of the date of th

12/03/2021

12/03/2021

Signature of Person In Charge

Date Signature of Environmental Health Specialist

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) 6153405620 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Dream Events & Catering
Establishment Number #: |605245738

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.	Т
'No Smoking' signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	\top
Sarage type doors in non-enclosed areas are not completely open.	\top
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	\vdash
Smoke from non-enclosed areas is inflitrating into areas where smoking is prohibited.	\vdash
Smoking observed where smoking is prohibited by the Act.	+

Warewashing Info						
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)			
Triple sink	QA	200				

Equipment Temperature				
Description	Temperature (Fahrenheit)			
Walk in cooler	34			
Walk in cooler	36			
Walk in freezer	0			
Walk in cooler	36			

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Spring mix prepping	Cold Holding	47
Sliced tomatoes prepping	Cold Holding	45
Goat cheese prepping	Cold Holding	44
Hamburger steak hot box	Hot Holding	169
Blue cheese walk in cooler	Cold Holding	41
Mozz cheese walk in cooler	Cold Holding	41
Beef walk in cooler	Cold Holding	39
Lobster dip walk in cooler	Cold Holding	37
Penne pasta walk in cooler	Cold Holding	37
Reffried beans walk in cooler	Cold Holding	38

Observed Violations					
Total # 2					
Repeated # ()					
14: Triple sink not set up properly, employee was rinsing, washing and not					
sanitizing dishes. Also, dish machine not reading chlorine					
CA- trained, set up triple sink properly					
26: 2 bottles of yellow chemical and 1 green chemical not labeled back of kitchen					
CA- labeled					

[&]quot;"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



Establishment Information

Establishment Name: Dream Events & Catering

Establishment Number: 605245738

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: (IN): An employee health policy is available.
- 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: Watched 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.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.

l۵٠

- 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.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: Temperatures recorded on report
- 20: Temperatures recorded on report
- 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:

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 Name: Dream Events & Catering					
Establishment Number: 605245738					
Comments/Other Observations (cont'd)					
Additional Comments (contin					
Additional Comments (cont'd)					
See last page for additional comments.					

Establishment Information

Establishment Information						
Establishment Name: Dream Events & Catering						
Establishment Number #: 605245738						
Sources	1					
Source Type:	Source:					
Source Type:	Source:					
_						
Source Type:	Source:					
Course Time:	Course					
Source Type:	Source:					
Course Type:	Source:					
Source Type:	Source.					
Additional Comments						
Additional Comments						