

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Pasta Galifi Remanent O Mobile Establishment Name Type of Establishment 480 Long Hollow Pike Ste C O Temporary O Seasonal Address Goodlettsville Time in 12:50 PM AM / PM Time out 01:30: PM AM / PM City 08/24/2023 Establishment # 605315843 Embargoed 0 Inspection Date O Follow-up Purpose of Inspection **K**Routine O Complaint O Preliminary O Consultation/Other

Number of Seats 16

Follow-up Required

O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IK, OUT, KA, HO) for each numbered item. For items marked O	T, mark COS or R for each Item as applicable	Deduct points for category or subcategory.)
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				Compliance Status	COS	R	WT	ΙL					Compliance St	atus	COS	R	WT
IN	OUT	NA	NO	Supervision				ш	IN		T NA	l N	Cooking and Reheat	ing of Time/Temperature			
610		-		Person in charge present, demonstrates knowledge, and	_			11	"	100	" "	Ή"	Control For S	efety (TCS) Foods			
羅	0			performs duties	0	0	5	l 14	6 0	10	70	18	Proper cooking time and te	emperatures	0	О	-
IN	OUT	NA	NO	Employee Health		_		1 1	17 O O O M Proper reheating procedures for hot holding		es for hot holding	0	0	,			
ЭX	0			Management and food employee awareness; reporting	0	0		1 🗆				T.	Cooling and Holding, I	Date Marking, and Time as		_	
窓	0	1		Proper use of restriction and exclusion	0	0	5	ш	IN	lou	T NA	N					
_	OUT	NA	NO	Good Hymlanic Practices	-	-	_	l la	. 0	10		14					
37	-	I No.	100.00		_		_			_	_						
8						18	5								ŏ	ŏ	
IN		NA			-		_					_				×	5
_	-	ne/s			_			ł⊬	1 00	۲	_	_	-roper date marking and d	isposition	-		
_	-					$\overline{}$	6	2	2 0	이 이	1 2	3 (Time as a public health co	ntrol: procedures and records	0	0	
巡	0	0	0		0	0	*	ΙĦ	IN	OU	T NA	I N	Consum	er Advisory		_	_
×	0	-			0	0	2	1 1	1	-	_	_	Consumer advisory provid	ed for raw and undercooked	$\overline{}$	$\overline{}$	_ ·
IN	OUT	NA	NO	Approved Source				1 l²	۹ ٥	' "	' #		ood		0	١	•
嵩	0				0	0	\Box	1 🗆	IN	OU	T NA	N	Highly Suscep	rtible Populations			
0	0	0	×	Food received at proper temperature	0	0	1	15	1	1	. 94		Dantourized Sends used: a	sahihitad fands nat affasad	$\overline{}$	$\overline{}$	-
×	0			Food in good condition, safe, and unadulterated	0	0	5	۱Ľ	١,٠	' "	' "	· III	rasteurized roods used, pr	ronibited loods not offered	_	ľ	•
0	0	310	0		0	0		ΙП	IN	OU	T NA	N	Chr	emicals			
IN	OUT		NO.		_		_	1 12	- 0			+	and additions appeared	and eronady used	_	_	_
-	-		NO		_		-								~	×	5
-		_			_		-	ł≝	-	_	_	L			_		_
5%	0	19			0	0		1 H	IN	100	N/	, N		**		_	
涎	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	2	7 0	0	×			specialized process, and	0	0	5
		N OUT N O	IN OUT NA	IN OUT NA NO	IN OUT NA NO Supervision	Compliance Status	IN OUT NA NO Supervision O O O	Compliance Status	Compliance Status	IN OUT NA NO Proper use of restriction and exclusion IN OUT NA NO Proper use of restriction and exclusion IN OUT NA NO Proper use of restriction and exclusion IN OUT NA NO IN OUT NA NO IN OUT NA NO IN OUT NA NO Proper use, nose, and mouth IN OUT NA NO IN OUT NA NO Preventing Centamination IN OUT NA NO Preventing Centamination IN OUT NA NO IT OUT NA NO IN OUT NA NO IT	IN OUT NA NO Person in charge present, demonstrates knowledge, and performs duties In Out NA NO Proper use of restriction and exclusion In Out NA NO Proper eating, disting, drinking, or tobacco use In Out NA NO Property washed In Out NA NO In Out NA NO Property washed In Out NA NO In Out NA NO Property washed In Out NA NO In Out NA	IN OUT NA NO Supervision IN OUT NA NO Person in charge present, demonstrates knowledge, and performs duties IN OUT NA NO Employee Health IN OUT NA NO Proper use of restriction and exclusion IN OUT NA NO Proper use of restriction and exclusion IN OUT NA NO Good Hygienic Practices IN OUT NA NO IN OUT NA NO Proper eating, tasting, drinking, or tobacco use IN OUT NA NO IN OUT NA NO Preventing Contamination by Hands IN OUT NA NO Preventing Contamination by Hands IN OUT NA NO Preventing Contamination by Hands IN OUT NA NO IN OUT NA NO Preventing Contamination by Hands IN OUT NA NO IN OUT NA NO Preventing Contamination by Hands IN OUT NA NO IN OUT NA NO Preventing Contamination by Hands IN OUT NA NO IN OUT NA NO IN OUT NA NO Proper disposition, safe, and unadulterated O O S IN OUT NA NO Protection from Contamination IN OUT NA NO IN OUT NA	IN OUT NA NO Supervision IN OUT NA NO Supervision IN OUT NA NO Person in charge present, demonstrates knowledge, and performs duties IN OUT NA NO Employee Health IT O O O	N OUT NA NO Supervision Supervision NA NO Supervision Supervision NA NO Supervision Supervision	N OUT NA NO Supervision Supervision N OUT NA NO Supervision N OUT NA NO	IN OUT NA NO Supervision Supervision	IN OUT NA NO Supervision Supervision

			GOO	D R	ч.	UL I	PRA	TIC	ES			
		OUT=not in compliance COS=corre	ected o	n-site	duri	ng int	spection	m	R-repeat (violation of the same code provision)			
		Compliance Status	COS	R	WT] [Compliance Status	COS	R	WT
	OUT	Safe Food and Water				1 [OUT		Utensiis and Equipment			
28	0	Pasteurized eggs used where required	0	0	1	1 [45	0	Food and nonfood-contact surfaces cleanable, properly designed,	0	0	•
29	0	Water and ice from approved source	0	0	2	1 L	40	•	constructed, and used	_	u	'
30		Variance obtained for specialized processing methods	0	0	1] [46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	4
	OUT	Food Temperature Control				3 L	40	•	warewashing lacinoes, installed, maintained, dised, test sorps		_	
31	0	Proper cooling methods used; adequate equipment for temperature	0	0	2	11	47	0	Nonfood-contact surfaces clean	0	0	1
31	١٠	control	١٠	١٧	l ²	11		OUT	Physical Facilities		_	
32	0	Plant food properly cooked for hot holding	0	0	1	11	48	0	Hot and cold water available; adequate pressure	0	ा	2
33	_	Approved thawing methods used	ō	Ō	1	11	49		Plumbing installed; proper backflow devices	ō	ō	2
34	_	Thermometers provided and accurate	0	0	1	11	50		Sewage and waste water properly disposed	0	0	2
	OUT		Ť	_		t t	51		Toilet facilities: properly constructed, supplied, cleaned	ō	ō	1
35	0	Food properly labeled; original container; required records available	0	О	1	11	52		Garbage/refuse properly disposed; facilities maintained	0	ō	1
-	OUT	Prevention of Feed Contamination	-	_	_	4 6	53	\sim	Physical facilities installed, maintained, and clean	0	0	1
_	-				_	4 6	-				$\overline{}$	
36	0	Insects, rodents, and animals not present	0	0	2	IJ	54	0	Adequate ventilation and lighting; designated areas used	0	0	1
37	0	Contamination prevented during food preparation, storage & display	0	0	1	Ш		OUT	Administrative Items			
38	0	Personal cleanliness	0	0	1	11	55	0	Current permit posted	0	ा	0
39	0	Wiping cloths; properly used and stored	0	0	1	11	56	0	Most recent inspection posted	0	0	v
40	0	Washing fruits and vegetables	0	0	1	11			Compliance Status	YES	NO	WT
	OUT	Proper Use of Utensils				1 [Non-Smokers Protection Act			
41		In-use utensils; properly stored	0	0	1	1 C	57 58		Compliance with TN Non-Smoker Protection Act	X	0	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1][58		Tobacco products offered for sale	0	0	0
43		Single-use/single-service articles; properly stored, used	0	0	1][59		If tobacco products are sold, NSPA survey completed	0	0	
44	0	Gloves used properly	0	0	1] ,						

ten (10) days of the date of the

Zgtulu Q 08/24/2023

08/24/2023

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 ****

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information						
Establishment Name: Pa	ısta Galifi					
Establishment Number #:	605315843					

ISPA Survey – To be completed if #57 is "No"	
ge-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are venty-one (21) years of age or older.	
ge-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	
No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	
arage type doors in non-enclosed areas are not completely open.	\vdash
ents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
moke from non-enclosed areas is inflitrating into areas where smoking is prohibited.	\vdash
moking observed where smoking is prohibited by the Act.	

Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)					
3 comp sink not set up	Chlorine							

Equipment Temperature						
Description Temperatu						
Ric	36					
Rif	0					
Gelato cooler	7					
Display cooler	38					

Food Temperature		
Description	State of Food	Temperature (Fahrenheit
Chicken	Cold Holding	38
Lasagna	Cold Holding	41
Chicken	Hot Holding	138
Chicken	Hot Holding	171
Meatball	Hot Holding	168

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Pasta Galifi Establishment Number: 605315843

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Health policy on file
- 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: Observed good hand washing
- 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: NO
- 17: (NO) No TCS foods reheated during inspection.
- 18: NO
- 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: (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:

58:

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 Information	
Establishment Name: Pasta Galifi	
Establishment Number: 605315843	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
Jee last page for additional commissions.	

Establishment Information								
	asta Galifi							
Establishment Number #:	605315843							
Sources				-				
Source Type:	Water	Source:	City					
Source Type:	Food	Source:	Restaurant depot					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Comme	ents							