



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE  
**95**

Establishment Name Craft Bistro & Bar Type of Establishment  Farmer's Market Food Unit  
 Permanent  Mobile  
Address 711 Union Street  
 Temporary  Seasonal  
City Nashville Time in 12:55 PM AM / PM Time out 01:30 PM AM / PM  
Inspection Date 01/24/2022 Establishment # 605245163 Embargoed 3  
Purpose of Inspection  Routine  Follow-up  Complaint  Preliminary  Consultation/Other  
Risk Category  1  2  3  4 Follow-up Required  Yes  No Number of Seats 20

**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.)

Compliance Status					COS	R	WT
IN	OUT	NA	NO				
<b>Supervision</b>							
1	<input checked="" type="radio"/>	<input type="radio"/>					5
<b>Employee Health</b>							
2	<input checked="" type="radio"/>	<input type="radio"/>					5
3	<input checked="" type="radio"/>	<input type="radio"/>					5
<b>Good Hygienic Practices</b>							
4	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>				5
5	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				5
<b>Preventing Contamination by Hands</b>							
6	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				5
7	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				5
8	<input checked="" type="radio"/>	<input type="radio"/>					2
<b>Approved Source</b>							
9	<input checked="" type="radio"/>	<input type="radio"/>					5
10	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				5
11	<input checked="" type="radio"/>	<input type="radio"/>					5
12	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>				5
<b>Protection from Contamination</b>							
13	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>				4
14	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>				5
15	<input checked="" type="radio"/>	<input type="radio"/>					2

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

### GOOD RETAIL PRACTICES

Compliance Status					COS	R	WT
OUT							
<b>Safe Food and Water</b>							
28	<input type="radio"/>						1
29	<input type="radio"/>						2
30	<input type="radio"/>						1
<b>Food Temperature Control</b>							
31	<input type="radio"/>						2
32	<input type="radio"/>						1
33	<input type="radio"/>						1
34	<input type="radio"/>						1
<b>Food Identification</b>							
35	<input type="radio"/>						1
<b>Prevention of Food Contamination</b>							
36	<input type="radio"/>						2
37	<input type="radio"/>						1
38	<input type="radio"/>						1
39	<input type="radio"/>						1
40	<input type="radio"/>						1
<b>Proper Use of Utensils</b>							
41	<input type="radio"/>						1
42	<input type="radio"/>						1
43	<input type="radio"/>						1
44	<input type="radio"/>						1

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, 4-5-320.

Signature of Person In Charge [Signature] Date 01/24/2022  
Signature of Environmental Health Specialist [Signature] Date 01/24/2022

\*\*\*\* 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



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**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 ( Fahrenheit)
3 comp sink not set up High temp dish machine			161

**Equipment Temperature**

Description	Temperature ( Fahrenheit)
Two door freezer	-4
Tall cooler	34

**Food Temperature**

Description	State of Food	Temperature ( Fahrenheit)
Queso cheese	Cold Holding	40

**Observed Violations**

Total # 2

Repeated # 0

21: Steak meat and nacho cheese with out date of 12/30 and today Is 1/24/  
embargo 1lb

21: Guac with out date Of 11-10 and today is 1-24/embargo 1lb



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**Comments/Other Observations**

- 1: (IN): PIC has Active Managerial Control of food systems in FSE.
- 2: (IN): An employee health policy 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: (N.O.) No food workers present at the time of inspection.
- 6: (NO) No workers present during inspection.
- 7: (NO) No food workers present during the inspection.
- 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: (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: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.
- 19: (NO) TCS food is not being held hot during inspection.
- 20: See logs
- 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***

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***Comments/Other Observations (cont'd)***

***Additional Comments (cont'd)***

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

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**Sources**

Source Type: Food Source: Palmers

Source Type: Source:

Source Type: Source:

Source Type: Source:

Source Type: Source:

**Additional Comments**