

Lebanon

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Days Inn Breakfast Permanent O Mobile Establishment Name Type of Establishment 822 S. Cumberland Str O Temporary O Seasonal

Time in 10:52 AM AM / PM Time out 10:57: PM AM / PM 03/23/2022 Establishment # 605242120 Embargoed 0 Inspection Date

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

Number of Seats 18 Risk Category О3 04 Follow-up Required O Yes 疑 No

10	e in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed			S=cor	recte	d on-si	te di
匚	_		_		Compliance Status	cos	R	WT				_
	IN	OUT	NA	NO	Supervision					IN	оит	N.A
1	0	0			Person in charge present, demonstrates knowledge, and	0	0	5	40			_
ш	IN	OUT		NO	performs duties	-		_	16		0	0
		OUT	NA	NO	Employee Health	-	~	-	17	0	9	0
2	0	0			Management and food employee awareness; reporting	0	0	5		IN	оит	NA
3	0	0			Proper use of restriction and exclusion	0	0	l °		IN	001	PEA
	IN	OUT	NA	NO	Good Hygienic Practices				18	0	0	0
4	0	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19	0	0	0
5	0	0		0	No discharge from eyes, nose, and mouth	0	0	l ° I	20	0	0	0
	IN	OUT	NA	NO	Preventing Contamination by Hands	Preventing Contamination by Hands			21	0	0	0
6	0	0		0	Hands clean and properly washed	0	0		22	0	0	0
7	0	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5		_	_	_
Ŀ	_		_	_	alternate procedures followed	_				IN	OUT	NA
8	0	0			Handwashing sinks properly supplied and accessible	0	0	2	23	0	lol	0
		OUT	NA	NO	Approved Source	\vdash	_	=		_	_	_
9	0	0			Food obtained from approved source	0	0			IN	OUT	NA
10	0	0	0	0	Food received at proper temperature	0	0		24	0	0	0
11	0	0			Food in good condition, safe, and unadulterated	0	0	5	24	_	_	_
12	0	0	0	0	Required records available: shell stock tags, parasite	0	0	1		IN	оит	NA
	_		•	_	destruction	_	_	щ		-		-
ш	IN	OUT	NA	NO	Protection from Contamination	L.	_		25		0	0
13	0	0	0		Food separated and protected	0	0	4	26	_	0	
14	0	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA
15	0	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	0

ш					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	0	Proper reheating procedures for hot holding	0	0	Ů
	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	0	0	0		Proper cold holding temperatures	0	0	5
21	0	0	0	0	Proper date marking and disposition	0	0	*
22	0	0	0	0	Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory			
23	0	0	0		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	0		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT	NA	NO	Chemicals			
25	0	0	0		Food additives: approved and properly used	0	0	5
26	0	0			Toxic substances properly identified, stored, used	0	0	Ľ
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	0		Compliance with variance, specialized process, and HACCP plan	0	0	5

to control the introduction of pathoge ns, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=com			
		Compliance Status	cos	R	М
	OUT	Caro i con amo i i mon			
28	0	Pasteurized eggs used where required	0	0	
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	1
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	
34	0	Thermometers provided and accurate	0	0	г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	Γ
	OUT	Prevention of Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	0	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	Г
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	Г
43	100	Single-use/single-service articles; properly stored, used	0	0	Т
44		Gloves used properly	0	0	$\overline{}$

pecti		R-repeat (violation of the same code provision Compliance Status	cos	R	W
	OUT	Utensiis and Equipment	1000		
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	ŀ
46	题	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	П
49	0	Plumbing installed; proper backflow devices	0	0	
50	0	Sewage and waste water properly disposed	0	0	
51	725	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	0	Г
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	٧
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 100	0	
58		Tobacco products offered for sale	0	0	١.
59		If tobacco products are sold, NSPA survey completed	0	0	

us manner. You have the right to request a h en (10) days of the date of the

03/23/2022

Date Signature of Environmental Health Specialist

03/23/2022 Date

**** 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) 6154445325 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information									
Establishment Name: Days Inn Breakf									
Establishment Number #: 605242120									
NSPA Survey - To be completed if									
Age-restricted venue does not affirmatively resi twenty-one (21) years of age or older.	trict access to its buildings o	r facilities at all times to	persons who are						
Age-restricted venue does not require each per	rson attempting to gain entry	to submit acceptable f	orm of identification.						
"No Smoking" signs or the international "Non-S	moking" symbol are not con	spicuously posted at ev	ery entrance.						
Garage type doors in non-enclosed areas are r	not completely open.								
Tents or awnings with removable sides or vent	s in non-enclosed areas are	not completely remove	d or open.						
Smoke from non-enclosed areas is infiltrating in	nto areas where smoking is	prohibited.							
Smoking observed where smoking is prohibited	d by the Act.								
ļ									
Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fat	renhelt)					
Equipment Temperature									
Description			Temperature (Fah	renhelt)					
			_						
Food Temperature									
Description		State of Food	Temperature (Fah	renhelt)					
			1						

Observed Violations
Total # 3 Repeated # 0
Repeated # ()
43: 46: 51:
46:
51:
III San page at the and of this document for any violations that could not be displayed in this space.

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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Name: Days Inn Breakfast

Establishment Information



omments/Other Observations	
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dditional Comments	
See last page for additional comments.	
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^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space

Establishment Number: 605242120	Establishment Name: Days Inn Breakfast				
Additional Comments (cont'd)	Establishment Number: 605242120				
Additional Comments (cont'd)					
Additional Comments (cont'd)	Comments/Other Observations (cont'd)				
See last page for additional comments.					
	See last page for additional comments.				

Establishment Information

Establishment Information							
Establishment Name: Days Inn Breakfast							
Establishment Number #: 605242120							
Sources							
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Additional Comments							
Priority violations corrected same day							