TENNESSEE DEPARTMENT OF HEALTH _ ____ ____

					FOOD SER	VICE ESTA	BL	ISH	IME	ENT	T IN	VSI	PEC	TIC	ON REPORT	SCO	RE			
Establishment Name			ne	Shuford's	BBQ										Farmer's Market Food Unit Ø Permanent O Mobile	9	Ç	2		
Address				Type of Establishment O motion Type of Establishment O Temporary O Seasonal									J							
			01	L:5	0 F	M	A	M/P	M Tir	ne ou	t 02:00; PM AM / PM									
Inspe	ectio	n Da	rte		09/21/2	021 Establishmer					Emba	-								
Purp				tion	ORoutine	● Follow-up	O Complaint			_	elimin				Cor	nsultation/Other				
Risk Category O1 122 O3						O 4				Fo	llow-	up Required O Yes 🕱 No	Number of S	eats	0					
		R														I to the Centers for Disease Cont control measures to prevent illn	rol and Prevent			
	FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS																			
IN	(Wark designated compliance status (IK, OUT, KA, NO) for each numbered Item. For items marked OUT, mark CO8 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)																			
_	_				Co	ompliance Status		cos	R		Ē					Compliance Status			R	WT
	-	-	NA	NO		Supervision ge present, demonstrate	s knowledge, and			_		IN	ουτ	NA	NO	Cooking and Reheating of Time/ Control For Safety (TCS)				
		O OUT	NA	NO	performs duties		÷ ·	0	0	5	16 17	00	00			Proper cooking time and temperatures Proper reheating procedures for hot hok	ting	00	8	5
2	X)	0			Management a	nd food employee awar			0	5	Ť	IN	олт		NO	Cooling and Holding, Date Markin	g, and Time as			
-	~ ~	O OUT	NA	NO		estriction and exclusion Good Hygionic Pract	ices	0	0	_	18	0	0	0	<u>X</u> 4	a Public Health Cents Proper cooling time and temperature	lo	0	0	
4	1	0		0	Proper eating, t	tasting, drinking, or toba	cco use	0	00	5	19		0	0		Proper hot holding temperatures		0	ŝ	
		OUT	NA	NO	Preve	rom eyes, nose, and mo enting Contamination						100			0	Proper cold holding temperatures Proper date marking and disposition		8	ŏ	5
_		0	-	0		nd properly washed contact with ready-to-eal	foods or approved	0	-	5	22	0	0	×	0	Time as a public health control: procedu	res and records	0	0	
8			0	0	alternate proce				0	2				NA	NO	Consumer Advisory Consumer advisory provided for raw an		-	_	
	IN I	OUT	NA	NO		Approved Source					23	0	0	黛	110	food		0	٥	4
		8	0	2		from approved source at proper temperature		8	0			IN	OUT	NA	NO	Highly Susceptible Popul				
11)	_	0	0-0			ondition, safe, and unad ds available: shell stock		0	0	5	24		0			Pasteurized foods used; prohibited food	s not offered	0	0	•
		0	XX NA	0	destruction	tection from Contan		0	0		25	IN O	OUT		NO	Chemicals Food additives: approved and properly u	cod	~		
13	2	0	0	no	Food separated	d and protected			0	4	26	黛	0			Toxic substances properly identified, sto	red, used	0	ŏ	5
14) 15)		0 0	0			urfaces: cleaned and sa ion of unsafe food, retur		0	0	5	27	IN O	OUT	NA	NO	Conformance with Approved I Compliance with variance, specialized p		0	0	5
10	~	•			served			0	U	-	21	•	<u> </u>	~		HACCP plan		•	~	0
				Go	d Retail Prac	ctices are preventiv	e measures to co	ontro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical object	s into foods.			
				0	T=not in complian	and a	COS=come	GOO					1CE	3		R-repeat (violation of the sar	on onde provision)			
	_			~	Co	mpliance Status	003-0016		R		Ē					Compliance Status		COS	R	WT
28	_	OUT	Past	euríz	ed eggs used wh	fe Feed and Water here required		0	0	1		_	UT F	ood ar	nd no	Utensils and Equipment nfood-contact surfaces cleanable, prope	fly designed.			
29 30		0	Wate	er and	d ice from approv		vode:	0	0	2	4	<u>`</u>				and used		0	0	1
		OUT			Food	Temperature Contro	1			_	40		-			g facilities, installed, maintained, used, to	st strips	0	0	1
31		0	Prop		oling methods us	sed; adequate equipmer	nt for temperature	0	0	2	43	_	O N UT	lontoo	d-con	Physical Facilities		0	0	1
32	_				property cooked				0		41	_				water available; adequate pressure		0		2
33	_		<u> </u>		thawing method eters provided a			8	0	1	49	_	_			stalled; proper backflow devices waste water properly disposed			0	2
		OUT				ood identification					5	_	-			s: properly constructed, supplied, cleane	d		ŏ	1
35	;	0	Food	i prog	perly labeled; orig	ginal container; required	records available	0	0	1	53	2 0	0	Sarbag	e/refi	use properly disposed; facilities maintain	ed	0	0	1
	_	OUT				on of Feed Contamin	ation				5	-+	-			lities installed, maintained, and clean			0	1
36	•	0	Insec	ots, n	odents, and anim	nals not present		<u> </u>	0	2	54	• •	0 A	vdequa	te ve	ntilation and lighting; designated areas u	sed	0	0	1
37	'	0	Cont	amin	ation prevented	during food preparation,	storage & display	0	0	1		0	UT			Administrative items				
38	_	-	-		cleanliness oths; properly us	ad and stored		0	0	1	54				-	nit posted inspection posted		0	2	0
40	_				fruits and vegeta				ŏ		٣		↓ 1 ⁿ	103610	JOHR 1	Compliance Status				WT
		OUT				per Use of Utensils										Non-Smokers Protection				
41					ensils; properly st equipment and lip	tored inens; properly stored, d	ried handled	8	8		5					with TN Non-Smoker Protection Act ducts offered for sale		8	읭	0
43		22	Sing	le-us	e/single-service a	articles; properly stored, d		0	0	1	5	5				oducts are sold, NSPA survey completed	1	ŏ		Ť
44		0	GIÓV	es us	sed properly			0	0	1										
																Repeated violation of an identical risk factor e. You are required to post the food service				
mann	er ar	nd po	st the	most	recent inspection	report in a conspicuous m	anner. You have the rig	to r	eques							lling a written request with the Commissione				
- opon	a 10	7	ort. T.C.A. sections 67-11-702 #64-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. 00/21/2021									_			7	/				

Ċ	09/21/2021	101	09/21/2021
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date
	**** Additional food safety information can be found on our	website, http://tn.gov/bealth/article/eh-foodservice ****	

	and a servery meeting meeting and	be really off car free one, free	partinger inconcentration in the assertion		
PH-2267 (Rev. 6-15)	Free food safety training classes	are available each month	nonth at the county health department.		
1192201 (1007. 0-10)	Please call () 4232098110	to sign-up for a class.	RDA 629	

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Shuford's BBQ Establishment Number #: 605215384

Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						

Equipment l'emperature	
Description	Temperature (Fahrenheit)

Food Temperature Decorption	State of Food	Temperature (Fahrenheit

·	
Observed Violations	
Total # 2	
Repeated # 0	
43:	
53:	

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Shuford's BBQ Establishment Number : 605215384

Comments/Other Observations

	of observations			
D: L: 2: 3: 4: 5: 6: 7: 3: 9: D: 1: 2: 3: 4: 5: 6: 7: 7: 3: 4: 5: 6: 7: 7: 3: 4: 5: 6: 7: 7: 8: 9: 7: 8: 9: 7: 8: 9: 7: 8: 9: 7: 8: 9: 7: 8: 9: 7: 8: 9: 7: 8: 9: 7: 8: 8: 8: 8: 8: 8: 8: 8: 8: 8: 8: 8: 8:				
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**See page at the e	4 441 4	*	 	

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: Shuford's BBQ

Establishment Number : 605215384

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Shuford's BBQ Establishment Number #. 605215384

Sources		
Source Type:	Source:	
Additional Comments		

#20 corrected.