

Address

Risk Category

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Follow-up Required

O Farmer's Market Food Unit Stones River Country Club Restaurant Remanent O Mobile Establishment Name Type of Establishment 1830 Nw Broad St. O Temporary O Seasonal Murfreesboro Time in 12:15 PM AM/PM Time out 12:25: PM AM/PM

03/26/2024 Establishment # 605135390 Embargoed 0 Inspection Date ∰ Follow-up Routine O Preliminary

O Complaint O Consultation/Other Purpose of Inspection О3

Number of Seats 470

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

s (IH, OUT, HA, HO) for a

IN-in compliance OUT-not in compliance NA-not applicable NO-not observed						С		
	Compliance Status						R	WT
	IN	OUT	NA	NO	Supervision			
1	×	0			Person in charge present, demonstrates knowledge, and performs duties		0	5
	IN	OUT	NA	NO	Employee Health			
2	$\exists X$	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion		0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	-
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed	0	0	
7	拟	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	X	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT		NO	Protection from Contamination			
13	×	0	0		Food separated and protected	0	0	4
14	X	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	M	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

Compliance Status						COS	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	寒	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	٠
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	×	0	0	0	Proper cooling time and temperature	0	0	
19	×	0	0	0	Proper hot holding temperatures	0	0	
20	24	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	*
22	0	0	×	0	Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory			
23	×	0	0		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	300		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT	NA	NO	Chemicals			
25		0	26		Food additives: approved and properly used	0	0	5
26	8	0			Toxic substances properly identified, stored, used	0	0	-
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

O Yes 疑 No

trol the introduction of pathoge is, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	-
30	0	Variance obtained for specialized processing methods	0	0	١.
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	:
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	1
34	0	Thermometers provided and accurate	0	0	Т
	OUT	Food Identification		_	
35	0	Food properly labeled; original container; required records available	0	0	-
	OUT	Prevention of Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	885	Contamination prevented during food preparation, storage & display	0	0	
38	0	Personal cleanliness	0	0	Г
39	0	Wiping cloths; properly used and stored	0	0	
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	Г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	
44	10	Gloves used properly	- 0	0	

spect	ion	R-repeat (violation of the same code provision)		
		Compliance Status	COS	R	WT
	OUT	Utensiis and Equipment			
45	0	Food and norfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	0	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	2
49	0	Plumbing installed; proper backflow devices	0	0	2
50	0	Sewage and waste water properly disposed	0	0	2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	Т		
55	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	۰
		Compliance Status	YES	NO	WT
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

on report in a conspicuous manner. You have the right to request a h %, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. ten (10) days of the date of the

03/26/2024

Signature of Person In Charge

Date Signature of Environmental Health Specialist

03/26/2024 Date

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

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629) 6158987889 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information				
Establishment Name: Stones River Co	untry Club Restauran	ıt		
Establishment Number #: [605135390				
NSPA Survey - To be completed if				
Age-restricted venue does not affirmatively rest twenty-one (21) years of age or older.				
Age-restricted venue does not require each per	son attempting to gain entry	to submit acceptable for	n of identification.	
"No Smoking" signs or the international "Non-Sr	moking" symbol are not cons	picuously posted at every	entrance.	
Garage type doors in non-enclosed areas are n	ot completely open.			
Tents or awnings with removable sides or vents	In non-enclosed areas are r	not completely removed o	r open.	
Smoke from non-enclosed areas is inflitrating in	nto areas where smoking is p	rohibited.		
Smoking observed where smoking is prohibited	by the Act.			
Warewashing Info	Santilare Tues	554	Tampardus (5-1	nanh atin
Machine Name	Sanitizer Type	PPM	Temperature (Fah	renhelt)
Equipment Temperature				
Description			Temperature (Fahr	enhelft
			1	
Food Temperature				
		1	T	
Description		State of Food	Temperature (Fahr	enhelt)

Observed Violations	
Total # 1	
Repeated # ()	
37:	
""See page at the end of this document for any violations that could not be displayed in this space.	

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Information



Establishment Name: Stones River Country Club Restaurant	
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Comments/Other Observations	
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***See page at the end of this document for any violations that could not be	displayed in this space.
Additional Comments	
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 Name: Stones River Country Club Restaurant		
Establishment Number: 605135390		
Comments/Other Observations (cont'd)		
Additional Comments (cont'd)		
See last page for additional comments.		
Jee last page for additional John		

Establishment Information

Establishment Name: Stones River Coun Establishment Number # 605135390	try Club Restaurant	
7		
Sources		
Source Type:	Source:	
Additional Comments		

Establishment Information