TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

						O Farmaria Maniari Faranzi	10	`	ſ	1											
Establishment Name		Stones River Country Club Lounge Type of Establishment O Mol																			
Address			1830 Nw Bro	ad St.										O Temporary O Se							
City			Murfreesbord)	Time in	12	2:2	5 F	РΜ	_ A	M/P	мт	me o	ut 12:39: PM A	M / PM						
Insp	ectio	on D	Date		(03/26/202	4 Establishment #	60513538				Emb									
Pur	pose	of	Insp	ectio		Routine	O Follow-up	O Complaint			0 Pr		-	-) Co	nsuitation/Other				
Risi	c Cat	tego	хy		1	iiil 1	02	03			O 4				F	-wollo	up Required O Yes	氨 No Number of	Seats	0	
Γ			di D														d to the Centers for Disc control measures to pr		tion		
																	INTERVENTIONS				
	kin e						(IN, OUT, NA, NO) for eac NA+not applicable	NO=not observe		item							spection Rerepeat ()	
Ē	_		lianc				liance Status	NO-HOLODSEIVI		R	WŤ		xiec.e		she que	ng m	Compliance Sta			R	WT
Щ			TN	A 1	0	Parson in chasta or	Supervision esent, demonstrates kno	has and			_		IN	001	NA	NO	-	g of Time/Temperature ety (TCS) Foods			
1	篇 IN	0	TN			performs duties	Employee Health	wiedge, and	0	0	5		8	8			Proper cooking time and tem Proper reheating procedures	peratures	0	8	5
2	X	0					od employee awareness	s; reporting	0	0		"	IN		r na			te Marking, and Time as	۲		
3	2	0	TN		-	Proper use of restric			0	0	Ů						a Public He Proper cooling time and tem	aith Control			
4	20	0			_	Proper eating, tastin	d Hygionic Practicos g. drinking, or tobacco u		0	0	5	19	000	0	0		Proper hot holding temperati	res	0	0	
5			TN	A	i0	Preventin	yes, nose, and mouth g Contamination by	Hands	0	0				8		23	Proper cold holding tempera Proper date marking and dis		8	0	5
6	×	0	-	_	_	Hands clean and pro No bare hand contain	operly washed ct with ready-to-eat food	s or approved	0	-	5	22	2 0	0	×	0	Time as a public health cont	rol: procedures and records	0	0	
7	区区	0		2	<u> </u>	alternate procedures			0	0	2		IN	out	_	NO	Consumer Consumer advisory provided	Advisory			
9		OU	TN	A	ŧ٥		Approved Source	000000000		0		23	S O	0	88	NO	food	ble Populations	0	0	4
10	0	0		2	2	Food received at pro	oper temperature		0	0		24		0	88	-	Pasteurized foods used; pro		0	0	5
11 12	<u>×</u>	0	-	R			on, safe, and unadultera ailable: shell stock tags,		0	0	5	Ē	IN	001	-	NO		nicals	-		
H	IN	OU	TN	A	-	destruction Protect	ion from Contaminat	lion				25	0	0			Food additives: approved an		0	8	
13 14	息堂	0	0	2		Food separated and Food-contact surface	protected es: cleaned and sanitize	d		00		26	IN	0	r na	NO	Toxic substances properly ic Conformance with A	entified, stored, used	0	0	0
15	ž	ō				Proper disposition of	f unsafe food, returned f		0	-	2	27	-	0	8		Compliance with variance, s HACCP plan		0	0	5
				_	_	served			-	-			-	-	-						
				_	00	d Retail Practice	s are preventive m	easures to co								gen	s, chemicals, and physic	al objects into foods.			
					001	not in compliance		COS=corre	ected c	n-site	durin				3			on of the same code provision)			
		OU	т				iance Status ood and Water		cos	R	WT		0	TUC			Compliance St Utensils and Equi		COS	R	WT
	8 9					d eggs used where r ice from approved s			8	8	1 2	4	15				onfood-contact surfaces clean and used	able, properly designed,	0	0	1
3	0	0		rian	ce o		ed processing methods		Ō	0	1	4	6	0	Narew	ashin	g facilities, installed, maintain	ed, used, test strips	0	0	1
	1	0	Pr				adequate equipment for	temperature	0	0	2		_	-	Vonfoo	xd-cor	ntact surfaces clean		0	0	1
3	2	0		ntrol ant fe		properly cooked for	hot holding		0	0	1	4		TUX O	-lot an	d cold	Physical Facilit d water available; adequate pr		0		2
	34		_	<u> </u>		thawing methods use ters provided and ac			0	_	1		_	_			stalled; proper backflow devic i waste water properly dispos		0	0	2
Ë		ou					identification		Ľ		_			-			es: properly constructed, supp			ŏ	1
3	5	0	_	od p	rop		container; required reco		0	0	1			-		-	use properly disposed; facilitie		0	0	1
3	6	00	-	sects	ro	Prevention of dents, and animals n	Food Contamination of present		0	0	2			-			ilities installed, maintained, an entilation and lighting; designa		0	0	1
⊢	7	0	-				g food preparation, stora	ano & disnlav	0	0	1	H	-	UT			Administrative I		Ē		
	8	_				leanliness	group preparation, accre	ide a aishiay	6		1	5	_	-	Curren	t perr	mit posted		0	o	
	9 0	Ó	W	iping	clo	ths; properly used an uits and vegetables	nd stored		0	0	1		_				inspection posted Compliance Sta	t	0	0	0 WT
		OU	т			Proper	Use of Utensils				1						Non-Smokers P	rotection Act			
H	1 2					sils; properly stored quipment and linens;	properly stored, dried, I	handled	8	8	1	5	7 8				with TN Non-Smoker Protect oducts offered for sale	ion Act		0	0
	3 4	0	Si	ngle-	use		es; properly stored, used			8		5	9	Ĩ	f tobac	co pr	roducts are sold, NSPA surve	y completed	0	0	
Faib	are to	000	rect	any	riola	tions of risk factor iten	ns within ten (10) days ma	y result in susper	vsion o	of you	r food	servio	ce est	ablish	ment p	ermit.	Repeated violation of an identi-	al risk factor may result in revo	cation	of you	ar food
man	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																				
repo	п. Т. (.C.A	. sec	2		4-703, 68-14-706, 68-14	-708, 68-14-709, 68-14-711,								<	$\hat{}$	\mathcal{M}			0.1-	
6	0.01	_			11-			03/2	26/2		_		0.0.1.			\geq			03/2	26/2	
Signature of Person In Charge Date Signature of Environmental Health Specialist Date																					
Additional food safety information can be found on our website, http://tn.gow/health/article/eh-foodservice **** Free food safety training classes are available each month at the county health department.																					
L. I.	PH-2267 (Rev. 6-15) Please call () 6158987889 to sign-up for a class. RDA 629																				

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Stones River Country Club Lounge Establishment Number #: 605135389

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.	
Smoking observed where smoking is prohibited by the Act.	

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							
Dish machine	Heat		173							

Equipment Temperature								
Description	Temperature (Fahrenheit)							
Ric	38							

Description	State of Food	Temperature (Fahrenheit

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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Establishment Number: 605135389

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Pic has knowledge
- 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: No tasks performed requiring it but discussed good hand washing practices.

7: No tasks performed requiring them but discussed examples of scenarious where they would be required.

8:

(IN): All handsinks are properly equipped and conveniently located for food employee use.

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.
- 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: (NÁ) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: Observed no tcs foods in cooling process during inspection
- 19: (NO) TCS food is not being held hot during inspection.
- 20: No tcs foods held during inspection.
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 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.

Establishment Information

Establishment Name: Stones River Country Club Lounge Establishment Number: 605135389

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Stones River Country Club Lounge Establishment Number # 605135389

Sources				
Source Type:	Food	Source:	Sysco	
Source Type:	Water	Source:	City	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

Additional Comments