

Inspection Date

Risk Category

## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

HOLIDAY INN EXPRESS BREAKFAST

Type of Establishment

O Farmer's Market Food Unit Remanent O Mobile

1111 AIRPORT CENTER DR Address

O Temporary O Seasonal

O Yes 疑 No

Nashville City

Time in 11:40; AM AM / PM Time out 12:15; PM AM / PM

05/23/2024 Establishment # 605261317

Embargoed 0

Purpose of Inspection Routine ∰ Follow-up O Complaint

O Preliminary O Consultation/Other

Follow-up Required

Number of Seats 65

# FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

IN-in compliance OUT-not in compliance NA-not applicable NO-not observed					d		0	
	Compliance Status							WT
	IN	OUT	NA	NO	Supervision			
1	鼷	0			Person in charge present, demonstrates knowledge, and erforms duties		0	5
	IN	OUT	NA	NO	Employee Health			
2	D)(	0			Management and food employee awareness; reporting	0	0	
3	×	0			roper use of restriction and exclusion		0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	黨	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	X	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	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
		OUT	NA	NO	Protection from Contamination			
13	0	0	窓		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

Compliance Status							R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	寒	Proper cooking time and temperatures	0	0	5
17	8	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	Proper cooling time and temperature	0	0	
19	×	0	0	0	Proper hot holding temperatures	0	0	
20	243	0	0		Proper cold holding temperatures	0	0	5
21	0	0	0	200	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	333		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	3%		Food additives: approved and properly used	0	0	5
26	黨	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

#### to control the introduction of pathoge is, 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	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	r
33	0	Approved thawing methods used	0	0	
34	×	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 Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	328	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	100	Single-use/single-service articles; properly stored, used	0	0	Г
44		Gloves used properly	-	0	

pect	un I	R-repeat (violation of the same code provision)  Compliance Status	Cos	B	W
	OUT	Utensils and Equipment	1000	-	
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	125	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	2%	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	0	П
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	V
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	١ ١
59		If tobacco products are sold, NSPA survey completed	0	0	

conspicuous manner. You have the right to request a he 8-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. n ten (10) days of the date of the

05/23/2024

Date Signature of Enviro

05/23/2024

\*\*\*\* 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. ) 6153405620 Please call ( to sign-up for a class.

RDA 629

Date

### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information						
Establishment Information						
Establishment Name: HOLIDAY INN EXPRESS BREAKFAST						
Establishment Number #: [605261317						
NSPA Survey - To be completed if	#57 in #Ma#					
Age-restricted venue does not affirmatively rest		facilities at all times to per	mons who are			
twenty-one (21) years of age or older.	rict access to its buildings or	lacilities at all times to per	isons who are			
Age-restricted venue does not require each per	son attempting to gain entry	to submit acceptable form	of identification.			
"No Smoking" signs or the international "Non-S	moking" symbol are not cons	picuously posted at every	entrance.			
Garage type doors in non-enclosed areas are n	ot completely open.					
Tents or awnings with removable sides or vents	s in non-enclosed areas are n	ot completely removed or	open.			
Smoke from non-enclosed areas is infiltrating in	nto areas where smoking is p	rohibited.				
Smoking observed where smoking is prohibited	by the Act.					
Warewashing Info						
Machine Name	Sanitizer Type	PPM	Temperature ( Fah	renheit)		
Equipment Temperature						
Description			Temperature (Fah	renheit)		
Food Temperature						
Description		State of Food	Temperature (Fah	renhelt)		

Observed Violations	
Total # 5 Repeated # 0	
lepeated # ()	
4:	
4: 97:	
3:	
6:	
6: 3:	
"See name at the and of this document for any violations that could not be displayed in this space.	

<sup>&#</sup>x27;See page at the end of this document for any violations that could not be displayed in this space.

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stablishment Information	
stablishment Name: HOLIDAY INN EXPRESS BREAKFAST	
stablishment Number: 605261317	

Comments/Other Observations	
Comments/Other Observations  1: 2: 3: 4: 5: 6: 7: 8: Soap supplied at hand sinks 9: 10: 11: 12: 13: 14: Sanitizer supplied at back triple sink 15: 16: 17: 18: 19: 20: 21: 22: 23: 24: 25: 26: 27: 57: 58:	
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5:	
<u>6</u> :	
7:	
lo. Soap Supplied at Harid SirikS	
10·	
11:	
12:	
13:	
14: Sanitizer supplied at back triple sink	
15: 16:	
10. 17·	
18·	
19:	
20:	
21:	
22:	
23:	
24. 25·	
26:	
27:	
57:	
58:	

Additional Comme	ents
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See last page for additional comments.

<sup>\*\*\*</sup>See page at the end of this document for any violations that could not be displayed in this space.

<sup>\*\*\*</sup>See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: HOLIDAY INN EXPRESS BREAKFAST		
Establishment Number: 605261317		
Comments/Other Observations (cont'd)		
Additional Comments (cont'd)		
See last page for additional comments.		

Establishment Information

Establishment Name: HOLIDAY INN EXPRESS BREAKFAST					
Establishment Number #: 605261317					
Sources					
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Source Type:	Source:				
Additional Comments					

Establishment Information