

Establishment Name

Purpose of Inspection

Address

# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Type of Establishment

Remanent O Mobile

O Temporary O Seasonal

Hendersonville City

**K**Routine

154 Bonita Pkwy

Time in 04:21; PM AM / PM Time out 04:41; PM AM / PM

05/02/2024 Establishment # 605321955 Inspection Date

O Follow-up

Half Batch Public Room

Embargoed 0 O Preliminary

O Consultation/Other

Number of Seats 141

SCORE

Risk Category О3 Follow-up Required O Yes 疑 No

O Complaint

#### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	IN-in compliance OUT-not in compliance NA-not applicable NO-not observed							С
	Compliance Status							WT
	IN	OUT	NA	NO	Supervision			
1	盔	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN		NA	NO	Employee Health			
2	$\square X$	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion		0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	*	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	0	0		300	Hands clean and properly washed	0	0	
7	0	0	0	×	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×				Handwashing sinks properly supplied and accessible		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	20	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	
	IN	OUT	NA	NO	Protection from Contamination			
13	Ŕ	0	0		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						cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	×	0	Proper cooking time and temperatures	0	0	5
17	0	0	X	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	Proper cooling time and temperature	0	0	
19	0	0	文	0	Proper hot holding temperatures	0	0	
20	0	0	×		Proper cold holding temperatures	0	0	5
21	0	0	380	0	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	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	黨	0			Toxic substances properly identified, stored, used	0	0	•
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

### ns, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=corr	_	_	_
		Compliance Status	cos	R	WT
	OUT	Caro reconstruction			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	2
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	2
32	0	Plant food properly cooked for hot holding	0	0	1
33	0	Approved thawing methods used	0	0	1
34	0	Thermometers provided and accurate	0	0	1
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	1
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	2
37	0	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	1
39	0	Wiping cloths; properly used and stored	0	0	1
40	0	Washing fruits and vegetables	0	0	1
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	1
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1
43	0	Single-use/single-service articles; properly stored, used	0	0	1
44	0	Gloves used properly	0	0	1

pecti	on	R-repeat (violation of the same code provision		_	
		Compliance Status	cos	R	W
	OUT	Utensils and Equipment	Щ.	_	_
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	0	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	-
49	0	Plumbing installed; proper backflow devices	0	0	- 2
50	0	Sewage and waste water properly disposed	0	0	- 2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
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	П
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 3%	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request a h n (10) days of the date of the

05/02/2024

05/02/2024

Signature of Person In Charge

Date

Date

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



Establishment Name: Half Batch Public Room								
Establishment Number #:  605321955								
Age-restricted venue does not ammatively 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.								
ot completely open.								
in non-enclosed areas are n	ot completely removed or	open.						
to areas where smoking is pr	rohibited.							
by the Act.								
Santitus Tuna	DDM	Tamazatura / Esh	balfi					
		remperature ( Fan	renneiti					
Chlorine	50							
		Temperature ( Fahr	renhelt)					
	State of Food	Temperature ( Fahi	renhelt)					
	is "No" ict access to its buildings or ion attempting to gain entry in noking" symbol are not consist completely open. In non-enclosed areas are not areas where smoking is pro-	ict access to its buildings or facilities at all times to per on attempting to gain entry to submit acceptable form noking' symbol are not conspicuously posted at every of completely open.  In non-enclosed areas are not completely removed or to areas where smoking is prohibited.  by the Act.  Sanittzer Type PPM	ict access to its buildings or facilities at all times to persons who are on attempting to gain entry to submit acceptable form of identification.  noking' symbol are not conspicuously posted at every entrance.  It completely open.  In non-enclosed areas are not completely removed or open.  To areas where smoking is prohibited.  by the Act.  Sanitzer Type PPM Temperature ( Fah					

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



### Establishment Information

Establishment Name: Half Batch Public Room

Establishment Number: 605321955

### Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Employee health policy 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: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.
- 6: No food prep
- 7: No food prep
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: Food from approved source
- 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: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: No cooling
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: (NA) Establishment does not cold hold TCS foods.
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 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:

## Additional Comments

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: Half Batch Public Room	
Establishment Number: 605321955	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Information							
	alf Batch Public Room						
Establishment Number #:	605321955						
Sources							
Source Type:	Food	Source:	Sam's club				
Source Type:	Water	Source:	City water				
Source Type:		Source:					
Source Type:		Source:					
Source Type:		Source:					
Additional Comme	nts						