TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

							_									O Fermer's Merket Food	500	1 (1
Establishment Name				n Nashville Air	port Centur	y Pl	ace			Ту;	e of	Establi	ishme	E Parmanant OMa	bile	10		L	J		
Address		1 Century Bl	Va					_					O Temporary O Se	asonal							
City					Nashville		Time in	07	7:5	<u>0</u>	۱M	_ A	M/P	M Ti	me o	ut 08:15: AM A	M / PM				
Inspection Date 03/14/2023 Establishment # 605314911				1		_	Embe	argoe	d C)											
Purp					CRoutine	O Follow-up	O Complaint			- O Pr					Cor	nsultation/Other					
Risk	C-1	0.000			01	8072	03			04				E	-	up Required O Yes	67 No	Number of S	inate	42	
1005	001		*		ors are food pres	paration practices	and employee		vior	8 mo				y repo	ortec	to the Centers for Dise	ase Control a	and Prevent		_	
				88 0	ontributing facto			_		_						control measures to pre	event illness o	ər injury.		_	
			uric de	algaa	ted compliance statu											INTERVENTIONS ach liom as applicable. Deduc	t points for calleg	ory or subcate	gory.		
IN-	in ci	ompi	ance		OUT=not in complian		NO=not observe)S=co	rrecte	d on-t	site duri	ing ins		iolation of the sam				
	IN	010	NA	NO	Comp	Superdalar		COS	R	WT		_	_			Compliance Stat Cooking and Reheating			cos	R	WT
\rightarrow	-		non	NO	Person in charge pr	Supervision resent, demonstrates I	knowledge, and					IN	001	NA	NO	Control For Saf					
	×		NA	NO	performs duties	Employee Health		0	0	5		00	8			Proper cooking time and tem Proper reheating procedures			0	읭	5
2	X,		-	1 110	Management and fo	ood employee awaren	ess; reporting	0			۲̈́	IN			-	Cooling and Holding, Da		d Time as	_		
$ \rightarrow $	×	0			Proper use of restri			0	0	°							aith Control				
	IN K		NA			d Hygienic Practic ng. drinking, or tobacc		0			18 19		8	<u>0</u> 夏		Proper cooling time and temp Proper hot holding temperatu			0	8	
5	2	0		0	No discharge from	eyes, nose, and mouth	h	ŏ	ŏ	5	20	25	0	0		Proper cold holding temperat	tures.		0	0	5
	N I	001	NA	NO O		ng Contamination b roperly washed	ly Hands	0	0		22	0	0	0 ※		Proper date marking and dis Time as a public health contr		nd records		0	
7	×	0	0	0	No bare hand conta alternate procedure	ect with ready-to-eat for s followed	ods or approved	0	0	5	-	IN	001			Consumer	-	id records	_	<u> </u>	
8			NA	NO	Handwashing sinks	properly supplied and Approved Source	l accessible	0	0	2	23	_	0	12		Consumer advisory provided food		ercooked	0	0	4
9 2	武	0			Food obtained from	approved source		0				IN	OUT	NA	NO	Highly Suscepti	ble Population				
	0 X		0		Food received at pr Food in good condi	oper temperature tion, safe, and unadult	erated	0	0	5	24	0	0	22		Pasteurized foods used; prof	hibited foods not	offered	0	0	5
	õ	ō	×	0		vailable: shell stock ta		ō	ō			IN	our	NA	NO	Chem	licals		_	-	
				NO	Protoc	tion from Contamir	ation					0	0	X		Food additives: approved an	d properly used		0	0	5
13 14			<u>家</u> 0	1	Food separated and Food-contact surface	d protected ces: cleaned and sanit	ized	8	0	4	26		0	r na	NO	Toxic substances properly id Conformance with A			0	<u> </u>	
15	_		Ť	1	Proper disposition of	of unsafe food, returne		-			27	-	-	8		Compliance with variance, sp			0	0	5
					served							-		1		HACCP plan				_	_
				Goo	d Retail Practic	ss are preventive	measures to co	ontrol	the	intr	oduc	tion	of	patho	gens	s, chemicals, and physic	al objects int	o foods.			
				0	T=not in compliance		COS=come	G00						8		Pursenant (violati	on of the same cod	to provision)			
	_		_		Comp	liance Status	000-0010	COS			Ē					Compliance St	atus	e provision)	COS	R	WT
28	_	001	_	leurize	Sate F ed eggs used where	required		0	0	1	4		O F	ood a	nd no	Utensils and Equi nfood-contact surfaces clean		signed,	0	0	
29	_				ice from approved sobtained for specialized	source ted processing methor	\$	0	00	2	\vdash	-	-			and used				\rightarrow	'
	_	OUT			Food Ten	nperature Control					4	_	-			g facilities, installed, maintain	ed, used, test str	ips -		0	1
31		o	Prop		oling methods used;	adequate equipment	for temperature	0	0	2	4	_	1 О Т	Vontoo	d-cor	Physical Facilit	ties		0	0	1
32	_				properly cooked for			8	0	1	4		-			water available; adequate pr			0		2
33	_		<u> </u>		thawing methods us eters provided and a			6	0	1	4	_	_			stalled; proper backflow device waste water properly dispose			0	0	2
	-	OUT	_			Identification					5	_	_			es: properly constructed, supp			0	0	1
35	_	0	Food	d prop		container; required re		0	0	1	5		-	-	·	use properly disposed; facilitie			0	0	1
36	-	001	Inse	ete re	dents, and animals	f Food Contaminati	on	0	0	2	5	_	-			lities installed, maintained, an ntilation and lighting; designa			-	0	1
	-							-	\vdash		F	-	-		10 10				_		-
37	_					ng food preparation, st	orage & display	0	0	1			UT			Administrative i	tems		-		
38	_	-			leanliness ths; properly used a	nd stored			0		5					nit posted inspection posted			0	0	0
40	_	0	_	hing f	ruits and vegetables	Use of Utensils		0	0	1		_	_			Compliance Sta Non-Smokers P			YES	NO	WT
41		0	In-us		nsils; properly stored	ł			0		5					with TN Non-Smoker Protect			X	्	
42	_					s; properly stored, drie les; properly stored, ut		0	0		5	8				ducts offered for sale oducts are sold, NSPA surver	y completed		0	0	0
44					ed properly				0												
																Repeated violation of an identic e. You are required to post the f					
mann	er ar	nd po	ost the	most	recent inspection repo	rt in a conspicuous man	ner. You have the rig	ght to n	eques							lling a written request with the C					
03/14/2023 03/14/2023																					
							4/2	Date													
oign	atul	eol	refs	son in		Additional for the	by information	het		Date											Cate
		-5					P								-	ealth/article/eh-foodservik inty health department.					
PH-22	657	(Rev	6-15)			e call (RD	XA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Hampton Inn Nashville Airport Century Place Breakfast Establishment Number #: 605314911

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)
Triple sink (not set up)	QA		

Equipment Temperature	
Description	Temperature (Fahrenheit)
Reach in freezer	0.5
Reach in cooler	35

State of Food	Temperature (Fahrenheit)
Cold Holding	42
Cold Holding	37
	Cold Holding

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Comments/Other Observations	
:	
:	
:	

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.

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Comments/Other Observations (cont'd)

Additional Comments (cont'd) See last page for additional comments.

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SourcesSource Type:FoodSource:SyscoSource Type:WaterSource:CitySource Type:Source:Source:Source Type:Source:Source:Source Type:Source:Source:

Additional Comments