



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

88

Establishment Name IT'Z A PHILLY THING LLC Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile  
Address 7609 HIGHWAY 70S ☐ Temporary ☐ Seasonal  
City NASHVILLE Time in 02:40 PM AM / PM Time out 03:40 PM AM / PM  
Inspection Date 05/08/2024 Establishment # 605262299 Embargoed 0  
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other  
Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☒ Yes ☐ No Number of Seats 38

**Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.**

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

| IN=In compliance OUT=not in compliance NA=not applicable NO=not observed COS=corrected on-site during inspection R=repeat (violation of the same code provision) |    |     |    |    | Compliance Status  |  |  | COS R WT |  |   |
|--|----|-----|----|----|--|--|--|----------|--|---|
|  |    |     |    |    | Supervision  |  |  |          |  |   |
| 1  | IN | OUT | NA | NO | Person in charge present, demonstrates knowledge, and performs duties                  |  |  |          |  | 5 |
|  |    |     |    |    | Employee Health  |  |  |          |  |   |
| 2  | IN | OUT | NA | NO | Management and food employee awareness, reporting                                      |  |  |          |  | 5 |
| 3  | IN | OUT | NA | NO | Proper use of restriction and exclusion  |  |  |          |  |   |
|  |    |     |    |    | Good Hygienic Practices  |  |  |          |  |   |
| 4  | IN | OUT | NA | NO | Proper eating, tasting, drinking, or tobacco use                                       |  |  |          |  | 5 |
| 5  | IN | OUT | NA | NO | No discharge from eyes, nose, and mouth  |  |  |          |  |   |
|  |    |     |    |    | Preventing Contamination by Hands  |  |  |          |  |   |
| 6  | IN | OUT | NA | NO | Hands clean and properly washed  |  |  |          |  | 5 |
| 7  | IN | OUT | NA | NO | No bare hand contact with ready-to-eat foods or approved alternate procedures followed |  |  |          |  |   |
| 8  | IN | OUT | NA | NO | Handwashing sinks properly supplied and accessible                                     |  |  |          |  | 2 |
|  |    |     |    |    | Approved Source  |  |  |          |  |   |
| 9  | IN | OUT | NA | NO | Food obtained from approved source   |  |  |          |  |   |
| 10   | IN | OUT | NA | NO | Food received at proper temperature  |  |  |          |  | 5 |
| 11   | IN | OUT | NA | NO | Food in good condition, safe, and unadulterated  |  |  |          |  |   |
| 12   | IN | OUT | NA | NO | Required records available: shell stock tags, parasite destruction                     |  |  |          |  |   |
|  |    |     |    |    | Protection from Contamination  |  |  |          |  |   |
| 13   | IN | OUT | NA | NO | Food separated and protected   |  |  |          |  | 4 |
| 14   | IN | OUT | NA | NO | Food-contact surfaces: cleaned and sanitized   |  |  |          |  | 5 |
| 15   | IN | OUT | NA | NO | Proper disposition of unsafe food, returned food not re-served                         |  |  |          |  | 2 |
|  |    |     |    |    | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods               |  |  |          |  |   |
| 16   | IN | OUT | NA | NO | Proper cooking time and temperatures   |  |  |          |  | 5 |
| 17   | IN | OUT | NA | NO | Proper reheating procedures for hot holding  |  |  |          |  |   |
|  |    |     |    |    | Cooling and Holding, Date Marking, and Time as a Public Health Control                 |  |  |          |  |   |
| 18   | IN | OUT | NA | NO | Proper cooling time and temperature  |  |  |          |  | 5 |
| 19   | IN | OUT | NA | NO | Proper hot holding temperatures  |  |  |          |  |   |
| 20   | IN | OUT | NA | NO | Proper cold holding temperatures   |  |  |          |  |   |
| 21   | IN | OUT | NA | NO | Proper date marking and disposition  |  |  |          |  |   |
| 22   | IN | OUT | NA | NO | Time as a public health control: procedures and records                                |  |  |          |  |   |
|  |    |     |    |    | Consumer Advisory  |  |  |          |  |   |
| 23   | IN | OUT | NA | NO | Consumer advisory provided for raw and undercooked food                                |  |  |          |  | 4 |
|  |    |     |    |    | Highly Susceptible Populations   |  |  |          |  |   |
| 24   | IN | OUT | NA | NO | Pasteurized foods used; prohibited foods not offered                                   |  |  |          |  | 5 |
|  |    |     |    |    | Chemicals  |  |  |          |  |   |
| 25   | IN | OUT | NA | NO | Food additives: approved and properly used   |  |  |          |  | 5 |
| 26   | IN | OUT | NA | NO | Toxic substances properly identified, stored, used                                     |  |  |          |  |   |
|  |    |     |    |    | Conformance with Approved Procedures   |  |  |          |  |   |
| 27   | IN | OUT | NA | NO | Compliance with variance, specialized process, and HACCP plan                          |  |  |          |  | 5 |

**Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.**

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

Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous manner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this report. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge Tommy Eubanks Date 05/08/2024 Signature of Environmental Health Specialist Tommy Eubanks Date 05/08/2024

\*\*\*\* Additional food safety information can be found on our website, <http://tn.gov/health/article/eh-foodservice> \*\*\*\*

## Establishment Number #: 605262299

## Smoking observed where smoking is prohibited by the Act.

| Machine Name     | Sanitizer Type | PPM | Temperature ( Fahrenheit) |
|------------------|----------------|-----|---------------------------|
| Manual dish sink | QA             | 150 |                           |

| Description  | Temperature ( Fahrenheit) |
|--------------|---------------------------|
| Deep freezer | -12                       |
| Deep freezer | 20                        |
| Deep freezer | 0                         |
| Deep freezer | 0                         |

| Description                             | State of Food | Temperature ( Fahrenheit) |
|---|---------------|---------------------------|
| Steak in prep cooler dated 5/7          | Cold Holding  | 43                        |
| Steak in reach in cooler prepped 1 hour | Cooling       | 74                        |
| Steak in reach in cooler dated 5/7      | Cold Holding  | 39                        |

### Observed Violations

Total # 6

Repeated # 0

8: No paper towels at the hand sink. CA- Paper towels were provided.

14: Several dirty knives are stored on the magnet rack. CA- Knives were taken to the triple sink.

35: Two unlabeled ingredient bins containing a white powder.

45: Heavy ice build-up inside several deep freezers. Fridge #2 door gasket is damaged.

49: The sprayer hose, at the triple sink, hangs below the flood rim of the sink.

51: The employee restroom door is not self-closing.

TENNESSEE DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
FOOD INSPECTION DATA



**Establishment Information**

Establishment Name: IT'Z A PHILLY THING LLC

Establishment Number : 605262299

**Comments/Other Observations**

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Employee Health Policy is present.
- 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: Employees wash hands.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 9: Food source: PFG
- 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.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: No food was cooked during the inspection.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: Food temps listed.
- 19: (NO) TCS food is not being held hot during inspection.
- 20: Food temps listed.
- 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:

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

**Additional Comments**

***See last page for additional comments.***

\*\*\*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: IT'Z A PHILLY THING LLC

Establishment Number : 605262299

**Comments/Other Observations (cont'd)****Additional Comments (cont'd)*****See last page for additional comments.***



### Establishment Information

Establishment Name: IT'Z A PHILLY THING LLC

|                         |           |
|-------------------------|-----------|
| Establishment Number #: | 605262299 |
|-------------------------|-----------|

## Sources

|              |      |
|--------------|------|
| Source Type: | Food |
|--------------|------|

Source: PFG

Source Type:

Source:

Source Type:

Source:

Source Type:

Source:

Source Type:

Source:

### ***Additional Comments***