

# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

71

Cherries Restaurant

Address
Address
City

Cherries Restaurant

Type of Establishment

Type of Establishment

Type of Establishment

Type of Establishment

O Mobile

O Temporary

O Seasonal

O Seasona

Purpose of Inspection MRoutine O Follow-up O Complaint O Preliminary O Consultation/Other

Risk Category O1 St2 O3 O4 Follow-up Required St Yes O No Number of Seats 121

lisk 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

consistence OUT-not in compliance NA-not applicable NO-not observed COS-corrected on-site during inspection Represent (violation of the same code provision)

10	<b>e</b> in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		С
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	0	Ħ			erson in charge present, demonstrates knowledge, and erforms duties.		0	5
	IN	OUT	NA	NO	Employee Health			
2	ЭK	0			Management and food employee awareness; reporting	0	0	
3	冥	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	0	寒		0	Hands clean and properly washed	0	0	
7	氮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	0	26			Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	0	凝	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	M	0			Proper disposition of unsafe food, returned food not re-	0	0	2

ш	Compliance Status					COS	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	-	0	0	黨	Proper cooking time and temperatures	0	0	5
17	0	0	0	X	Proper reheating procedures for hot holding	0	0	Ů
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	×	Proper cooling time and temperature	0	0	
19		120	0	0	Proper hot holding temperatures	0	0	
20		0	0		Proper cold holding temperatures	0	0	5
21	0	25	0	0	Proper date marking and disposition	0	0	*
22	0	0	×	0	Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory			
23	0	0	×		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT			Chemicals			
25		0	<b>X</b>		Food additives: approved and properly used	0	0	5
26	0	*			Toxic substances properly identified, stored, used	0	0	Ľ
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

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

			GOO		
		OUT=not in compliance COS=com			
		Compliance Status	cos	R	W
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	2
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	2
32	0	Plant food properly cooked for hot holding	0	0	1
33	0	Approved thawing methods used	0	0	1
34	0	Thermometers provided and accurate	0	0	1
	OUT Food Identification				
35	0	Food properly labeled; original container; required records available	0	o	1
	OUT	Prevention of Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	2
37	335	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	1
39	0	Wiping cloths; properly used and stored	0	0	1
40	0	Washing fruits and vegetables	0	0	1
	OUT	Proper Use of Utensils			
41	30	In-use utensils; properly stored	0	0	1
42	10	Utensils, equipment and linens; properly stored, dried, handled	0	ō	1
43		Single-use/single-service articles; properly stored, used	ō	ō	1
44		Gloves used properly	ŏ	ŏ	1

Signature of Person In Charge

specti		R-repeat (violation of the same code provision Compliance Status	COS	R	W
	OUT	Utensils and Equipment	1000		
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	٦
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	١.
47	0	Nonfood-contact surfaces clean	0	0	-
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	-
49	0	Plumbing installed; proper backflow devices	0	0	-:
50	0	Sewage and waste water properly disposed	0	0	- 2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	١ ١
53	2%	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items			
55	0	Current permit posted	0	0	Г
56	0	Most recent inspection posted	0	0	١,
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	0	100	
58		Tobacco products offered for sale	0	0	] (
59		If tobacco products are sold, NSPA survey completed	0	0	

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 18-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-6-320.

04/17/2024

Date Signature of Environmental Health Specialist

04/17/2024

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

PH-2267 (Rev. 6-15)

Free food safety training classes are available each month at the county health department.

Please call ( ) 6153405620 to sign-up for a class.

### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



### Establishment Information

Establishment Name: Cherries Restaurant Establishment Number ≠: 605321758

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 inflitrating into areas where smoking is prohibited.	
Smoking observed where smoking is prohibited by the Act.	

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature ( Fahrenheit)				
Autochlor	Chlorine	50					
			l				

Equipment Temperature						
Description	Temperature (Fahrenheit)					
Atosa reach in cooler	35					
3door atosa cooler	41					
Warming cabinet	106					

Food Temperature		
Description	State of Food	Temperature ( Fahrenheit
Onions and peppers in hot bath	Hot Holding	145
Raw liquid egg in cooler	Cold Holding	41
Heavy cream in cooler	Cold Holding	41
Bbq chicken in warming cabinet	Hot Holding	128
Lettuce on ice bath	Cold Holding	41
Bbg chicken in warming cabinet	Hot Holding	126

<sup>\*\*\*</sup>See page at the end of this document for any violations that could not be displayed in this space.

# TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



### Establishment Information

Establishment Name: Cherries Restaurant Establishment Number: 605321758

### Comments/Other Observations

- 2: Person in charge knowledgable of food borne illnes symptoms with none reported sick.
- 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.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 9: See 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.
- 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: Not observed.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Not observed.
- 20: See temp.
- 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: Require no smoking signs on entry doors.

58:

## Additional Comments

See last page for additional comments.

<sup>\*\*\*</sup>See page at the end of this document for any violations that could not be displayed in this space.

<sup>\*\*\*</sup>See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

stablishment Name: Cherries Restaurant	
stablishment Number: 605321758	
Comments/Other Observations (cont'd)	
dditional Comments (cont'd)	
ee last page for additional comments.	

Establishment Information

# Establishment Name: Cherries Restaurant Establishment Number #: 605321758 Sources Source Type: Water Source: Municipal Source Type: Food Source: What chefs want

Source:

Restaurant depot

Source Type: Source:

Food

Source Type: Source:

# **Additional Comments**

Source Type:

Tori@cherriesnashville.com