

Establishment Name

Address

City

TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

Type of Establishment

O Farmer's Market Food Unit

SCORE

COS R WT

0 0

0 0

0 0

0 0

0 0

0 0

Remanent O Mobile

O Temporary O Seasonal Time in 08:40 AM AM / PM Time out 09:15; AM

11/08/2023 Establishment # 605304913 Embargoed 0 Inspection Date

TownePlace Suites Nashville Midtown

1500 Charlotte Avenue

Nashville

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

Number of Seats 75 Risk Category О3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

		_					_							
	¥=in c	compli	ance		OUT=not in compliance NA=not applicable NO=not observe	_			\$=c:	orrecte	ed on-s	ite duri	ing ins	pection R=repeat (violation of the same code provision
					Compliance Status	cos	R	WT						Compliance Status
Г	IN	OUT	NA	NO	Supervision						оит		NO	Cooking and Reheating of Time/Temperature
⊢					Doresta in charge property demonstrates impulsed as and	-	_	-		IN	1001	NA	NO	Control For Safety (TCS) Foods
1	器	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	6 0	0	300	0	Proper cooking time and temperatures
Н	IN	OUT	NA	NO	Employee Health				17	7 0	-	8		Proper reheating procedures for hot holding
2	X		101		Management and food employee awareness; reporting	0	О	$\overline{}$	н	Ť	Ť	Ŭ	-	Cooling and Holding, Date Marking, and Time as
L-		o			Proper use of restriction and exclusion	ō	0	5		IN	OUT	NA	NO	
Ľ	黨	_					U	Ш						a Public Health Control
	IN	OUT	NA	NO	Good Hygienic Practices				18	8 0	0	X	0	Proper cooling time and temperature
4	X	0			Proper eating, tasting, drinking, or tobacco use	0	0	5	15		0	0	0	Proper hot holding temperatures
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	Ľ	20	0.00	0	0		Proper cold holding temperatures
	_	OUT	NA	NO	Proventing Contamination by Hands				2	1 🕱	0	0	0	Proper date marking and disposition
6	黨	0		0	Hands clean and properly washed	0	0		22	2 3%	0	0	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				_	_	
Ŀ			ŭ	_	alternate procedures followed	_	_	\perp		IN	OUT	NA	NO	Consumer Advisory
8	X				Handwashing sinks properly supplied and accessible	0	0	2	23	3 0	lο	300		Consumer advisory provided for raw and undercooked
-		OUT	NA	NO	Approved Source	-		$\overline{}$		1	_			food
9	嵩	0			Food obtained from approved source	0	0	ı		IN	OUT	NA	NO	Highly Susceptible Populations
10	0	0	0	×	Food received at proper temperature	0	0	l . I	24	10	0	333		Pasteurized foods used; prohibited foods not offered
11	×	0	oxdot		Food in good condition, safe, and unadulterated	0	0] 5 [Ľ		Ľ	000		r astearized roods asea, promoted roods not oriered
12	0	0	Ж	0	Required records available: shell stock tags, parasite destruction	0	0	 		IN	OUT	NA	NO	Chemicals
	IN	OUT	NA	NO	Protection from Contamination				25	5 0	0	38		Food additives: approved and properly used
13	0	0	歐		Food separated and protected	0	0	4	20	夏	0			Toxic substances properly identified, stored, used
14	×	0			Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Conformance with Approved Procedures
15	涎				Proper disposition of unsafe food, returned food not re-	0	0	2	27	7 0	0	×		Compliance with variance, specialized process, and

			GOO	DD R	чγ.	IL PR	ACTIC	E3			
		OUT=not in compliance COS=com	ected o	n-site	durin	g inspec	ction	R-repeat (violation of the same code provision)			
		Compliance Status	COS	R	WT			Compliance Status	COS	R	WT
OUT Safe Food and Water		Safe Food and Water		OUT Utensils and Equipment		Utensils and Equipment					
28 29		Pasteurized eggs used where required Water and ice from approved source	8	8		45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
30		Variance obtained for specialized processing methods	ŏ	ŏ	1	1 🗀	+-	The state of the state	+	-	-
	OUT		_	-	÷	46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
31	0	Proper cooling methods used; adequate equipment for temperature	6	6	2	47	0	Nonfood-contact surfaces clean	0	0	1
31	ľ	control	l۳	١٣	١.		OUT	Physical Facilities			
32	0	Plant food properly cooked for hot holding	0	0	1	48	0	Hot and cold water available; adequate pressure	0	О	2
33	0	Approved thawing methods used	0	0	1	49	0	Plumbing installed; proper backflow devices	0	0	2
34	0	Thermometers provided and accurate	0	0	1	50	0	Sewage and waste water properly disposed	0	О	2
	OUT	Food Identification				51	0	Toilet facilities: properly constructed, supplied, cleaned	- 0	0	1
35	0	Food properly labeled; original container; required records available	0	0	1	52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
	OUT	Prevention of Food Contamination				53	0	Physical facilities installed, maintained, and clean	0	0	1
36	0	Insects, rodents, and animals not present	0	0	2	54	0	Adequate ventilation and lighting; designated areas used	0	0	1
37	335	Contamination prevented during food preparation, storage & display	0	0	1		оит	Administrative Items			
38	0	Personal cleanliness	0	0	1	55		Current permit posted	70	0	
39	0	Wiping cloths; properly used and stored	0	0	1	56	1 180	Most recent inspection posted	0	0	1 °
40	0	Washing fruits and vegetables	0	0	1	1 [Compliance Status	YES	NO	WT
	OUT	Proper Use of Utensils		_	_	1 🗀		Non-Smokers Protection Act		_	
41	0	In-use utensils; properly stored	0	0	1	57		Compliance with TN Non-Smoker Protection Act	X	0	
42		Utensils, equipment and linens; properly stored, dried, handled	0	0	1	58		Tobacco products offered for sale	0		
43	0	Single-use/single-service articles; properly stored, used	0	0		59		If tobacco products are sold, NSPA survey completed	0	0	1
44	0	Gloves used properly	0	0	1	1					

n (10) days of the date of the

11/08/2023

Signature of Person In Charge

**** 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

11/08/2023

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: TownePlace Suites Nashville Midtown Restaurant

Establishment Number #: |605304913

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)
High temp dishmachine			160

Equipment Temperature	
Description	Temperature (Fahrenheit)
Reach in freezer	-1
Reach in freezer	-1
Prep cooler	42
Reach in cooler	38

Cold Holding	41
Cold Holding	
Cold Holding	43
Hot Holding	160
Cold Holding	39
Cold Holding	36
Cold Holding	38
	Cold Holding Cold Holding

Observed Violations
Total # 2
Repeated # ()
37: Apples stored in the front not individually wrapped nor have tongs for
customers to grab apples
56: Current inspection report not posted

[&]quot;"See page at the end of this document for any violations that could not be displayed in this space.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Number: 605304913

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Written illness policy is available and practiced
- 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 employees wash hands between tasks
- 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.

- 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: No raw animal products
- 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: (NA) No raw animal foods served.
- 17: (NO) No TCS foods reheated during inspection.
- 18: No cooling sone in this establishment
- 19: On temp logs
- 20: On temp logs
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: Policy being followed
- 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.

omments/Other Obs	ervations (cont'd)	
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dditional Comments	additional comments.	
ee last page loi	auditional Comments.	

Establishment Information

stablishment Inform	alle in a sun a		
stablishment Name: To stablishment Number #:		ville Midtown Restaurant	
stabilistiment (vulnibe) #.	605304913		
ources			
Source Type:	Water	Source:	City
Source Type:	Food	Source:	Us foods, creation garden
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	
Additional Commer	nts		