

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit PARTY FOWL DONELSON Remanent O Mobile Establishment Name Type of Establishment 2620 LEBANON PK O Temporary O Seasonal Address Nashville Time in 11:46; AM AM / PM Time out 12:55; PM AM / PM

04/22/2024 Establishment # 605255677 Embargoed 0 Inspection Date

O Follow-up Purpose of Inspection **E**Routine O Complaint O Preliminary O Consultation/Other О3

Number of Seats 325 Risk Category Follow-up Required 级 Yes O No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

itus (IN, OUT, NA, NO) for e

| 115 | ¥ =in c | in compliance OUT=not in compliance NA=not applicable NO=not observed COS=corrected on-site during inspection | | | | | | | | | | | | | |
|-----|----------------|---|----|-------|--|--------------|---|---------------|----|-----|----|-----|----|-------------|----------------------------|
| | | | | | Compliance Status | COS R WT | | | | Com | | | | | |
| | IN | оит | NA | NO | Supervision | | | | | Τ | IN | оит | NA | NO | Cooking a |
| 1 | 0 | 0 | | | Person in charge present, demonstrates knowledge, and performs duties | 0 | 0 | 5 | ŀ | 16 | 0 | 0 | 0 | 0 | Proper cookin |
| ш | IN | OUT | NA | NO | Employee Health | | | | | | ŏ | ŏ | ŏ | ŏ | Proper reheat |
| 2 | 0 | 0 | | | Management and food employee awareness; reporting | 0 | 0 | | ı | | | | | | Cooling an |
| 3 | 0 | 0 | | | Proper use of restriction and exclusion | 0 | 0 | 5 | П | | IN | OUT | NA | NO | County and |
| | IN | OUT | NA | NO | Good Hygienic Practices | | | | 1 | 18 | 0 | 0 | 0 | 0 | Proper cooling |
| 4 | 0 | 0 | | 0 | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | 5 | 1 | 19 | 0 | 0 | 0 | 0 | Proper hot ho |
| 5 | 0 | 0 | | 0 | No discharge from eyes, nose, and mouth | 0 | 0 | l ° l | 1 | 200 | 0 | 0 | 0 | | Proper cold h |
| | IN | OUT | NA | NO | O Preventing Contamination by Hands | | | | 1 | 21 | 0 | 0 | 0 | 0 | Proper date n |
| 6 | 0 | 0 | | 0 | Hands clean and properly washed | 0 | 0 | | 1 | 22 | 0 | 0 | 0 | 0 | Time as a put |
| 7 | 0 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved | 0 | 0 | 5 | Ľ | 4 | • | _ | _ | _ | 1 1 1 1 0 0 0 p o |
| - | ~ | - | _ | _ | alternate procedures followed | - | - | - | Н | - | IN | OUT | NA | NO | 0 |
| 8 | 0 | OUT | NA | LIPS. | Handwashing sinks properly supplied and accessible Approved Source | 0 0 2 | | H | 23 | 0 | 0 | 0 | | Consumer ad | |
| | | | NA | NO | | _ | _ | - | Н | + | IN | OUT | NA | NO | food |
| 9 | 0 | 0 | _ | _ | Food obtained from approved source | 0 | 0 | l I | Щ | 4 | IN | 001 | NA | NO | HIŞ |
| 10 | 0 | 0 | 0 | 0 | · · · · · · · · · · · · · · · · · · · | 0 | 0 | 5 | H | 24 | 0 | l٥l | 0 | | Pasteurized for |
| 11 | 0 | 0 | | | Food in good condition, safe, and unadulterated | 0 | 0 | l ° I | Щ | 1 | _ | - | _ | | |
| 12 | _ | 0 | 0 | 0 | Required records available: shell stock tags, parasite destruction | 0 | 0 | | L | | IN | OUT | NA | NO | |
| | IN | OUT | NA | NO | Protection from Contamination | | | | | 25 | 0 | 0 | 0 | | Food additive |
| 13 | 0 | 0 | 0 | | Food separated and protected | 0 0 4 26 0 0 | | Toxic substan | | | | | | | |
| 14 | 0 | 0 | 0 | | Food-contact surfaces: cleaned and sanitized | 0 | 0 | 5 | | T | IN | OUT | NA | NO | Cenfer |
| 15 | 0 | 0 | | | Proper disposition of unsafe food, returned food not re- served | 0 | 0 | 2 | 2 | 27 | 0 | 0 | 0 | | Compliance v HACCP plan |

| | | | | | Compliance Status | COS | R | WT |
|----|----|-----|----|----|---|-----|---|----|
| | IN | оит | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | |
| 16 | 0 | 0 | 0 | 0 | Proper cooking time and temperatures | 0 | 0 | 5 |
| 17 | 0 | 0 | 0 | 0 | Proper reheating procedures for hot holding | 0 | 0 | ٠ |
| | IN | оит | NA | NO | Cooling and Holding, Date Marking, and Time as a Public Health Control | | | |
| 18 | 0 | 0 | 0 | 0 | Proper cooling time and temperature | 0 | 0 | |
| 19 | 0 | 0 | 0 | 0 | Proper hot holding temperatures | 0 | 0 | |
| 20 | 0 | 0 | 0 | | Proper cold holding temperatures | 0 | 0 | 5 |
| 21 | 0 | 0 | 0 | 0 | Proper date marking and disposition | 0 | 0 | • |
| 22 | 0 | 0 | 0 | 0 | Time as a public health control: procedures and records | 0 | 0 | |
| | IN | OUT | NA | NO | Consumer Advisory | | | |
| 23 | 0 | 0 | 0 | | Consumer advisory provided for raw and undercooked food | 0 | 0 | 4 |
| | IN | OUT | NA | NO | Highly Susceptible Populations | | | |
| 24 | 0 | 0 | 0 | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| | IN | оит | NA | NO | Chemicals | | | |
| 25 | 0 | 0 | 0 | | Food additives: approved and properly used | 0 | 0 | 5 |
| 26 | 0 | 0 | | | Toxic substances properly identified, stored, used | 0 | 0 | 3 |
| | IN | OUT | NA | NO | Conformance with Approved Procedures | | | |
| 27 | 0 | 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 | | | | |
| 28 | 0 | Pasteurized eggs used where required | 0 | 0 | Ι, |
| 29 | | Water and ice from approved source | 0 | 0 | |
| 30 | 0 | Variance obtained for specialized processing methods | 0 | 0 | Ľ |
| | 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 | 1 |
| 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 | 1 |
| 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 | 1 |
| 43 | 0 | Single-use/single-service articles; properly stored, used | 0 | 0 | Г |
| 44 | 0 | Gloves used properly | 0 | 0 | |

gnature of Person In Charge

| pecti | on | R-repeat (violation of the same code provision | Cos | Б | w |
|-------|-----|--|-----|----|-----|
| | OUT | Compliance Status | COS | к | w |
| | 001 | Utensiis and Equipment | - | _ | _ |
| 45 | 0 | Food and norfood-contact surfaces cleanable, properly designed, constructed, and used | 0 | 0 | 1 |
| 46 | 0 | Warewashing facilities, installed, maintained, used, test strips | 0 | 0 | |
| 47 | 0 | Nonfood-contact surfaces clean | 0 | 0 | |
| | OUT | Physical Facilities | | | |
| 48 | 0 | Hot and cold water available; adequate pressure | 0 | 0 | - |
| 49 | 0 | Plumbing installed; proper backflow devices | 0 | 0 | - ; |
| 50 | 0 | Sewage and waste water properly disposed | 0 | 0 | - : |
| 51 | 0 | Toilet facilities: properly constructed, supplied, cleaned | 0 | 0 | - |
| 52 | 0 | Garbage/refuse properly disposed; facilities maintained | 0 | 0 | |
| 53 | 0 | Physical facilities installed, maintained, and clean | 0 | 0 | |
| 54 | 0 | Adequate ventilation and lighting; designated areas used | 0 | 0 | |
| | OUT | Administrative Items | Т | | Ī |
| 55 | 0 | Current permit posted | 0 | 0 | _ |
| 56 | 0 | Most recent inspection posted | 0 | 0 | |
| | | Compliance Status | YES | NO | ٧ |
| | | Non-Smokers Protection Act | | | _ |
| 57 | | Compliance with TN Non-Smoker Protection Act | 0 | 0 | |
| 58 | | Tobacco products offered for sale | 0 | 0 | 1 |
| 59 | | If tobacco products are sold, NSPA survey completed | 0 | 0 | |

er. You have the right to request a h ten (10) days of the date of th 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320 Gutinebil (c/06

04/22/2024

Date Signature of Environmental Health Specialist

04/22/2024

**** 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.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: PARTY FOWL DONELSON
Establishment Number #: 605255677

| 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. | |
| "No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance. | |
| Garage type doors in non-enclosed areas are not completely open. | |
| Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open. | |
| Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited. | |
| Smoking observed where smoking is prohibited by the Act. | |

| Warewashing Info | | | | | |
|------------------|----------------|-----|---------------------------|--|--|
| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenhelt) | | |
| | | | | | |
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| Equipment Temperature | | | | | |
|-----------------------------|----|--|--|--|--|
| Description Temperature (F | | | | | |
| Reach In freezer | -5 | | | | |
| Salad cooler | 38 | | | | |
| Low boy cooler | 40 | | | | |
| Walk in cooler | 40 | | | | |

| Food Temperature | | |
|------------------------|---------------|--------------------------|
| Description | State of Food | Temperature (Fahrenheit) |
| Chicken | Cooking | 171 |
| Beans on steam table | Hot Holding | 149 |
| Chicken on steam table | Hot Holding | 149 |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Name: PARTY FOWL DONELSON

Establishment Information



| Establishment Number: 605255677 | |
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| Comments/Other Observations | |
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| Establishment Name: PARTY FOWL DONELSON | | |
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| Establishment Number: 605255677 | | |
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| Comments/Other Observations (cont'd) | | |
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Establishment Information

| Establishment Name: PARTY FOWL DONELSON | | | | |
|---|---------|--|--|--|
| Establishment Number #: 605255677 | | | | |
| Sources | | | | |
| Source Type: | Source: | | | |
| Source Type: | Source: | | | |
| Source Type: | Source: | | | |
| Source Type: | Source: | | | |
| Source Type: | Source: | | | |
| Additional Comments | | | | |
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Establishment Information