

Establishment Name

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Type of Establishment

Permanent O Mobile

1040 N. James Campbell Blvd Address

Jefferson's

Time in 12:14 PM AM / PM Time out 12:24: PM AM / PM

O Temporary O Seasonal

Columbia City

10/11/2021 Establishment # 605305554

Inspection Date Purpose of Inspection

O Routine

₩ Follow-up O Complaint O Preliminary

Embargoed 0

O Consultation/Other

SCORE

Number of Seats 80

Risk Category О3 04 Follow-up Required O Yes 疑 No ase Control and Prevention

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

status (IN, OUT, HA, HO) for ea

IN-in compliance OUT-not in compliance NA-not applicable NO-not observed						ed		0
	Compliance Status							WT
	IN	OUT	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	×	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	*	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	°
	IN	OUT	NA	NO	Preventing Centamination 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	×	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	Ħ	0	0	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT		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	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

	Compliance Status						n	** 1
	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	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	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	-XX		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

s to control the introduction of pathogens, chemicals, and physical objects into foods.

L PRACTICES

			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	1
29	0	Water and ice from approved source	0	0	-
30	0	Variance obtained for specialized processing methods	0	0	١.
	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	Ε.
34	0	Thermometers provided and accurate	0	0	Т
OUT Food Identification		Food Identification		_	
35	0	Food properly labeled; original container; required records available	0	0	-
	OUT	Prevention of Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	885	Contamination prevented during food preparation, storage & display	0	0	
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			
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	

		R-repeat (violation of the same code provision Compliance Status	COS	R	WT
	OUT	Utensils and Equipment			
45	0	Food and norifood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	100	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	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	Т		
55	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	۰
		Compliance Status	YES	NO	WT
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 100	0	_
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

any violations of risk factor items within ten (10) days may result in suspension of your sent permit, Items identified as constituting imminent health hazards shall be corrected in er and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a wr t. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. ithin ten (10) days of the date of th

10/11/2021

Signature of Person In Charge

Date Signature of Environmental Health Specialist

10/11/2021

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) 9315601182 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information								
Establishment Name: Jefferson's								
Establishment Number # 605305554								
	00000000							
NSPA Survey - To be	e 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 n	not require each pe	rson attempting to gain entry	to submit acceptable for	n of identification.				
"No Smoking" signs or the in	nternational "Non-8	moking" symbol are not cons	picuously posted at ever	y entrance.				
Garage type doors in non-en	nclosed areas are i	not completely open.						
Tents or awnings with remo	vable sides or vent	s in non-enclosed areas are r	not completely removed of	or open.				
Smoke from non-enclosed a	areas is infiltrating i	nto areas where smoking is p	rohibited.					
Smoking observed where sr	moking is prohibite	d by the Act.						
Warewashing Info								
Machine Nar	me	Sanitizer Type	PPM	Temperature (Fah	renhelt)			
		l .						
Equipment Temperat	ture							
Description	ure			Temperature (Fahi	renhelf)			
<u></u>								
Food Temperature								
Description			State of Food	Temperature (Fah	renhelt)			
I								
1								

Observed Violations
Total # 2 Repeated # 0
Repeated # ()
37:
47:
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information							
Establishment Name: Jefferson's							
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Comments/Other Observations	
2:	
3:	
4:	
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Ado	litional	Comment	s

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 Information	
Establishment Name: Jefferson's	
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Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
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Establishment Information								
Establishment Name: Jefferson's								
Establishment Number #: 605305554								
Sources								
Source Type:	Source:							
Source Type:	Source:							
Source Type:	Source:							
Source Type:	Source:							
Source Type:	Source:							
Additional Comments								