TENNESSEE DEPARTMENT OF HEALTH

AND A					FOOD SERVICE ESTABLISHMENT INSPECTION REPORT									DN REPORT	SCORE					
Catable Land					Bar Louie Bar								Q	C						
Establishment Name			t Nar		2615 Medical Center Parkway Suite 2395								J	Ū						
						615 Medical Center Parkway Suite 2395 O Temporary O Seasonal 1urfreesboro Time in 03:15 PM AM / PM Time out 03:30; PM AM / PM								-						
City Murfreesboro							3:1	5 F	M	_ AJ	M / PI	M Tir	me ou	t <u>03:30</u> ; <u>РМ</u> ам/рм						
Insp	ectic	n Da	te		02/21/202	24 Establishment #	60530204	2		_	Emba	rgoe	d 0)						
Puŋ	oose	of In	spect	tion	Routine	O Follow-up	O Complaint			O Pr	elimin	ary		0	Cor	sultation/Other				
Risi	Cat	egon	,		3 £1	02	O 3			04				Fo	ilow-	up Required O Yes 缆 No	Number of Se	ats	0	
		_	isk i													to the Centers for Disease Control	and Prevent		_	
				as c	ontributing fact											control measures to prevent illness INTERVENTIONS	or injury.			
		(14	rk de	elgne	ted compliance statu											ach item as applicable. Deduct points for cate	gory or subcateg	(ery.)		
IN	⊧in c	ompii	ance			nce NA=not applicable	NO=not observe		1.01)\$ <u>=</u> cc	recte	d on-s	ite duri	ng ins	pection R=repeat (violation of the sa Compliance Status				WT
h	IN	OUT	NA	NO	Com	Supervision		003	R		h		~			Cooking and Reheating of Time/Ten		.03	~ 1	WT
1	8	0			Person in charge p	resent, demonstrates kr	owledge, and	0	0	5		IN		NA		Control For Safety (TCS) Foo				
Ľ			NA	NO	performs duties	Employee Health	-	-		-		00	00	- Š		Proper cooking time and temperatures Proper reheating procedures for hot holding		8	읭	5
	X	0				food employee awarene	ss; reporting		0			IN		NA	-	Cooling and Holding, Date Marking, a		- 1	- 1	
3	2	0			,	iction and exclusion	-	0	0	Ľ						a Public Health Control		_	-	
4	20	0	NA	_		od Hygienic Practice ing. drinking, or tobacco		0	0	-	18	00	0	0 室		Proper cooling time and temperature Proper hot holding temperatures		8		
5	22			0	No discharge from	eyes, nose, and mouth		Ō	0	°	20	0	0	25		Proper cold holding temperatures		0	0	5
6	X	0	NA		Hands clean and p	ing Contamination by roperly washed	riands	0	0		21	0	0 0			Proper date marking and disposition		0	8	
7	黨	0	0	0	No bare hand cont alternate procedure	act with ready-to-eat foo	ds or approved	0	0	5	"	IN	OUT	NA		Time as a public health control: procedures Consumer Advisory	and records	9	9	
8	×	0				s properly supplied and a	accessible	0	0	2	23	0	0	12	no	Consumer advisory provided for raw and un	dercooked	0	0	4
	IN 嵐		NA	NO	Food obtained from	Approved Source n approved source		0	0	-	-	IN	OUT		NO	food Highly Susceptible Populatio		-	-	
10	0	0	0	20	Food received at p	roper temperature	and a	0	0	5	24	0	0	88		Pasteurized foods used; prohibited foods no		0	0	5
	<u>米</u>	0	×	0		ition, safe, and unadulte rvailable: shell stock tag		0	0	°	-	IN	OUT	-	10	Chemicals		- 1	-	
12			NA	-	destruction	tion from Contamin	tion	-	-	_	25	0		25		Food additives: approved and properly used		न	01	
13	X	0	0		Food separated an	d protected			0		26	Ř	ŏ			Toxic substances properly identified, stored,	used	ŏ		5
	_	0	0			ces: cleaned and sanitiz of unsafe food, returned		-	0	5		IN	OUT	-	NO	Conformance with Approved Proc Compliance with variance, specialized proce	use and	_	_	
15	黛	0			served	or unsale lood, retained	lood not re-	0	0	2	27	0	0	8		HACCP plan	roo, and	0	٥	5
				Goo	d Retail Practic	es are preventive n	neasures to co	ntro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects in	to foods.			
											LPR									
				00	T=not in compliance		COS=corre	cted o	n-site	during			IVER			R-repeat (violation of the same of				
		OUT				Food and Water		COS	R	WT		10	UT			Compliance Status Utensils and Equipment		cos	R	WT
2					d eggs used where				0		4	5 (nfood-contact surfaces cleanable, properly d	lesigned,	0	0	1
2	9				tice from approved obtained for special	source zed processing methods	i	8	0	2	4					and used	tring	-	+	
		OUT	Deco			mperature Control	a hanna a san hanna	_			4		-			g facilities, installed, maintained, used, test s tact surfaces clean		0	이	1
3	1	0	contr		oling methods used	; adequate equipment fo	r temperature	0	0	2	-	_	UT	VOITIOO	u+cur	Physical Facilities		<u> </u>	-	-
	23				properly cooked for				8	1	4	_				water available; adequate pressure		8	읭	2
	4				thawing methods un eters provided and a			10	6	1	49	_	_			talled; proper backflow devices waste water properly disposed		_	허	2
		OUT			Feed	Identification					5	1	0 T	oilet fa	cilitie	s: properly constructed, supplied, cleaned		0	0	1
3	5	0	Food	l prop	erly labeled; origina	I container; required rec	ords available	0	0	1	5		-	-		se properly disposed; facilities maintained			0	1
_		OUT				f Food Contaminatio	n				5	_	-			ities installed, maintained, and clean			의	1
3	6	-			dents, and animals			0	0	2	5	• •	0 A	vdequa	de ve	ntilation and lighting; designated areas used		0	이	1
3	7	X	Cont	amin	ation prevented duri	ng food preparation, sto	rage & display	0	0	1		0	UT			Administrative Items				
_	8 9	-	-		leanliness ths; properly used a	and stored		0	0	1	5					nit posted inspection posted		0	읭	0
_	9 0				ruits and vegetable				ŏ		F		<u>~ 1</u> ~	1006.00	John K	Compliance Status	,	YES		WT
4	_	OUT	D-1-F	e i de	Proper nsils; properly store	Use of Utensils		0		-	5	,	-	Some	2000	Non-Smokers Protection Act with TN Non-Smoker Protection Act		म्रा	01	
4	2	0	Uten	sils, e	quipment and linen	s; properly stored, dried		0	0	1	5	8	T	obacc	o pro	ducts offered for sale		0	0	0
	3 4				Vsingle-service artic ed properly	cles; properly stored, use	ю		8		50	9]	H	tobac	co pr	oducts are sold, NSPA survey completed		0	0	
						ems within ten (10) dave m	ay result in susper				servic	0 615	blish	ment pe	ermit.	Repeated violation of an identical risk factor ma	y result in revoca	tion e	fype	r food
serv	ce es	tablis	hmen	t perm	nit. Items identified as	constituting imminent he	alth hazards shall b	e corre	cted i	mmed	iately (or ope	mation	ns shall	ceas	e. You are required to post the food service estal ling a written request with the Commissioner with	blishment permit i	in a c	onspi	cuous
						14-708, 68-14-709, 68-14-711							-							

X. 3 Signature of Person In Charge

02/21/2024 Date Signature of Environment

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02/21/2024

Date

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

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Bar Louie Bar Establishment Number #: [605302042]

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	PPM	Temperature (Fahrenheit)						
Dish machine 3 comp sink not set up	CI CI	100							

Equipment Temperature						
Description	Temperature (Fahrenheit)					
Beer ric	36					

Food Temperature		
Decoription	State of Food	Temperature (Fahrenheit
No tcs foods available		

Observed Violations

Total # 1

Repeated # 0

37: Employee personal drinks stored on clean dishes rack next to dishes on 3 comp sink.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Bar Louie Bar

Establishment Number : 605302042

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

- 2: Management awareness
- 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 stayed on task

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 food source

- 10: (NO): No food received during inspection.
- 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: No raw foods
- 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: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: No cooling observed
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: (NA) Establishment does not cold hold TCS foods.
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 22: (NA) No food held under time as a public health control.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 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.

***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: Bar Louie Bar

Establishment Number: 605302042

Comments/Other Observations (cont'd)

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

Establishment Information Establishment Name: Bar Louie Bar Establishment Number #: 605302042

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esboro city

Additional Comments