# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

	Parter S Market Food Unit																			
Establ	shm	ent l	Name	Type of Establishment																
Address				7022 Church Street East O Temporary O Seasonal																
City				Brentwood		Time in	03	3:0	0 F	PM	_ A	M / F	м т	ime o	ut 03:20: PM A	/ PM				
Inspec	nspection Date 10/20/2021 Establishment # 605228053 Embargoed 0																			
Purpos	e of	Insp	xectio		ORoutine	御 Follow-up	O Complaint			O Pr					Cor	nsuitation/Other				
Risk C	ateg	ory			<b>O</b> 1	<b>38</b> (2	<b>O</b> 3			<b>O</b> 4				F	ollow-	up Required O Yes	民 No Number of S	Seats	51	
		Ris														to the Centers for Dise control measures to pre		tion		
	0	Marri	( deal)	g na đ	ed compliance state											INTERVENTIONS ach liem as applicable. Deduct	points for category or subcat	egory.	)	
IN=in	com	piian	08		OUT=not in complian	ce NA=not applicable	NO=not observe	d COS	R		S=co	recte	d on-	site du	ing ins	spection R=repeat (v Compliance Stat	iolation of the same code provis		R	WT
IN	0	лι	NA I	NO		Supervision						IN	ou	T NA	NO	Cooking and Reheating	of Time/Temperature			
1 1		>			Person in charge p performs duties	resent, demonstrates knov	viedge, and	0	0	5	16	2	0	0	0	Control For Safe Proper cooking time and tem		0	ा	
2 )			NA I	_	Management and t	Employee Health ood employee awareness.	reporting	0	0		17	0	0	0	×	Proper reheating procedures		0	00	•
3 8		_		1		iction and exclusion	- cp-rining	0	ō	5		IN	ου	T NA	NO	Cooling and Holding, Det a Public Her	•			
	-	_	NA I			d Hygionic Practicos		-				X	0			Proper cooling time and temp		0		
4 ) 5 )		5		0		ing, drinking, or tobacco us eyes, nose, and mouth	e.	0	0	5	20	X	00	0	0	Proper hot holding temperatu Proper cold holding temperat		0	0	5
6 )		_	VA I		Provent Hands clean and p	ng Contamination by H records washed	ands	0	0	_		*		_	-	Proper date marking and disp			0	*
7 8	_	_	_	0	No bare hand cont	act with ready-to-eat foods	or approved	0	ō	5	22	-	0	100	O NO	Time as a public health contro	-	0	0	
8 8		2	_		alternate procedur Handwashing sink	s properly supplied and acc	cessible	0	0	2	23	IN O	00		NO	Consumer advisory provided		0	0	4
9 X		_	VA   1		Food obtained from	Approved Source		0	0		-	IN	ou		NO	food Highly Susceptil	ble Populations	-	-	
10 C			013	$\approx$	Food received at p	roper temperature ition, safe, and unadulterat	od.	0	0	5	24	0	0	88		Pasteurized foods used; proh	ibited foods not offered	0	0	5
12 C	_	_	K I	0	Required records a	vailable: shell stock tags, p		ō	ō		H	IN	ou	T NA	NO	Chem	icals	H		
IN	OL	л	NA I	NO	destruction Protect	tion from Contamination	on				25	0	0		-	Food additives: approved and	d properly used	0	8	6
13 X			8		Food separated an Food-contact surfa	d protected ces: cleaned and sanitized	1	0	00	4	26	<u>宗</u> IN	0		NO	Toxic substances properly id Conformance with A		0	0	Ű
14 )) 15 ))		_	_	ľ	Proper disposition	of unsafe food, returned fo		0	0	2	27	-	0	-	1100	Compliance with variance, sp		0	0	5
<u> </u>	1				served			Ŭ	Ŭ	-		Ŭ	Ŭ	~		HACCP plan		<u> </u>	-	-
			_	600	d Retail Practic	es are preventive me	asures to co	ntro	l the	intr	oduc	tion	of	patho	gens	s, chemicals, and physic	al objects into foods.			
				010	-not in compliance		COS=corre			аr.				5		Property in the second second	on of the same code provision)			
	1.0.1			001	Comp	liance Status	003-0016	COS			É					Compliance Sta	tus	COS	R	WT
28	01		asteu	rize	Safe I d eggs used where	Food and Water required			0		4		UT O	Food a	nd no	Utensils and Equip proced-contact surfaces cleans		0	0	
29 30					ice from approved btained for special	source zed processing methods		0	0	2	$\vdash$	-	-			and used				
	0	л			Food Te	mperature Control		-			4	-	_			g facilities, installed, maintain	ed, used, test strips	0	0	1
31	0		roper ontrol		ling methods used	adequate equipment for to	emperature	0	0	2	4	_	O UT	Nonio	xa-cor	ntact surfaces clean Physical Facilit	les	0	0	1
32 33	_	_	_	_	properly cooked fo	*		0	0	1	4	_	-			d water available; adequate pro		8	8	2
34	+	_	<u> </u>		thawing methods u ters provided and a			ŏ	00	1	4	_	_			stalled; proper backflow device I waste water properly dispose		0	0	2
	OL	_				Identification					5	_	_			es: properly constructed, supp			0	1
35	0	_	ood p	rope		I container, required record <b>f Food Contamination</b>	ts available	0	0	1	5		-		-	use properly disposed; facilitie ilities installed, maintained, an		0	0	1
36		-	sects	. ro	dents, and animals			0	0	2	5	_	-			intes installed, maintained, an entilation and lighting; designat		0	0	1
37		+	_	_		ng food preparation, storag	na & disnlav	0	0	1	F	+	UT			Administrative it		F	-	
38					leanliness	-groot proportional, orong	je u uspioj	0	0	1	5			Currer	t pern	nit posted		0	o	
39	12	<u>s</u> v	ńping	clot	ths; properly used a			0	0	1					-	inspection posted		0	0	0
40	-	л Л	vasni	ng tr	uits and vegetable Proper	Use of Utensils		0	0	1	H					Compliance Stat Non-Smokers Pr		YES	NO	WI
41 42	_	_		_	sils; properly store automent and liner	d s; properly stored, dried, hi	andled	00	00	1	5					with TN Non-Smoker Protection ducts offered for sale	on Act	8	읭	0
43	0	SS	ingle-	use		les; properly stored, used	andre a	0	<u></u>	1	5	9				oducts are sold, NSPA survey	r completed	ŏ		
	-	-				and within the 2000 dates over	conde la sussess			_						Repeated violation of an identic	at which the stars are seen at the second			
service	estal	blish	ment	perm	it. Items identified as	constituting imminent health	hazards shall be	e corre	cted i	mmed	ately	or op	eratik	ons sha	ll ceas	e. You are required to post the fo	od service establishment permi	it in a c	onspi	icuous
	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. arcticles 60-14-712 db-14-700, 60-14-712, 60-14-711, 60-14-715, 60-14-716, 4-5-320.							-01 0105												
	10/20/2021 10/20/202							2021												
Signature of Person In Charge Date Signature of Environmental Health Specialist Date									Date											
**** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****																				
PH-226	7 (Re	ev. 6	-15)			Free food safety tra Please c				ilable '915			onth			inty health department. p for a class.			RD	XA 629
												~								

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



## Establishment Information

Establishment Name: Judge Bean Bar-B-Que Establishment Number # 605228053

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)						
			l						

Equipment Temperature							
Description	Temperature (Fahrenheit)						
	1						

Food Temperature	State of Food	Temperature (Fahrenheit

#### Observed Violations

Total # 4

Repeated # ()

39: Wet wiping cloths stored on prep table.

42: Pans stacked wet on storage shelf.

50: Waste water leaking onto floor under 3 sink(sanitize).

55: Current permit not posted.

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



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Establishment Name: Judge Bean Bar-B-Que Establishment Number : 605228053

Comments/Other Observations
1: 2: 3: 4: 5: 5: 6: 7: 3: CA: paper towels placed in dispenser. 6: 10: 11: CA: rotten lemons discarded
2
3:
1:
5. -
(: CA: noner towale released in dispenser
3. CA: paper lowels placed in dispenser.
L0. I1: CΔ: rotten lemons discarded
12 <sup>.</sup>
13:
LU: L1: CA: rotten lemons discarded. L2: L3: L4: L4: L5: L5: L6: L6: L6: L6: L6: L6: L6: L6: L6: L9: CA: mac & cheese reheated to 171
15:
16:
17:
18:
19: CA: mac & cheese reheated to 171.
20:
22: 22: (NA) Establishment deep not conversional food that is rew or underscelved
23. (NA) Establishment does not serve animal lood that is raw of undercooked.
24. 25 <sup>.</sup>
26.
20. 27 <sup>.</sup>
<ul> <li>20:</li> <li>21:</li> <li>22:</li> <li>23: (NA) Establishment does not serve animal food that is raw or undercooked.</li> <li>24:</li> <li>25:</li> <li>26:</li> <li>27:</li> <li>27:</li> <li>57: "No Smoking" signs or the international "No Smoking" symbol are conspicuously posted at every entrance.</li> </ul>
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: Judge Bean Bar-B-Que Establishment Number : 605228053

Comments/Other Observations (cont'd)

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

# Establishment Information

Establishment Name: Judge Bean Bar-B-Que Establishment Number #: 605228053

Sources		
Source Type:	Source:	
Additional Commonto		

### Additional Comments

Call 615-791-5112 for food safety info.