TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

															7				
Establishment Name								Fatabl	-	O Fermer's Market Food Unit ent Ø Permanent O Mobile									
Address			130 John	R. Rice Blvd						T yş	peor	Establ	snme	O Temporary O Seasonal					
Cit	City Murfreesboro Time in		08	3:5	1 A	١M	A	M/P	мті	me o	ut 08:59:AM AM/PM								
		ion D	ate		04/18/2	024 Establishmen					Emb	_							
					ORoutine	御 Follow-up	O Complaint			O Pr			-		Cor	nsultation/Other			
		tego			281	02	03			04		,				up Required O Yes 質 No Number of	Seats	36	
	-	_			ors are food	preparation practic	es and employee			* mo				y rep	ortec	to the Centers for Disease Control and Prever		_	
				as (contributing 1											control measures to prevent illness or injury.			
		(Ľ	ark d	nelgne	ted compliance											ach Hom as applicable. Deduct points for category or subcat	egory.	.)	
Γ	N≓in	comp	liance			pliance NA=not applicat ompliance Status	ble NO=not observ		R		>s=∞	rrecte	d on-s	site dur	ing ins	spection R=repeat (violation of the same code provis Compliance Status		R	WT
	IN	ou	T NA	NO		Supervision						IN	ουτ	NA	NO	Cooking and Reheating of Time/Temperature			
1	鬣	0			Person in char performs dutie	ge present, demonstrate s	es knowledge, and	0	0	5	16	0	0	×	0	Control For Safety (TCS) Foods Proper cooking time and temperatures	0		
2		00		NO	Management a	Employee Healt and food employee awar		0	0		17	0	0	0	×	Proper reheating procedures for hot holding	0	00	•
3	×					restriction and exclusion		0	0	5		IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
Ļ	IN		T NA			Good Hygionic Pract tasting, drinking, or toba			0			0	8	X		Proper cooling time and temperature Proper hot holding temperatures	0	0	
5	夏夏	ŏ	1	0	No discharge f	rom eyes, nose, and mo	wth	ŏ	ŏ	5	20	25	0	0		Proper cold holding temperatures	0	0	5
6	IN XX	0	T NA		Hands clean a	enting Centamination nd properly washed		0	0		21	0	0	8		Proper date marking and disposition Time as a public health control: procedures and records	0	0	
7	X	0	0	0		contact with ready-to-ea dures followed	t foods or approved	0	0	5	H	IN	OUT		NO		ľ	Ŭ	
8	N IN	0	T NA	NO	Handwashing	sinks properly supplied a Approved Source		0	0	2	23	0	0	黛		Consumer advisory provided for raw and undercooked food	0	0	4
9	8					from approved source at proper temperature			00			IN	OUT	_	NO	Highly Susceptible Populations			
11	X	ŏ		_	Food in good o	condition, safe, and unad		0	0	5	24	0	0	×		Pasteurized foods used; prohibited foods not offered	0	0	5
12		0	1 ***	0 NO	destruction	rds available: shell stock		0	0		~	IN	OUT		NO	Chemicals			
13	IN O	0	I NA	NO	Food separate	d and protected			0		25	0 10	0		·	Food additives: approved and properly used Toxic substances properly identified, stored, used	8	0	5
14	8	0	章 0]		surfaces: cleaned and sa tion of unsafe food, retur		-	0	5		IN		NA	1.1.1.1	Confermance with Approved Procedures Compliance with variance, specialized process, and			
15	2	0			served			0	0	2	27	0	0	8		HACCP plan	0	0	5
				God	d Retail Pra	ctices are preventiv	re measures to co	ontro	l the	intr	oduc	tion	of	atho	gens	s, chemicals, and physical objects into foods.			
										ETA				3					
E			_	00		ompliance Status	COS=com		R							R-repeat (violation of the same code provision) Compliance Status	COS	R	WT
	28		Pas		ed eggs used w			0	0	1			NUT Kali	ood a	nd no	Utensils and Equipment proced-contact surfaces cleanable, properly designed,	0	0	1
_	29 30				d ice from appro obtained for spe	ved source cialized processing met	hods	8	0	2		-	-			and used	-		
		ou	-			Temperature Contro sed: adequate equipme		_				_	-			g facilities, installed, maintained, used, test strips ntact surfaces clean	0	0	1
	31	0	con	trol			ne for temperature	0	0	2		0	TUK			Physical Facilities			
	32 33				thawing methor	d for hot holding ds used		8	0	1	4	_	-			I water available; adequate pressure stalled; proper backflow devices		8	2
	34	0		rmom	eters provided a	and accurate		0	0	1	5					waste water properly disposed es: properly constructed, supplied, cleaned	0	0	2
E	35	<u> </u>	_	d prog		ginal container; required	records available	0	0	1	5	_	_			use properly disposed; facilities maintained	ŏ	ŏ	1
Þ		ou	1		Preventio	on of Feed Contamin	ation				5	3	o F	hysica	al faci	ilities installed, maintained, and clean	0	0	1
L	36	0	Inse	cts, ro	dents, and anim	nals not present		0	0	2	5	4	0 /	Adequa	ste ve	entilation and lighting; designated areas used	0	0	1
	37	2	Con	tamin	ation prevented	during food preparation,	, storage & display	0	0	1		0	TUK			Administrative Items			
	38 39	-			cleanliness oths: properly us	ed and stored		0	00	1		_				nit posted inspection posted	0	0	0
_	40	0	War		ruits and veget	abies			ŏ		Ĕ	_	-			Compliance Status		NO	WT
	41		In-u		nsils; properly s				0		5	7				Non-Smokers Protection Act with TN Non-Smoker Protection Act		0	
	42 43	2	Sing	ple-us	e/single-service	inens; properly stored, d articles; properly stored	ned, handled	0	0	1	5 5	8				ducts offered for sale roducts are sold, NSPA survey completed	0	0	0
Ξ	44				ed properly				0										
	ure t		ishme	nt pen	nit. Items identifie	ed as constituting imminen	t health hazards shall b	e com	ected i	immed	iately	or op	eratio	ns shal	l ceas	Repeated violation of an identical risk factor may result in revo e. You are required to post the food service establishment perm	it in a	consp	icuous
			10 C 10 C 10	a month		CONTRACT ON A CONSIDER WORK OF	names. Tou have the rig	APR 8/1 P	eques	a hei	arıng i	egard	ang th	us repo	et by f	filing a written request with the Commissioner within ten (10) day	s of th	e date	of this
ma	mer	and p				68-14-708, 68-14-709, 68-1	4-711, 68-14-715, 68-14-7						/	\mathbf{Y}		· · ·			
ma	mer	and p					04/2	16, 4-5	-320.	4		/		$\overline{\mathbf{V}}$	1	M	04/1	18/2	2024
rep			sectio	E				16, 4-5	-328.	4 Date	Si	gnat	are di	, ∖ A		Speciel	04/1	18/2	2024 Date
rep			sectio	E	14-703, 68-14-706	**** Additional food se	04/2 afety information car	16, 4-5 18/2	2024	Date on ou	ir wel	bsite,				nealth/article/eh-foodservice ****	04/1	18/2	

PH-2267 (Rev. 6-15)	Free food safety training class	es are available each mor	nth at the county health department.	RDA 62
(Net: 0-15)	Please call () 6158987889	to sign-up for a class.	hor de

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

. .

Establishment Name: Mainstay Suites Food Establishment Establishment Number #: 605303846

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)							

quipment l'emperature								
Description	Temperature (Fahrenheit)							

Description	State of Food	Temperature (Fahrenheit

Observed Violation	5		
Total # 3 Repeated # 0		 	
Repeated # ()			
37:			
43:			
+3.			
45:			

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Mainstay Suites Food Establishment Establishment Number : 605303846

**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.

Establishment Information

Establishment Name: Mainstay Suites Food Establishment Establishment Number : 605303846

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Mainstay Suites Food Establishment

Establishment Number # 605303846

Source:	
Source:	
Source:	
Source:	
Source:	
	Source: Source: Source:

Additional Comments