

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and phyaical objects into foods.

| GOOD RETAIL PRACTICES |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| OUI mintin cmplance |  |  | ced |  |  | R -repeat (vicision of fie same cose provision) |  |  |  |  |  |
|  |  |  | Cos $\mathrm{R}^{\text {R }}$ WT |  |  | Compliance Status |  |  | Cos\|l|l| R WT |  |  |
| OUT Safe Foed and Water |  |  |  |  |  | OUT Utensils and Equipment |  |  |  |  |  |
| 28 | 0 | Pasteunzed eggs used where required | 0 | O | 1 | 45 | 0 |  | 0 | 0 | 1 |
| 29 | 0 | Water and ice from approved soutce | 0 | 0 | 2 | 45 | 0 | constructed, and used |  |  |  |
| 30 | 0 | Varance obtained for specialized processing methods | 0 | 0 | 1 | 46 | 0 | Warewashing facilites, instaled, maintained, used, test strips | 0 | 0 | 1 |
| OUT Foed Tomperature Control |  |  |  |  |  |  | 0 | Warewashing factilses, instaled, maintained, used, test strips | 0 | O | 1 |
| 31 | 0 | Proper cooling methods used, adequate equipment for temperature control | 0 | 0 | 2 | 47 | 0 | Nonfood-contact surfaces clean | 0 | 0 | 1 |
|  | 0 |  |  | 0 |  |  | OUT | Physical Facillties |  |  |  |
| 32 | 0 | Plant food properly cooked for hot thoiding | 0 | O | 1 | 48 | 0 | Hot and cold water available, adequate pressure | 0 | O | 2 |
| 33 | 0 | Approved thawing methods used | 0 | 0 | 1 | 49 | 0 | Plumbing instalect proper backlow devices | 0 | 0 | 2 |
| 34 | 0 | Thermometers provided and accurate | 0 | 0 | 1 | 50 | 0 | Sewage and waste water properly disposed | 0 | 0 | 2 |
|  | OUT | Food Idontification |  |  |  | 51 | 0 | Todet facilites. properly constructed, supplied, cleaned | 0 | 0 | 1 |
| 35 | $\bigcirc$ | Food properly labeled, original container, required records avalable | 0 | 0 | 1 | 52 | 0 | Gartagefrefuse properly disposect, facilises maintained | 0 | 0 | 1 |
|  | OUT | Provention of Foed Contamination |  |  |  | 53 | 0 | Physical faciites instalied, maintained, and clean | 0 | 0 | 1 |
| 36 | $\bigcirc$ | Insects, rodents, and animals not present | 0 | 0 | 2 | 54 | 0 | Adequate ventilation and lighting, designated areas used | $\bigcirc$ | 0 | 1 |
| 37 | $\bigcirc$ | Contamination prevented during food preparation, storage \& display | 0 | 0 | 1 |  | OUT | Administrative Items |  |  |  |
| 38 | 0 | Perscnal cleanliness | 0 | 0 | 1 | 55 | 0 | Current permit posted | 0 | 0 | 0 |
| 39 | 0 | Wiping cloens, properly used and stored | 0 | 0 | 1 | 56 | 0 | Most recent inspection posted | 0 | 0 |  |
| 40 | 0 | Washing fruts and vegetables | 0 | 0 | 1 | Compliance Status |  |  | YES | NO | WT |
|  | OUT | Proper Use of Utensilis |  |  |  | Non-5mokers Protection Act |  |  |  |  |  |
| 41 | 0 | In-use utensis; properiy stored | 0 | 0 | 1 | 57 |  | Complance with TN Non-Smoker Protection Act |  | O |  |
| 42 | 0 | Utensils, equipment and linens, properly stored, dried, handled | 0 | 0 | 1 | 58 |  | Tobacco products offered for sale | 0 | 0 | 0 |
| 43 | 0 | Single-use/single-service articles; properly stored, used | 0 | 0 | 1 | 59 |  | If tobacco products are sold. NSPA surver completed | 0 | 0 |  |
| 44 |  | lovers used procel |  |  |  |  |  |  |  |  |  |





[^0] 04/09/2024

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

| Establishment Information |
| :--- |
| Establahment Name: Legends Lounge |
| Establahment: Number z: 605099907 |



| Warewashinq Info |  |  |  |  |
| :--- | :---: | :--- | :--- | :---: |
| Maohlne Name | sanitizer Type | PPM | Temperature ( Fahrenhelt) |  |
| Dish Machine | Chlorine | 0 |  |  |
|  |  |  |  |  |


| Equipment Temperature |  |
| :--- | :--- |
| Docoription | Temperaturo ( Fahrenhent) |
| WIC | 43 |
|  |  |


| Food Temperature | stato of Food | Temperaturo ( Fahrenheit) |
| :--- | :--- | :--- |
| Docoription |  |  |
|  |  |  |
|  |  |  |

14: Dish machine not sanitizing properly. Reading 0 ppm. PIC stated dishes will be used through main dishwasher in kitchen until fixed. Will return for 10 day follow-up.

## Establishment Information

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## Comments/Other Observations

1: (IN): ANSI Certified Manager present.
2: Employee health policy 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: Employees washing hands as required.
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.
15: (IN) No unsafe, returned or previously served food served.
16: (NA) No raw animal foods served.
17: (NA) No TCS foods reheated for hot holding.
18: Cooling not applicable at bar.
19: (NA) Establishment does not hot hold TCS foods.
20: Good cold holding.
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.
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: "No Smoking" signs or the international "No Smoking" symbol are conspicuously posted at every entrance.
58:
${ }^{* * S}$ 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.

[^1]Comments/Other Observations (cont'd)

Additional Comments (cont'd)

## Establishment Information

Establishment Name: Legends Lounge
Establishment Number \#. 605099907

## Sources

Source Type:

Source Type:
Water

Source Type:

Source Type:
Source:

Source Type:
Source:

## Additional Comments


[^0]:    
    Signature of Person in Charge 04/09/2024 Date Raequan signature of Envin? 単Neanspecalist

[^1]:    ${ }^{*}$ See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

