## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

A CALCULAR	100		ALC: NO			1000 021														
Eet	shiel	hmen	t Nar		Waffle Hou	ıse #963										Farmer's Market Food Unit Ø Permanent O Mobile	9		<b>X</b>	
	iress				811 S. Jan	nes Campbell I	Blvd.				_	Тур	pe of	Establi	ishme	O Temporary O Seasonal				
City					Columbia		Time in	09	9:4	3 A	M	A	M/P	мті	me ou	t 10:52; AM AM / PM				
,		on Da	te		02/26/20	024 Establishment						_	d C							
		of In			Routine	O Follow-up	O Complaint			- O Pr			~ -		) Cor	nsultation/Other				
Ris	k Cat	tegon	,		01	882	03			04				Fo	ollow-	up Required 🕱 Yes O No	Number of S	eats	48	
														y repo	ortec	to the Centers for Disease Control control measures to prevent illness	and Prevent		_	
					on a non ching the					_					_	INTERVENTIONS	or ngury.			
	bio e	(Ch ompiii		algaat		iance NA+not applicabl			ite ma							ach Item as applicable. Codect points for catego pection R=repeat (violation of the sar				
	_	_	_	_		mpliance Status	e NO-not coserv	cos	R		Ĩ	necie		sie dur	ng ins	Compliance Status			R	WT
Ц	-	OUT	NA	NO	Dorsee in shares	Supervision	Inculates and					IN	ουτ	NA	NO	Cooking and Reheating of Time/Tem Control For Safety (TCS) Foo				
1	×	O OUT	NA	110	performs duties	e present, demonstrates		0	0	5		12				Proper cooking time and temperatures		8	읽	5
	X		NA	NO	Management an	Employee Health d food employee aware		0	0		٣	0				Proper reheating procedures for hot holding Cooling and Holding, Date Marking, an	nd Time as	0	0	
3	黨	0				striction and exclusion		0	0	5		IN		NA		a Public Health Control			- 1	
4	IN XX	OUT	NA			sting, drinking, or tobac		0	0			0 送	0			Proper cooling time and temperature Proper hot holding temperatures		0		
5	25	0		0	No discharge fro	m eyes, nose, and mou	th	ŏ	ŏ	5	20	25	0	0		Proper cold holding temperatures		0	0	5
6	NN NN	OUT O	NA			ting Contamination properly washed	by Hands	0	0		21	8	0	0 ※	-	Proper date marking and disposition Time as a public health control: procedures a	and constants	_	0	
7	鬣	0	0	0	No bare hand co alternate proced	intact with ready-to-eat	foods or approved	0	0	5	<u> </u>	IN	OUT			Consumer Advisory	ind records	0	9	
8	×	0 001	NA	100		Approved Source		0	0	2	23	_	0	0		Consumer advisory provided for raw and une food	sercooked	0	0	4
9	黨	0				om approved source			0			IN	OUT	NA	NO	Highly Susceptible Population	na			
	XX		0	0		t proper temperature ndition, safe, and unadu	Iterated	8	0	5	24	0	0	X		Pasteurized foods used; prohibited foods not	offered	0	0	5
	õ	ō	×	0		s available: shell stock t		ō	ō			IN	OUT	NA	NO	Chemicais				
		OUT		NO	Prot	ection from Contam	ination				25	0	0	X		Food additives: approved and properly used		0	의	5
		<b>0</b> 溪			Food separated Food-contact su	and protected flaces: cleaned and san	itized		0	4	26	<u>実</u> IN		NA	NO	Toxic substances properly identified, stored, Conformance with Approved Proc		0	0	
	_				Proper dispositio served	on of unsafe food, return	ed food not re-	0	0	2	27	0	0	冥		Compliance with variance, specialized proce HACCP plan	ss, and	0	0	5
				Goo	d Retail Pract	ices are preventive	measures to co	ontro	l the	intr	oduc	tion	of	atho	gens	, chemicals, and physical objects in	to foods.			
								GOO	DR	ETAI	L PR	ACT	TICE	8						
F				00	T=not in compliance	e npliance Status	COS=corre		n-site R		inspe	ction				R-repeat (violation of the same co Compliance Status		cos	RI	WT
		OUT			Safe	Food and Water				_		0	TUK			Utensils and Equipment			~ 1	
	8				d eggs used whe ice from approve			8	0	1	4	5	0 1			nfood-contact surfaces cleanable, properly de and used	esigned,	0	0	1
3	0				btained for speci	alized processing meth	ods	Ŏ	Õ	Ĩ	4	6	-			g facilities, installed, maintained, used, test st	rips	0	0	1
	11	0	Prop	er coo		ed; adequate equipment	t for temperature	0	0	2	4	7 1		Vonfoo	d-con	tact surfaces clean	-	0	0	1
		-	contr		property applied	fer het helden	-					-	TUK	100.000	f oold	Physical Facilities		~	~	
	2				properly cooked thawing methods			8	0	1	4	_	-			i water available; adequate pressure italied; proper backflow devices		8	허	2
3	14		Then	morme	eters provided an			0	0	1	5	_				waste water properly disposed			0	2
H,		OUT	Face			od identification	and a stable				5	_	_			is: properly constructed, supplied, cleaned			0	1
	5	0 OUT	F000	prop		nal container; required r		0	0	1	5		-	-	·	use properly disposed; facilities maintained		2	2	1
	6	-	Insec	ts ro	dents, and anima	of Food Contamina	tion	0	0	2	5	_	-			ities installed, maintained, and clean Intilation and lighting; designated areas used		0	0	1
⊢	7	-				uring food preparation,	torano & disnlav	0	0	1	F	+	UT			Administrative Items		-	-	
	8				leanliness	and roos preparatori,	annege a antipay	0	0	1	5	_		Sument	perm	nit posted		0	0	
_	9	25	Wipir	ng clo	ths; properly use			0	0	1	_					inspection posted		0	0	0
40 O Washing fruits and vegetables				0	0	1		Compliance Status						YES	NO	WT				
-	1	OUT	In-us	e uter	prop nsils; properly sto	er Use of Utensils red		0	0	1	5	7	-	Compli	ance	Non-Smokers Protection Act with TN Non-Smoker Protection Act		X	0	_
4	2	0	Uten	sils, e	quipment and line	ens; properly stored, dri		0	0	1	5	8		lopacc	o pro	ducts offered for sale		0	0	0
	3 4				/single-service at ed properly	rticles; properly stored,	useq		8		<u>_</u>	9	1	10080	co pr	oducts are sold, NSPA survey completed		0	0	
Fail	are to	corre	ot an	y viola	tions of risk factor	items within ten (10) days	s may result in susper	sion o	f you	r food	servic	e est	ablish	ment p	ermit.	Repeated violation of an identical risk factor may	result in revoci	tion o	of you	r food
serv	ice e	stablis	hmen	t perm	sit. Items identified	as constituting imminent	health hazards shall b	e corre	cted i	mmed	ately	or op	eratio	ns shal	l ceas	e. You are required to post the food service establishing a written request with the Commissioner with	lishment permit	in a c	onspi	cuous
						8-14-7)8, 68-14-709, 68-14-						_			$\supset$					
(		1		K	ZV	X	02/2	26/2	024	4		(				n	0	2/2	6/2	024
Sig	natu	re of	Pers	on In	Charge				[	Date	Si	gnatu	ure of	Envir	onme	ental Health Specialist				Date
										~ ~ ~ ~	r u mà					ealth/article/eh-foodservice ****				

PH-2267 (Rev. 6-15)	Free food safety training cla	sses are available each mor	th at the county health department.	RDA 629
1192201 (Nev. 0-10)	Please call (	) 9315601182	to sign-up for a class.	101025

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



# Establishment Information

Establishment Name: Waffle House #963 Establishment Number # 605211013

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	Sanitizer Type PPM Temperature ( Fah						
Warewasher	Heat		135					

Equipment Temperature				
Description	Temperature (Fahrenheit)			
Walkin cooler	40			
Wif	0			
Reach in cooler	40			
Lowboy open top cooler egg toppings	40			

Food Temperature		
Decoription	State of Food	Temperature (Fahrenheit)
Precubed precooked ham	Cold Holding	40
Sliced tomatoes	Cold Holding	40
Cooked sausage from raw	Cooking	157
Chilli	Hot Holding	165
White gravy	Hot Holding	163
Cooked chicken breast from raw	Cooking	169
Raw sausage patty	Cold Holding	38
Raw ground beef patty	Cold Holding	37
Raw boneless pork chop	Cold Holding	38

#### Observed Violations

Total # 3

Repeated # 0

14: Ware washer reaching 135. Maintenance man on site to address issue. Immediate follow-up.

39: Several soiled wiping cloths stored on food prep station.

47: Bottom of reach in cooler 2 has excessive old food debris in bottom

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



### Establishment Information

Establishment Name: Waffle House #963

Establishment Number : 605211013

### Comments/Other Observations

1: (IN): ANSI Certified Manager present.

- 2: Pic aware of 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: Employees observed washing hands with soap and water

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: US Foods

- 10: (IN) All food received was in good condition and at the proper temperature.
- 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.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: Proper cooking and temperatures observed for cooked meat products from raw.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: NA: no cooling observed in establishment
- 19: Good hot holding observed equipment in establishment.
- 20: Good cold holding observed in equipment in kitchen.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NA) No food held under time as a public health control.
- 23: Consumer food advisory available 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.

# Establishment Information

Establishment Name: Waffle House #963 Establishment Number: 605211013

Comments/Other Observations (cont'd)

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

## Establishment Information

Establishment Name: Waffle House #963

Establishment Number #: 605211013

Sources				
Source Type:	Water	Source:	CPWS	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comm	ents			

Immediate follow-up #14