TENNESSEE DEPARTMENT OF HEALTH

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APR			FOOD SERVICE ESTABLISHMENT INSPECTION REPORT								SCORE									
1		14	C. C.		Annalahaa	- #02002										O Fermer's Merket Food Unit	7			
Establishment Name		me	Applebees #82002										Ś							
Adx	Address			2890 Bart	lett Blvd						.,,				O Temporary O Seasonal					
City	City			Memphis Time in 01:55 PM AM / PM Time out 02:14: PM AM / PM																
Insp	xecti	on Da	rte		01/04/2	022 Establishment	60521923	4		_	Emba	argoe	d C	000						
Pur	pose	of In	spec	tion	ORoutine	鍋 Follow-up	O Complaint			O Pr			_	-	Co	nsultation/Other				
Ris	k Ca	tegor	y		O 1	302	O 3			O 4				Fo	low-	up Required 🕱 Yes O No	Number of Se	eats	51	
Г		R	isk													to the Centers for Disease Cont control measures to prevent illne		ion		
																INTERVENTIONS ach liem as applicable. Deduct points for o				
18	⊨ino	ompli		20910		iance NA=not applicable			10111							pection R*repeat (violation of th				
F	-	010		NO	Co	mpliance Status		COS	R	WT	F		-			Compliance Status Cooking and Reheating of Time/		cos	R	WT
1	IN O	-	NA	NO	Person in charg	Supervision e present, demonstrates	knowledge, and	0	0			IN	OUT	NA	NO	Control For Safety (TCS)	Foods			
Ľ		义 OUT	NA	NO	performs duties	Employee Health		-	0	5		00	00	0		Proper cooking time and temperatures Proper reheating procedures for hot hold	ing	0	응	5
2		0				nd food employee awarer		_	0	5		IN	OUT			Cooling and Holding, Date Marking	, and Time as	-	- 1	
3	_	OUT	NA	NO	,	estriction and exclusion Sood Hygienic Practic		0	0		18	0	0	0	Xii	a Public Health Centr Proper cooling time and temperature	ol	0	0	
4 5	X			0	Proper eating, t	asting, drinking, or tobac	co use	0	8	5		123		0		Proper hot holding temperatures		8	0	
	IN	OUT	NA	NO	Preve	om eyes, nose, and mou nting Contamination						*		8	0	Proper cold holding temperatures Proper date marking and disposition		ŏ	ŏ	5
6 7	0 災	<u>実</u> 0	0	0		d properly washed ontact with ready-to-eat f	oods or approved	0	0	5	22	0	0	×		Time as a public health control: procedu	es and records	0	0	
	23	0		-	alternate proces Handwashing s	inks properly supplied an	d accessible		0	2	23	IN X	001	NA	NO	Consumer Advisory Consumer advisory provided for raw and	i undercooked	0	0	
9	IN 家	OUT	NA	NO	Food obtained f	Approved Source rom approved source		0	0		E Co	IN	001	-	NO	food Highly Susceptible Popula	tions	~	9	-
10	0 X	0	0		Food received a	at proper temperature ondition, safe, and unadu	Itoratod		0	5	24	_	0	0		Pasteurized foods used; prohibited foods		0	0	5
12	0	0	X	0	Required record	is available: shell stock t		6	0	Ť		IN	OUT	NA	NO	Chemicals			_	
		OUT		NO		tection from Contami	ination					0		X		Food additives: approved and properly u	sed	0	0	5
13 14	8	<u>。</u> 溪		1	Food separated Food-contact se	I and protected urfaces: cleaned and san	itized	8	8	4	26	<u>実</u> IN	0	_	NO	Toxic substances properly identified, sto Conformance with Approved P		0	0	-
15	×	0			Proper dispositi served	on of unsafe food, return	ed food not re-	0	0	2	27	0	0	8		Compliance with variance, specialized p HACCP plan	rocess, and	0	0	5
				God	d Retail Prac	tices are preventive	measures to co	ontro	l the	intr	oduc	tion	of	atho	oens	, chemicals, and physical object	a into foods.		_	
										ETA			_							
				OU	T=not in compliant	e mpliance Status	COS=corre	icted o	n-site							R-repeat (violation of the sam Compliance Status		cos	R	WT
		OUT			Sat	e Food and Water			· · ·	_		0	TUK			Utensils and Equipment			~ 1	
	18 19	0	Wat	er and	id eggs used wh fice from approv	red source		0	00	2	4	5				nfood-contact surfaces cleanable, proper and used	ly designed,	0	0	1
-	10	O OUT	_	ance		ialized processing metho Temperature Control	ods	0	0	1	4	6	0 V	Varew	ashin	g facilities, installed, maintained, used, te	st strips	0	0	1
1	и	0	Prop		oling methods us	ed; adequate equipment	for temperature	0	0	2	4		道 NUT	Vonfoo	d-cor	ntact surfaces clean Physical Facilities		0	0	1
	2	0			properly cooked	for hot holding		0	0	1	4	8	0			water available; adequate pressure		0		2
	13 14	0			thawing method eters provided ar			0	00	1	4					stalled; proper backflow devices waste water properly disposed		_	8	2
Ľ		OUT	TINC		-	od identification		Ľ		<u> </u>	5					es: properly constructed, supplied, cleane	d		ŏ	1
1	5	0	Foo	d prog	erly labeled; orig	inal container; required r	ecords available	0	0	1	5	2	× 0	Sarbag	e/ref	use properly disposed; facilities maintaine	d	0	0	1
E		OUT	laco	che es		n of Food Contaminat	tion		0		5	-	_			lities installed, maintained, and clean		-	2	1
\vdash	6	0	-		dents, and anim			0	0	2	F	-	-	vaeque	ne ve	ntilation and lighting; designated areas u	ea	0	0	1
	17					during food preparation, s	torage & display	0	0	1			UT	Jumped	0.000	Administrative items		0		
	8 9	26	Wip	ng ck	leanliness ths; properly use			0		1						nit posted inspection posted		0	0	0
4	0	0			ruits and vegetal	bles		0	0	1			_			Compliance Status		YES	NO	WT
H	1	OUT	In-u	se ute	nsils; properly st	per Use of Utensils ored		0	0	1	5	7	- 2	Somplis	ance	Non-Smokers Protection / with TN Non-Smoker Protection Act		आ	01	
	2	25	Uter	vsils, e	quipment and lin	nens; properly stored, drie		0	0	1	5	8	1	obacc	o pro	ducts offered for sale		0	0	0
	13 14				s/single-service a ed properly	articles; properly stored, u	used	8	8	1	5	9	1	tobac	co pr	oducts are sold, NSPA survey completed		0	0	
1			-			a literature publicles and parts of								-	a second re	Reported algorithm of the latentic state in the	and a second barrier			-
serv	ice e	stabli	shme	nt per	nit. Items identified	as constituting imminent l	health hazards shall b	e corre	cted i	immed	iately	or op	eratio	ns shall	ceas	Repeated violation of an identical risk factor e. You are required to post the food service e	stablishment permit	in a c	onspi	icuour
mar repo	ner a et. T		st the sectio	most ns 68-	recent inspection 14-702, 68-14-706,	report in a conspicuous ma 68-14-708, 68-14-709, 68-14-	nner. You have the rig 711, 68-14-715, 68-14-7	prit to r 16, 4-5	eque: -320,	st a he	aring r	egard	sing th	is repo	rt by f	fling a written request with the Commissioner	within ten (10) days i	of the	date	of this
		//			1.							-				r				

NOC) l

01/04/2022				
Data				

Signature of Person In Charge

No VOL STOR

4/2022	\langle	Let	~
Date	Signature o	Environmental He	alth Specialist

01/04/2022

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**** Additional food safety information can be found on our website, http://tn.gow/health/article/eh-foodservice ****

PH-2267 (Rev. 6-15)	Free food safety training class	sses are available each mo	nth at the county health department.	RDA 629
(Nev. 0-15)	Please call () 9012229200	to sign-up for a class.	nDr 023

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Applebees #82002 Establishment Number #: 605219234

Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						

Equipment Temperature			
Description	Temperature (Fahrenheit)		
	· · · · · · · · · · · · · · · · · · ·		

ecoription	State of Food	Temperature (Fahrenheit

Observed Violations
Total # 15
Repeated # ()
1: Not correct due to #14 not correct.
6: Not correct due to #14.
14: Not correct, order for cutting boards are not in.
37:
38:
39:
42:
43:
44:
45:
47:
50:
52:
53:
55:

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Establishment Name: Applebees #82002 Establishment Number : 605219234

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.

Establishment Information

Establishment Name: Applebees #82002

Establishment Number : 605219234

Comments/Other Observations (cont'd)

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

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Sources		
Source Type:	Source:	

Additional Comments