## **TENNESSEE DEPARTMENT OF HEALTH** EGOD SERVICE ESTABLISHMENT INSPECTION REPORT

				FOOD SERVICE ESTABLISHMENT INSPECTION REPORT											SCORE									
- THE -														-			1							
Esta	blish	nmen	t Narr		Waffle	Hous	se #11	188									Toto b K		E Pormano	Market Food Unit Int O Mobile		-		
Address				5466 Hwy 153 Type of Establishment O motion O Temporary O Seasonal																				
City					Hixsor	ו				Time in	08	3:1	Q /	١M	A	M / PI	M Tir	ne ou	ut 09:10:A	M AM / PM				
Insp	ectic	n Da	rte		04/12	2/202	23 в	stablishme	ent#_60		9		_	Emba	argoe	d 1								
Purp	urpose of Inspection Routine O Follow-up O Complaint						-	elimin	-			Cor	nsuitation/Other											
Risk	Cat	_			<b>O</b> 1		<b>X</b> 2			03			<b>O</b> 4						ab	🕅 Yes <b>O</b> No	Number of S		40	
		R																		for Disease Con res to prevent illi		tion		
																			INTERVENTIO					
IN	in ci	(CD ompli		lignet				A=not applics		O=not observ		Bellin (							ach liam as applica pection	ble. Deduct points to Rerepeat (violation of				
_		01/17				Com		Status			cos	R	WT	F						nce Status			R	WT
$\rightarrow$	in 黨	001	NA	NO	Person in	charge p	-	demonstrat	tes knowk	edge, and	0		-		IN	ουτ	NA	NO	-	Reheating of Time of For Safety (TCS				
			NA	NO	performs			yee Heat			0	0	5		<u>湯</u> 0	0	8			ne and temperatures procedures for hot ho		00	8	5
2	X							ployee awa nd exclusion		eporting	0	0	5		IN	оυт		NO	Cooling and He	olding, Date Marki	ng, and Time as		_	
		-	NA		Proper us			ia exclusion			-	0	_	18	0	0	0	12		Public Health Com e and temperature	trel	0	0	
4	ŝ	00						king, or tob ose, and m			8	0	5	19		0	8		Proper hot holding Proper cold holding				8	_
	IN		NA	NO		Preventi	ing Con	taminatio		nds				21	0	ŏ			Proper date marki			ŏ	ŏ	5
_	皇鼠	0	0	_	No bare h	and cont	tact with	ready-to-ea	at foods o	r approved	6	0 0	5	22	8	0	0	-		ealth control: proced		0	0	
8	X	0			alternate Handwas		s propert	ty supplied		ssible		0	2	23	IN X	OUT	NA	NO	Consumer adviso	Consumer Advisor ry provided for raw a		0	0	4
9	黨	0	NA				n approv	ved Source			0	0		H	IN	OUT	-	NO	food Highly	Susceptible Popu	intions	-	-	-
10 11	8	0 12	0		Food rece Food in go			mperature fe, and una		đ	8	0	5	24	0	0	×		Pasteurized foods	used; prohibited foo	ds not offered	0	0	5
	0	0	×			records a		shell stoc			0	0			IN	OUT	NA	NO		Chemicals			_	
13			NA	NO	Food sep	Protec		om Conta	mination	n	0		4	25	<b>〇</b> 夏	0	X			proved and properly properly identified, s			8	5
14	ŝ.	ŏ	ŏ		Food-cont	tact surfa	ces: clea	aned and s			ŏ		5		IN		NA		Conforman	ce with Approved	Procedures	Ŭ	_	
15	2	0			Proper dis served	sposition	of unsafe	fe food, retu	urned food	d not re-	0	0	2	27	0	0	黨		Compliance with v HACCP plan	variance, specialized	process, and	0	0	5
				Goo	d Retail	Practic	es are	preventi	ive mea	sures to co	ontro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, ar	nd physical objec	ts into foods.			
														L PR			3							
				00	T=not in cor	Comp		Status		COS=com		n-site R		inspe				_	Compl	peat (violation of the si iance Status	ime code provision)	COS	R	WT
28	_	OUT O		urize	ed eggs us			d Water			0	0	1	4	_	UT K	ood ar	nd no		and Equipment aces cleanable, prop	erly designed,	0		
25	_	0	Wate	r and	lice from a	pproved	source	cessing me	thods		0	8	2	$\vdash$	+	- 0			and used			0	0	1
	_	OUT				food Te	mperate	ure Contr	rei					4	_	_			g facilities, installer itact surfaces clear	d, maintained, used,	test strips	0	0	1
31		0	contro	ol				ste equipme	ent for ten	nperature	0	0	2		0	UT			Physic	cal Facilities				
32	_				property of thawing m			śing			8	8	1	4	_	_			I water available; a stalled; proper back			00	8	2
34			Them		eters provid	ded and a	accurate	fication			0	0	1	5	0				waste water prope	erly disposed ucted, supplied, clear	uud.	0	0	2
35	_			prop	erly labele			ner; require	d records	available	0	0	1	5	_					sed; facilities maintai		0	0	1
		OUT			,			Contamir						5	3 0	0 P	hysica	l faci	lities installed, mai	ntained, and clean		0	0	1
36	;	0	Insec	ts, ro	idents, and	l animals	not pres	lent			0	0	2	5	4 8	🐹 A	dequa	te ve	ntilation and lightin	g; designated areas	used	0	0	1
37	'	0	Conta	amina	ation preve	nted duri	ing food	preparation	n, storage	& display	0	0	1		0	UT				strative items				
38	_	-	-		leanliness		and store	ed			0	0	1	5			Sument fost re	perm cent	nit posted inspection posted			0	8	0
40	)	0	Wash		ruits and v	egetable	5					ŏ		Ĕ	_	- 1.			Compli	ance Status			NO	WT
41		_	In-us		nsils; prop	erly store	d	Utensils				0		5					with TN Non-Smok		AGT	x	0	
43	43 🐹 Single-use/single-service articles; properly stored, used O O 1 59 If tobacco products are sold, NSPA survey completed O O							0	0															
44	1	0	Glove	95 US	ed properly	y					0	0	1											
servi	ce es	tablis	shmen	t perm	nit. Items id	entified as	s constitu	ting immine	nt health h	azards shall b	e corre	cted i	mmed	iately	or op	eration	is shall	cease	e. You are required t	of an identical risk fact to post the food service	establishment permi	t in a c	onspi	cuous
										ou have the rig 14-715, 68-14-7			c a he	aning r	egard					at with the Commission	er within ten (10) days	of the	date	of this
	Ì	1	<u></u>	2	$\sim 1$	YC	-			04/2	12/2	023	3	_		6	<i>ل</i> وح	$\nu$	A		(	)4/1	2/2	023
_	-	_	_	_							-	-	_	_	_	-	_	_				_	_	_

			_
Signature of	f Person	In Charge	

23 Date Signature of Environmental Health Specialist

04/12/2023

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- L	JH	ue.	

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

PH-2267 (Rev. 6-15)	Free food safety training class	RDA 629		
(Nev. 0-15)	Please call (	) 4232098110	to sign-up for a class.	104 025

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



#### Establishment Information Establishment Name: Waffle House #1188 Establishment Number #: 605116099

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 wenty-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.	
Sarage 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)					
Sani spray Dish machine	Quat Heat	300	160					

Equipment Temperature	
Description	Temperature (Fahrenheit)

Food Temperature							
Description	State of Food	Temperature (Fahrenheit)					
Milk	Cold Holding	39					
Ham	Cold Holding	38					
Chili	Hot Holding	169					
Milk	Cold Holding	39					
Raw burger	Cold Holding	40					
Grits	Hot Holding	148					
Scrambled egg	Cooking	163					

#### Observed Violations

Total # 5

Repeated # ()

11: Cooler leaking onto food in stand up cooler. Discarded one poece of pie and a tray of lemons.

43: To go cup box stored on floor

45: Gasket in poor repair

47: Excessive water build up in bottom of cooler.

54: Employee drinks on top shelf of walkin - non designated area.

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



### Establishment Information

Establishment Name: Waffle House #1188

Establishment Number : 605116099

### Comments/Other Observations

1: (IN): ANSI Certified Manager present.

- 2: Posted policy available
- 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: Hamds washed

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: Approved

- 10: (NO): No food received during 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: Cooking shell eggs correctly
- 17: (NO) No TCS foods reheated during inspection.
- 18: No items cooling at time of inspection
- 19: All hot foods stored correctly
- 20: All cold foods held correctly
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 22: Using tilt corrrctly for eggs
- 23: On menu
- 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.

E	st	ab	lis	hment	Information

Establishment Name: Waffle House #1188 Establishment Number: 605116099

Comments/Other Observations (cont'd)

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

## Establishment Information

Establishment Name: Waffle House #1188

Establishment Number #: 605116099

Sources				
Source Type:	Water	Source:	Hud	
Source Type:	Food	Source:	Us foods	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

# Additional Comments