

City

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

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O Farmer's Market Food Unit Hooter Restaurant Establishment Name Permanent O Mobile Type of Establishment 730 NW Broad Street O Temporary O Seasonal Address Murfreesboro Time in 02:24 PM AM/PM Time out 03:25; PM AM/PM

02/02/2024 Establishment # 605242308 Embargoed 1 Inspection Date

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

Number of Seats 100 04 ease Control and Prevention rted to the Centers for Dis

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

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

Follow-up Required

级 Yes O No

| | N≃in • | compl | iance | | OUT=not in compliance NA=not applicable NO=not observe | ed | | C |)S=cc | rrecte | d on-si | te dur | ing ins | spection R=repeat (violation of the same code provi | | | | |
|----|--|-------|-------|-----|---|----|-------|----|-------|-------------------------------------|---------|--------|---|--|---|--|---|--|
| | Compliance Status CO | | | | | | R | WT | | Compliance Status | | | | | | | | |
| | IN | OUT | NA | NO | Supervision | | | | IN | | NA | NO | Cooking and Reheating of Time/Temperature | | | | | |
| Ε. | 0=2 | 1 | _ | _ | Person in charge present, demonstrates knowledge, and | _ | T_ | | | "" | 00. | 100 | | Control For Safety (TCS) Foods | | | | |
| יו | 羅 | 0 | | | performs duties | 0 | 0 | 5 | 16 | 嵩 | 0 | 0 | 0 | | | | | |
| | | | | NO | | | | | 17 | 0 | 0 | 0 | 3% | Proper reheating procedures for hot holding | | | | |
| 2 | DX. | 0 | | | Management and food employee awareness; reporting | 0 | 0 | | | | | | | Cooling and Holding, Date Marking, and Time as | | | | |
| 3 | 黨 | 0 | | | Proper use of restriction and exclusion | 0 | 0 | ٥ | | IN | OUT | NA | NO | a Public Health Control | | | | |
| | IN | OUT | NA | NO | Good Hygienic Practices | | | | 18 | 0 | 0 | 0 | × | Proper cooling time and temperature | | | | |
| 4 | X | 0 | | | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | | 15 | _ | 0 | 0 | 0 | Proper hot holding temperatures | | | | |
| 5 | 黨 | 0 | 1 | | No discharge from eyes, nose, and mouth | 0 | 0 | ľ | 20 | _ | 黨 | 0 | | Proper cold holding temperatures | | | | |
| | IN OUT NA NO Preventing Contamination by Hands | | | | | 21 | OOO B | | 126 | Proper date marking and disposition | | | | | | | | |
| 6 | 黨 | 0 | | 0 | Hands clean and properly washed | 0 | 0 | | 22 | 0 | 0 | X | 0 | Time as a public health control: procedures and records | | | | |
| 7 | 級 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved | 0 | 0 | 5 | | | | _ | 1 | 1 | _ | | _ | |
| | - | | _ | | alternate procedures followed | | | | | IN | OUT | NA | NO | | | | | |
| 8 | | 0 | | THE | Handwashing sinks properly supplied and accessible | 0 | 0 | 2 | 23 | × | ΙoΙ | 0 | | Consumer advisory provided for raw and undercooked | | | | |
| - | _ | _ | N.A | NO | | - | | _ | | - | | | | food | | | | |
| 9 | | 0 | | | Food obtained from approved source | 0 | 0 | | | IN | OUT | NA | NO | Highly Susceptible Populations | | | | |
| 10 | | 0 | | 120 | Food received at proper temperature | 0 | 0 | ١ | 24 | 0 | 0 | 333 | | Pasteurized foods used; prohibited foods not offered | | | | |
| 11 | × | 0 | | | Food in good condition, safe, and unadulterated | 0 | 0 | 5 | | | Ľ | | | r dated aced roods dated, promoted roods not offered | | | | |
| 12 | 0 | 0 | × | 0 | Required records available: shell stock tags, parasite destruction | 0 | 0 | | | IN | OUT | NA | NO | Chemicals | | | | |
| | _ | OUT | _ | NO | Protection from Contamination | | | | 25 | | 0 | -XX | | Food additives: approved and properly used | | | | |
| 13 | 黛 | 0 | 0 | | Food separated and protected | 0 | 0 | 4 | 26 | 黨 | 0 | | | Toxic substances properly identified, stored, used | | | | |
| 14 | × | 0 | 0 |] | Food-contact surfaces: cleaned and sanitized | 0 | 0 | 5 | | IN | OUT | NA | NO | Conformance with Approved Procedures | | | | |
| 15 | × | 0 | | | Proper disposition of unsafe food, returned food not re- served | 0 | 0 | 2 | 27 | 0 | 0 | × | | Compliance with variance, specialized process, and HACCP plan | | | | |

Good Retail Practices are preventive med sures to control the introduction of pathogens, chemicals, and physical objects into foc

PRACTICES

| | | OUT=not in compliance COS=con | ected or | 1-site | du |
|----|-----|--|----------|--------|----------|
| | | Compliance Status | cos | | _ |
| | OUT | Safe Food and Water | | _ | _ |
| 28 | 0 | Pasteurized eggs used where required | 0 | 0 | г |
| 29 | 0 | Water and ice from approved source | 0 | 0 | |
| 30 | 0 | Variance obtained for specialized processing methods | 0 | 0 | <u> </u> |
| | 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 | Ε. |
| 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 | Г |
| 44 | 10 | Gloves used properly | 0 | 0 | |

| pecti | 2011 | R-repeat (violation of the same code provision) Compliance Status | cos | R | W |
|-------|------|--|-----|----|-----|
| | OUT | Utensils and Equipment | 1 | | |
| 45 | M | 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 | - |
| | OUT | Physical Facilities | _ | | |
| 48 | 0 | Hot and cold water available; adequate pressure | ा | 0 | Γ: |
| 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 | | | |
| 55 | 0 | Current permit posted | ा | 0 | П |
| 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 | 100 | 0 | |
| 58 | | Tobacco products offered for sale | 0 | 0 | ١ ١ |
| 59 | | If tobacco products are sold, NSPA survey completed | 0 | 0 | |

icuous manner. You have the right to request a h hin ten (10) days of the date of th

19 02/02/2024

Date Signature of Environmental Health Specialist

02/02/2024

Signature of Person In Charge

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: Hooter Restaurant
Establishment Number #: 605242308

| 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. | 1 |
| 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 (Fahrenheit) | | | | | |
| Dish machine | CI | 50 | | | | | | |
| 3 comp not set up | CI | | | | | | | |
| | | | | | | | | |

| Equipment Temperature | | | | | |
|-----------------------|---------------------------|--|--|--|--|
| Description | Temperature (Fahrenheit) | | | | |
| Batter cooler | 37 | | | | |
| Cooler drawers | 37 | | | | |
| Pc | 39 | | | | |
| Wic | 38 | | | | |

| Food Temperature | | | | | | |
|--|---------------|---------------------------|--|--|--|--|
| Description | State of Food | Temperature (Fahrenheit) | | | | |
| Raw shrimp In water | Cold Holding | 56 | | | | |
| Raw shrimp | Cold Holding | 447 | | | | |
| Chicken tenders in lower part of batter cooler | Cold Holding | 38 | | | | |
| Cooked burger | Cooking | 190 | | | | |
| Burgers in cooler drawer | Cold Holding | 40 | | | | |
| Chili on steamer | Hot Holding | 145 | | | | |
| Wings in wic | Cold Holding | 39 | | | | |
| Chicken tenders in wic | Cold Holding | 39 | | | | |
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| Observed Violations | | | | | | |
|---|--|--|--|--|--|--|
| Total # 2 | | | | | | |
| Repeated # () | | | | | | |
| 20: Raw shrimp in water and container of shrimp not in water both located in top of batter cooler. Discarded shrimp in water and other container was placed in wic. Cos by discussing using ice packs and keeping lid closed. | | | | | | |
| 45: Cutting board on pc has dark knife grooves. | | | | | | |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Hooter Restaurant Establishment Number: 605242308

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Ehp 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: 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: In range
- 17: (NO) No TCS foods reheated during inspection.
- 18: Observed no tcs foods in cooling process during inspection
- 19: In range
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 22: (NA) No food held under time as a public health control.
- 23: Verified advisory with designated menu items.
- 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 Name: Hooter Restaurant | |
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| Establishment Number: 605242308 | |
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| Comments/Other Observations (cont'd) | |
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| See last page for additional comments. | |
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Establishment Information

| Establishment Information | | | | | | | | |
|--|--------------|---------|-------------|--|--|--|--|--|
| Establishment Name: Hooter Restaurant | | | | | | | | |
| THE RESIDENT OF THE PARTY OF TH | 05242308 | | | | | | | |
| Commission of the Commission o | - | | | | | | | |
| Sources | | | | | | | | |
| | | | | | | | | |
| Source Type: | Food | Source: | Cheney bros | | | | | |
| | | | | | | | | |
| Source Type: | Water | Source: | City | | | | | |
| _ | | | | | | | | |
| Source Type: | | Source: | | | | | | |
| O T | | 0 | | | | | | |
| Source Type: | | Source: | | | | | | |
| Causaa Turaa | | Source: | | | | | | |
| Source Type: | | Source. | | | | | | |
| A daliti a mad O a mama anta | | | | | | | | |
| Additional Comments | | | | | | | | |
| Murfreesboro@Hooters | com | | | | | | | |
| Warneesboro@riooters | | | | | | | | |
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