



TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
99

Establishment Name: TOWNEPLACE SUITES MAIN KITCHEN
Address: 830 CONFERENCE DR
City: Goodlettsville
Inspection Date: 03/20/2024
Time in: 09:05 AM
Time out: 09:30 AM
Risk Category: 01
Number of Seats: 38

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.)

Table with 2 main columns: Supervision, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, Protection from Contamination, Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods, Cooling and Holding, Date Marking, and Time as a Public Health Control, Consumer Advisory, Highly Susceptible Populations, Chemicals, Conformance with Approved Procedures.

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

GOOD RETAIL PRACTICES

Table with 2 main columns: Safe Food and Water, Food Temperature Control, Food Identification, Prevention of Food Contamination, Proper Use of Utensils, Utensils and Equipment, Physical Facilities, Administrative Items, Compliance Status, Non-Smokers Protection Act.

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.

Signature of Person In Charge: [Signature] Date: 03/20/2024
Signature of Environmental Health Specialist: [Signature] Date: 03/20/2024



**Establishment Information**

Establishment Name: TOWNEPLACE SUITES MAIN KITCHEN  
 Establishment Number #: 605252414

**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)
Manual High temp	QA Water		165

**Equipment Temperature**

Description	Temperature ( Fahrenheit)
Upright freezer in kitchen	-3
One door upright refrigerator in kitchen ( no tcs foods )	31
Two door refrigerator in kitchen	35
Refrigerator in kitchen with candy bars	36

**Food Temperature**

Description	State of Food	Temperature ( Fahrenheit)
Eggs on warmer in serving area	Hot Holding	137
Ham on warmer in serving area	Hot Holding	141
Sausage biscuits on warmer in serving area	Hot Holding	138
Milk in refrigerator in serving area	Cold Holding	37
Yogurt in refrigerator in serving area	Cold Holding	36
Sausage in refrigerator in kitchen	Cold Holding	34
Milk in refrigerator in kitchen	Cold Holding	37

**Observed Violations**

**Total #** 3

**Repeated #** 0

- 34: No thermometer visible tpin refrigerator in dining area
- 55: Current permit not posted
- 56: Last inspection report notposted



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**Comments/Other Observations**

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Have a health policy
- 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: Observed employee wash hands when enter the kitchen
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: See food 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: No raw animal products
- 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: (NO) No TCS foods reheated during inspection.
- 18: No colling is done
- 19: See food temperature chart
- 20: See food temperature chart
- 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.
- 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:

\*\*\*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.

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***Comments/Other Observations (cont'd)***

***Additional Comments (cont'd)***

***See last page for additional comments.***

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**Sources**

Source Type: Water

Source: City

Source Type: Food

Source: Sysco

Source Type:

Source:

Source Type:

Source:

Source Type:

Source:

**Additional Comments**