# **TENNESSEE DEPARTMENT OF HEALTH**

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT					RE															
Canal Control of Contr													1 (		ſ					
Tucker's Crossroads							Tree		Tetabl	a linear o	Farmer's Market Food Unit     Server O Mobile	10								
Address Trousdale Ferry Pike						_	1 yş	pe of t	Establi	shme	O Temporary O Seasonal	▏▄┹┷╸╲			/					
City					Lebanon		Time in	10	):4	3 A	M	A	M/P	м ті	me o	ut 11:26;AM AM/PM				
Inspe	ctio	n Da	de		01/25/202	24 Establishment#		_				_								
Purp					<b></b> 鼠 Routine	O Follow-up	O Complaint			O Pre		-	-		Cor	nsultation/Other				
Risk	Cat	egon	v		01	3022	03			04				Fo	wollow-	up Required O Yes K No	Number of S	ieats	20	1
		-				paration practices								rep	ortec	d to the Centers for Disease Cont control measures to prevent illn	trol and Prevent			
					ontributing fact											INTERVENTIONS	eas or injury.			
		<u> </u>		algaa		is (IN, OUT, NA, NO) for e	ach numbered Iten	n. For		mark	M 0L	л, н	ark Co	05 or R	t for e	each item as applicable. Deduct points for		_	)	
IN-	in co	ompili	ance		OUT=not in complian Comp	nce NA=not applicable	NO=not observe		R		S=cor	mecte	d on-s	ite duri	ing ins	spection R=repeat (violation of th Compliance Status			R	WT
$\rightarrow$	-	ουτ	NA	NO		Supervision						IN	оυт	NA	NO	Cooking and Reheating of Time Control For Safety (TCS)				
		٥			Person in charge p performs duties	resent, demonstrates k	nowledge, and	0	0	5		0	0	-		Proper cooking time and temperatures		00	0	5
2			NA	NO	Management and f	Employee Health ood employee awarene	ss; reporting	0		_	17	-	0	0		Proper reheating procedures for hot hok Ceeling and Heiding, Date Markin		0	0	•
3	×	0			Proper use of restri	iction and exclusion		0	0	5		IN	OUT	NA	NO	a Public Health Cont				
4	_		NA	NO		ng, drinking, or tobacco		0	0	_	18 19	0	8	0		Proper cooling time and temperature Proper hot holding temperatures		0	0	
5	×	0		0	No discharge from	eyes, nose, and mouth		ŏ	ŏ	5	20	25	0	0		Proper cold holding temperatures		0	0	5
		0	NA	NO O	Hands clean and p	ng Contamination by roperly washed	riands	0	0		21	0	0	0		Proper date marking and disposition Time as a public health control: procedu	iros and records	0 0	0 0	
7	×	0	0	0	No bare hand conta alternate procedure	act with ready-to-eat foo as followed	ds or approved	0	0	5	-	-	-	NA				-	_	
8		0	NA	NO	Handwashing sinks	s properly supplied and Approved Source	accessible	0	0	2	23	_	0	12		Consumer advisory provided for raw an food		0	0	4
9 1	黨	0		-	Food obtained from	n approved source		0	0			IN	OUT	NA	NO	Highly Susceptible Popul	ations			
10 11		0	0	8	Food received at pr Food in good condi	roper temperature ition, safe, and unadulte	rated	8	8	5	24	鬣	0	0		Pasteurized foods used; prohibited food	s not offered	0	0	5
	_	Ō	×	0		rvailable: shell stock tag		0	0			IN	OUT	NA	NO	Chemicals				
13	IN I	OUT	NA	NO	Protec	tion from Contamin	ation				25	0	0	X		Food additives: approved and properly of		0	2	5
14		8			Food separated an Food-contact surface	ces: cleaned and sanitiz	red	8	8	5	20	IN	OUT	NA	NO	Toxic substances properly identified, sto Conformance with Approved		0		
15 3	2	0			Proper disposition of served	of unsafe food, returned	food not re-	0	0	2	27	0	0	×		Compliance with variance, specialized p HACCP plan	rocess, and	0	0	5
		_		-		41					_					s, chemicals, and physical object	- late facto			
				900	A Retail Practic	es are preventive r	nessures to co			ar/All					gena	s, chemicals, and physical object	s into foods.			
				00	T=not in compliance		COS=corre	cted o	n-site	during				5		R-repeat (violation of the sar	me code provision)			
		OUT				liance Status Food and Water		COS	R	WT			UT			Compliance Status Utensils and Equipment		COS	R	WT
28 29					ed eggs used where d ice from approved			8	8	1	4	5				proper contact surfaces cleanable, prope and used	rly designed,	0	0	1
30		0	Varia		obtained for specializ	zed processing method:	\$	ŏ	ŏ	2	4	6	- 1			g facilities, installed, maintained, used, to	est strins	0	0	1
	-	OUT	_	er co		mperature Control adequate equipment fo	r temperature				4	_	-			ntact surfaces clean	101 00 100	0	0	1
31		0	cont	rol	-			0	0	2		0	TUK			Physical Facilities				
32	_				properly cooked for thawing methods us			8	8	1	4	_	_			f water available; adequate pressure stalled; proper backflow devices		00	응	2
34		0	<u> </u>		eters provided and a	accurate		ō	ō	1	5	0	o 🛛	iewag	e and	i waste water properly disposed		0	0	2
35	_	OUT O	East	i nen		I dentification	ode avaiable	0	0	1	5	_				es: properly constructed, supplied, cleane use properly disposed; facilities maintain		0	0 0	1
		OUT	- 000	, prot		f Food Contaminatio		-		-	5		-	-	·	ilities installed, maintained, and clean	N	0	0	1
36	-		Inse	cts, ro	dents, and animals			0	0	2	5		-			entilation and lighting; designated areas u	sed	0	0	1
37	.	0	Cont	tamin	ation prevented durin	ng food preparation, sto	rage & display	0	0	1		0	υт			Administrative items				
38	-	0	Pers	onal	cleanliness			0	0	1	5		0	Jurrent	t pern	nit posted		0	0	0
39 40	_				oths; properly used a fruits and vegetables			0	8		5	6	0 1	lost re	cent	inspection posted Compliance Status		0		WT
		OUT			Proper	Use of Utensils										Non-Smokers Protection	Act		_	
41 42					nsils; properly store equipment and liners	d s; properly stored, dried	handled	8	8		5	8				with TN Non-Smoker Protection Act oducts offered for sale		X	8	0
43	-	0	Sing	le-use		cles; properly stored, use		Ō	8	1	5	9				roducts are sold, NSPA survey complete	3	õ		
	-					ame within ten (10) dawn m	w result in surrow				tende		abilitie	nert r	ermi*	Repeated violation of an identical risk facto	r may result in resort	ation	of we	ar food
servic		tablis	shmer	st perr	nit. Items identified as	constituting imminent he	alth hazards shall b	e corre	cted is	mmedi	ately	or op	eration	ns shal	l ceas	e. You are required to post the food service filing a written request with the Commissione	establishment permit	t in a c	onsp	icuous
						14-708, 68-14-709, 68-14-71						4			~	D.	and the other			
K			7		p		01/2	25/2	024	ł			Ľ	A	X	taps	(	)1/2	25/2	2024
Sign	atur	e of	Pers	on In	Charge				(	Date	Sig	gnatu	ire of	Envir	onme	ental Health Specialist				Date

Jul Jul	
Signature of Person In Charge	

01/25/2024

Date

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\*\*\*\* 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 cl	RDA 629		
1172201 (141. 0-13)	Please call (	) 6154445325	to sign-up for a class.	

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



#### Establishment Information Establishment Name: Tucker's Crossroads Establishment Number # [605030132

ISPA Survey – To be completed if #57 is "No"	
pe-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are venty-one (21) years of age or older.	
ge-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	
to Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	
arage type doors in non-enclosed areas are not completely open.	
ents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
moke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	
moking observed where smoking is prohibited by the Act.	

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)				
Sani Bucket Three comp sink	Quat Quat	400 400					

Equipment Temperature				
Description	Temperature (Fahrenheit)			
Duke Milk RIC	38			
Traulsen RIC	35			
Traulsen Warmer	165			
True Heated Cabinet	180			

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Baked Beans	Hot Holding	139
Hamburger Patty	Hot Holding	141
Rib Patty	Hot Holding	144
Milk	Cold Holding	41

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



#### Establishment Information

Establishment Name: Tucker's Crossroads

Establishment Number : 605030132

#### Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Establishment has employee illness policy
- 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:

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: See sources

- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (NÁ) 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: No foods observed being cooked during inspection
- 17: (NO) No TCS foods reheated during inspection.
- 18: No foods observed in cooling during inspection

19: See temps

- 20: See temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 24:
- 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:	Tucker's Crossroads						
Establishment Numbe	605030132						

Comments/Other Observations (cont'd)

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

#### Establishment Information

Establishment Name: Tucker's Crossroads

Establishment Number #: 605030132

Sources				
Source Type:	Water	Source:	City	
Source Type:	Food	Source:	Purity IWC Pepsi	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

## Additional Comments