## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Carlos and	1000	に開いた	₹/s																	
Feb	his	hme	unt N	lam		Homewood S	Suites Vanderl	bilt/Nashvill	e								O Fermer's Market Food Unit ment O Mobile			
Establishment Name Address		2400 West E	Ind Ave.					_	T	ype o	f Esta	blishn	O Temporary O Seasonal							
City						Nashville		Time in	0	7:2	0 /	٩N	1,	AM /	PM	Time	out 07:25: AM AM / PM			
Insp		an f	Date:			03/21/202	4_Establishment #					Emb	_				· ·			
			Insp			ORoutine	着Follow-up	O Complaint			- О Р					<b>o</b> c	onsultation/Other			
Risi	Ca	tega	ory.			01	\$122	03			04					Follov	w-up Required O Yes 🕱 No Number of S	šeats	12	2
Γ			Ria.														ed to the Centers for Disease Control and Preven e control measures to prevent illness or injury.	tion		
							FOODBORN	NE ILLNESS RJ	SK F	ACT	ors	AN	D PL	JBL	IC HE	ALT	H INTERVENTIONS			
IN	⊨in c		intra plianc		gun		<ul> <li>(IR, OUT, RA, RO) for o</li> <li>NA=not applicable</li> </ul>	NO=not observe		tiem							reach Item as applicable. Deduct points for category or subcat inspection R=repeat (violation of the same code provis		)	
F	-	0	TN		NO	Comp	liance Status		COS	R				Т		1	Compliance Status Cooking and Reheating of Time/Temperature	COS	R	WT
H	IN 減	00	-		NO	Person in charge pr	Supervision esent, demonstrates k	nowledge, and	0	0	5	łL	IN		л п.		Control For Safety (TCS) Foods			
H			TN	A	NO		Employee Health	-			0		6 C				Proper cooking time and temperatures Proper reheating procedures for hot holding	0	00	5
23	XX		-			Management and fo Proper use of restric	od employee awarene	ss; reporting	0	0	5	1 [	IN	1 01	лт N	A NK	Cooling and Holding, Date Marking, and Time as			
			TN		NO	Geo	d Hygienic Practice			-		1	8 C				Proper cooling time and temperature	0	0	
4	黨	0					g, drinking, or tobacco eyes, nose, and mouth	use	8	8	5		9 2				Proper hot holding temperatures Proper cold holding temperatures	0	8	
6			TN	IA	NO	Preventin Hands clean and pr	g Contamination by openly washed	y Hands		0		12	1 🔉			_	Proper date marking and disposition	0	0	9
7	2	0	_	5	0		ct with ready-to-eat foo	ods or approved	0	0	5	ľ	2 C			• I	Time as a public health control: procedures and records     Consumer Advisory	0	0	
8		0	T N	AT	NO	Handwashing sinks	properly supplied and Approved Source	accessible	0	0	2	2	_	_	_	_	Consumer advisory provided for raw and undercooked food	0	0	4
9	黨	0				Food obtained from Food received at pro	approved source		8	0		11	IN	-		A NK				
11	×	0				Food in good condit	ion, safe, and unadulte vailable: shell stock tag		0	0	5	2	4 C	+	-	-	Pasteurized foods used; prohibited foods not offered	0	0	5
12	0	0	N T	~	0	destruction	tion from Contamin		0	0			IN 5 C		JT N		-			
13	0	0	1 8	X	NO	Food separated and	i protected			0		2	5 C	3	>	_	Food additives: approved and properly used Toxic substances properly identified, stored, used	ŏ	0	5
14 15				2			es: cleaned and sanita f unsafe food, returned		0	0	5				л N D SI	-	Compliance with Approved Procedures Compliance with variance, specialized process, and	0	0	
15	~	_				served			0	0	-	Ľ	10	1	1 24	6	HACCP plan	0	<u> </u>	
					Goo	d Retail Practice	is are preventive r	measures to co	ontro	d the	int:	rodu	ctio	n of	path	oge	ns, chemicals, and physical objects into foods.			
					00	T=not in compliance		COS=corre		OD R					\$.)		R-repeat (violation of the same code provision)			
F	_	OU	T	_	_		iance Status ood and Water		COS	R	WT	IF		OUT			Compliance Status Utensils and Equipment	COS	R	WT
	8 9					ed eggs used where i lice from approved s			8	8	1	1Ŀ	45	0			nonfood-contact surfaces cleanable, properly designed, d, and used	0	0	1
	0		Va			obtained for specializ	ed processing method	5	ŏ	ŏ	î	11	46	0			ing facilities, installed, maintained, used, test strips	0	0	1
3	1	0	Pr				adequate equipment fo	or temperature	0	0	2	1 E	47	0	Nonf	ood-o	ontact surfaces clean	0	0	1
	2		Pi	_	food	properly cooked for			0		1		48	OUT	Hot a	nd co	Physical Facilities Id water available; adequate pressure		0	2
	3 4		_	-		thawing methods use eters provided and a			00	0	1		49 50	0			nstalled; proper backflow devices nd waste water properly disposed	0	0	2
F	_	ou	_				Identification			-		1 -	51	Ō	Toile	facili	ties: properly constructed, supplied, cleaned	Ō	0	1
	5	0		bod	prop		container; required rec Feed Contamination		0	0	1	ᄂ	52 53	0		-	efuse properly disposed; facilities maintained icilities installed, maintained, and clean	0	0	1
3	6	0	-	sect	s, ro	dents, and animals r			0	0	2	1 1-	54	0			ventilation and lighting; designated areas used	0	0	1
3	7	×.	8 00	onta	mina	ation prevented durin	g food preparation, sto	rage & display	0	0	1	1		OUT			Administrative items			
	8		_			leanliness			0	0	1		55	0			rmit posted		2	0
	9 0	0	) W	_	×	ths; properly used an ruits and vegetables	nd stored		00	0		١Ľ	56	0	Most	recer	nt inspection posted Compliance Status		O NO	WΤ
4		00		-US0	ute	Preper nsils; properly stored	Use of Utensils		0	0			57	_			e with TN Non-Smoker Protection Act		0	
	23						; properly stored, dried es; properly stored, us		00	0			58 59				roducts offered for sale products are sold, NSPA survey completed	00	0	0
	4					ed properly			0	0	1									
serv	ce e	stab	lishn	nent	perm	nit. Items identified as	constituting imminent he	alth hazards shall b	e corr	ected	imme	diately	y or o	perati	ions sh	all ce	it. Repeated violation of an identical risk factor may result in revo- ase. You are required to post the food service establishment permit filling the second service of the factor of the factor.	t in a i	consp	icuous
							1-708, 68-14-709, 68-14-71					g		- ung		/	y filing a written request with the Commissioner within ten (10) day			
_6	/	<u>ر</u>		$\sum$	20	cv VC	5	03/2	21/2	2024	4	_			$\checkmark$	ý	ender to	03/2	21/2	2024
Sig	Signature of Person In Charge Date Signature of Environmental Health Specialist Date																			
_								r							-	-	/health/article/eh-foodservice **** ounty health department.			
PH-	2267	(Re	v. 6-	15)			Please	-		153				10116			up for a class.		R	DA 629

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



#### Establishment Information

Establishment Name: Homewood Suites Vanderbilt/Nashville Establishment Number #: 605229971

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)					

Equipment l'emperature	
Description	Temperature (Fahrenheit)

Food Temperature	State of Food	Temperature ( Fahrenheit

Observed Violations
Total # 1 Repeated # 0
Repeated # 0
37:

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



### Establishment Information

Establishment Name: Homewood Suites Vanderbilt/Nashville Establishment Number : 605229971

comments/Other Observations	_

"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: Homewood Suites Vanderbilt/Nashville Establishment Number: 605229971

Comments/Other Observations (cont'd)

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

### Establishment Information

Establishment Name: Homewood Suites Vanderbilt/Nashville

Establishment Number #: 605229971

Sources		
Source Type:	Source:	

## Additional Comments