



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

95

Establishment Name The Paper Mill Bar Type of Establishment ☒ Farmer's Market Food Unit
☒ Permanent ☐ Mobile
Address 4066 N Mt. Juliet Rd Ste B
☐ Temporary ☐ Seasonal
City Mount Juliet Time in 01:11 PM AM / PM Time out 01:30 PM AM / PM
Inspection Date 02/15/2024 Establishment # 605319840 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 _____

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									
	IN	OUT	NA	NO	Supervision																								
1	<input checked="" type="radio"/>	<input type="radio"/>			Person in charge present, demonstrates knowledge, and performs duties					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5														
	IN	OUT	NA	NO	Employee Health																								
2	<input checked="" type="radio"/>	<input type="radio"/>			Management and food employee awareness, reporting					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5														
3	<input checked="" type="radio"/>	<input type="radio"/>			Proper use of restriction and exclusion					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>															
	IN	OUT	NA	NO	Good Hygienic Practices																								
4	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	Proper eating, tasting, drinking, or tobacco use					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5														
5	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	No discharge from eyes, nose, and mouth					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>															
	IN	OUT	NA	NO	Preventing Contamination by Hands																								
6	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	Hands clean and properly washed					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5														
7	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>															
8	<input checked="" type="radio"/>	<input type="radio"/>			Handwashing sinks properly supplied and accessible					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	2														
	IN	OUT	NA	NO	Approved Source																								
9	<input checked="" type="radio"/>	<input type="radio"/>			Food obtained from approved source					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5														
10	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Food received at proper temperature					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>															
11	<input checked="" type="radio"/>	<input type="radio"/>			Food in good condition, safe, and unadulterated					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>															
12	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Required records available: shell stock tags, parasite destruction					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>															
	IN	OUT	NA	NO	Protection from Contamination																								
13	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Food separated and protected					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	4														
14	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Food-contact surfaces: cleaned and sanitized					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5														
15	<input checked="" type="radio"/>	<input type="radio"/>			Proper disposition of unsafe food, returned food not re-served					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	2														

Compliance Status										COS					R					WT				
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods																			
16	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper cooking time and temperatures					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5									
17	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper reheating procedures for hot holding					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>										
	IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control																			
18	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Proper cooling time and temperature					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5									
19	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper hot holding temperatures					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>										
20	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Proper cold holding temperatures					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>										
21	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper date marking and disposition					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>										
22	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Time as a public health control: procedures and records					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>										
	IN	OUT	NA	NO	Consumer Advisory																			
23	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Consumer advisory provided for raw and undercooked food					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	4									
	IN	OUT	NA	NO	Highly Susceptible Populations																			
24	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Pasteurized foods used; prohibited foods not offered					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5									
	IN	OUT	NA	NO	Chemicals																			
25	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Food additives: approved and properly used					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5									
26	<input type="radio"/>	<input checked="" type="radio"/>			Toxic substances properly identified, stored, used					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>										
	IN	OUT	NA	NO	Conformance with Approved Procedures																			
27	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Compliance with variance, specialized process, and HACCP plan					<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	5									

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

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

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 [Signature] Date 02/15/2024 Signature of Environmental Health Specialist [Signature] Date 02/15/2024

**** 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**



Establishment Information	
Establishment Name:	The Paper Mill Bar
Establishment Number #:	605319840

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)
Ecolab	Cl	100	

Equipment Temperature	
Description	Temperature (Fahrenheit)
Arctic air ric	37

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Milk	Cold Holding	39

Observed Violations

Total # 1

Repeated # 0

26: Spray bottles stored by dish machine not labeled. Relabeled during inspection

TENNESSEE DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
FOOD INSPECTION DATA



Establishment Information

Establishment Name: The Paper Mill Bar

Establishment Number : 605319840

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Discussed policy with pic
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (N.O.) No food workers present.
- 5: (N.O.) No food workers present at the time of inspection.
- 6: No employee in bar 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: See source info
- 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 food being cooled during inspection
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: See food temps
- 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.
- 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: The Paper Mill Bar

Establishment Number : 605319840

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

Establishment Information

Establishment Name: The Paper Mill Bar

Establishment Number #:	605319840
-------------------------	-----------

Sources

Source Type:	Food	Source:	US Foods, Creation Gardens
--------------	------	---------	----------------------------

Source Type:	Water	Source:	City
--------------	-------	---------	------

Source Type:	Source:
--------------	---------

Source Type:	Source:
--------------	---------

Source Type:	Source:
--------------	---------

Additional Comments