TENNESSEE DEPARTMENT OF HEALTH VICE ESTARI ISHMENT INSPECTION DEPORT ----

| Æ | 1 | | | | FOOD SERVICE EST | ABL | ISł | IMI | ENI | T 11 | NSI | PEC | TIC | SON REPORT | ORE | | |
|--------------------|----------|--------|------------------|----------------|--|------------|--------|-------------|--------|---------|---------|----------|--------|--|-----------|------------|----|
| | | H | | | | | | | | | | | | | | | |
| Establ | ishr | ment | t Nan | | Citizen Kitchens | | | | | Tur | | Establi | ehmo | Fermer's Market Food Unit Server O Mobile | Ir | 7 | |
| Addres | 55 | | | | 4611 Alabama Avenue | | | | | .,, | 20101 | Louisi | 2000 | O Temporary O Seasonal | | | |
| City | | | | | Nashville Time | in 02 | 2:0 | 0 F | PM | _ A | M/P | M Tir | ne ou | и 02:05: PM АМ/РМ | | | |
| Inspec | tion | n Da | te | | 04/01/2024 Establishment # 6052453 | 29 | | _ | Emba | argoe | d C |) | | | | | |
| Purpos | se c | of In: | spect | ion | O Routine | nt | | O Pr | elimir | ary | | 0 | Cor | nsultation/Other | | | |
| Risk C | ate | | | | O1 第2 O3 | | | O 4 | _ | | | | | up Required O Yes 罠 No Number | | | |
| | | | | | ors are food preparation practices and employe contributing factors in foodborne illness outbrea | | | | | | | | | | | | |
| | | (Me | rk der | lgnet | FOODBORNE ILLNESS F ted compliance status (IH, OUT, HA, HO) for each aumbered h | | | | | | | | | | antegory | •) | |
| IN=in | ica | mpīt | nce | | OUT=not in compliance NA=not applicable NO=not obser | | | |)S=co | rrecte | d on-s | ite duri | ng ins | pection R=repeat (violation of the same code pr | | 10 | 1 |
| 11 | 1 0 | DUT | NA | NO | Compliance Status Supervision | cos | R | WI | F | IN | 017 | NA | 10 | Compliance Status Cooking and Reheating of Time/Temperature | _ | <u>n</u> K | WT |
| 1 8 | 8 | 0 | _ | | Person in charge present, demonstrates knowledge, and | 0 | 0 | 5 | 10 | | | | | Control For Safety (TCS) Foods | | 10 | |
| IN | 10 | DUT | NA | NO | Employee Health | | | | 10 | 00 | 0 | | | Proper cooking time and temperatures Proper reheating procedures for hot holding | 8 | 00 | 5 |
| 2) 3)] | | 읭 | | | Management and food employee awareness: reporting Proper use of restriction and exclusion | 0 | 0 | 5 | | IN | ουτ | NA | NO | Cooling and Holding, Date Marking, and Time a Public Health Control | 13 | | |
| _ | ~ | _ | NA | NO | Good Hygienic Practices | - | Ū | | 18 | × | 0 | 0 | 0 | Proper cooling time and temperature | 0 | То | 1 |
| | | 8 | | | Proper eating, tasting, drinking, or tobacco use No discharge from eyes, nose, and mouth | 8 | 0 | 5 | | | 0 | | 0 | Proper hot holding temperatures Proper cold holding temperatures | 8 | 0 | 1 |
| IN | 10 | OUT | NA | NO | Preventing Contamination by Hands | | | | | X | | | 0 | Proper date marking and disposition | ŏ | | 5 |
| 6 ji 7 ji | _ | 0 | 0 | 0 | Hands clean and properly washed No bare hand contact with ready-to-eat foods or approved | 0 | 0 | 5 | 22 | - | 0 | × | | Time as a public health control: procedures and record | 5 O | 0 | |
| 8 2 | <u> </u> | | - | - | alternate procedures followed Handwashing sinks properly supplied and accessible | | 0 | 2 | 23 | _ | OUT | NA X | NO | Consumer Advisory Consumer advisory provided for raw and undercooked | - | 0 | |
| IN | 1 0 | 이 | NA | | Approved Source Food obtained from approved source | 0 | 0 | | 23 | IN | O | | NO | food Highly Susceptible Populations | 0 | 10 | 4 |
| 10 C | 5 | 0 | 0 | | Food received at proper temperature | 0 | 0 | | 24 | _ | 0 | 22 | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| 11 E | _ | 8 | × | 0 | Food in good condition, safe, and unadulterated Required records available: shell stock tags, parasite | 0 | 0 | 5 | - | IN | OUT | | NO | Chemicals | - | 1 | |
| IN | 10 | DUT | NA | - | destruction Protection from Contamination | - U | | | 25 | 0 | | 26 | | Food additives: approved and properly used | - 0 | 0 | |
| 13 5 | | | 8 | | Food separated and protected Food-contact surfaces: cleaned and sanitized | _ | 0 | | 26 | 黛 | 0 | | | Toxic substances properly identified, stored, used Conformance with Approved Procedures | 0 | ō | 1° |
| 14) 15) | _ | 0 | _ | | Proper disposition of unsafe food, returned food not re- | 0 | 0 | 5 | 27 | IN O | OUT | 22 | NU | Compliance with variance, specialized process, and | 0 | 0 | 5 |
| | • | | | | served | | | | | | | | | HACCP plan | | | |
| | | | | Goo | d Retail Practices are preventive measures to o | | | | | | _ | | gens | , chemicals, and physical objects into foods | | | |
| | | | | 00 | T=not in compliance COS=co | rected o | n-site | | | | | 5 | | R-repeat (violation of the same code provisio | 1) | | |
| | Тс | DUT | | _ | Compliance Status Safe Food and Water | COS | R | WT | F | | UT | _ | _ | Compliance Status Utensils and Equipment | COS | S R | WT |
| 28 29 | T | 0 | | | ed eggs used where required Jice from approved source | 8 | 8 | 1 | 4 | | ٥F | | | nfood-contact surfaces cleanable, properly designed, | 0 | 0 | 1 |
| 30 | T | Õ | | | obtained for specialized processing methods | ŏ | 0 | 2 | 4 | 6 | - | | | and used g facilities, installed, maintained, used, test strips | 6 | 0 | 1 |
| | Ŧ | OUT | Prop | er co | Food Temperature Control oling methods used; adequate equipment for temperature | | | | 4 | _ | - | | | tact surfaces clean | 0 | 6 | |
| 31 | | ~ | contr | ol | properly cooked for hot holding | 0 | 0 | 2 | | - | UT O | | lee!d | Physical Facilities water available; adequate pressure | | 10 | |
| 33 | _ | | | | thawing methods used | - ŏ | 0 | | 4 | _ | - | | | talled; proper backflow devices | 8 | 8 | |
| 34 | _ | OUT | Therr | morme | eters provided and accurate Food Identification | 0 | 0 | 1 | | | - | | | waste water properly disposed s: properly constructed, supplied, cleaned | - 8 | 0 | |
| 35 | - | _ | Food | prop | erly labeled; original container; required records available | 0 | 0 | 1 | | - | | | | use properly disposed; facilities maintained | ō | ō | 1 |
| | ¢ | OUT | | | Prevention of Feed Contamination | | | | 5 | 3 2 | R F | hysica | I faci | ities installed, maintained, and clean | 0 | 0 | 1 |
| 36 | 1 | ٥ | Insec | ts, ro | odents, and animals not present | 0 | 0 | 2 | 5 | 4 | 0 / | \dequa | te ve | ntilation and lighting; designated areas used | 0 | 0 | 1 |
| 37 | | X | Conta | amina | ation prevented during food preparation, storage & display | 0 | 0 | 1 | | 0 | UT | | | Administrative Items | | | |
| 38 39 | _ | - | | | cleanliness ths; properly used and stored | 0 | 00 | 1 | | _ | - | | - | nit posted inspection posted | 0 | 0 | 0 |
| 40 | | 0 | | | ruits and vegetables | | ŏ | | Ľ | * 1 | 5 Iv | | JOHR . | Compliance Status | | | wr |
| 41 | | OUT | In-us | e ute | Proper Use of Utensils nsils; properly stored | 0 | 0 | 1 | 5 | | - | Somplia | ance | Non-Smokers Protection Act with TN Non-Smoker Protection Act | - 33 | 0 | |
| 42 43 | | 0 | Utens | sils, e | equipment and linens; properly stored, dried, handled s/single-service articles; properly stored, used | 0 | | 1 | 5 | 8 | | | | ducts offered for sale oducts are sold, NSPA survey completed | 0 | 0 | 0 |
| 44 | | | | | ed properly | | ŏ | | Ľ | | | | 1991 | | | | |
| | | | | | ations of risk factor items within ten (10) days may result in susp mit items identified as constitution imminant health beauch shall | | | | | e est | ablish | ment pe | ermit. | Repeated violation of an identical risk factor may result in n | | | |
| COLUMN TO BE STATE | | _ | | | nit, items tokened as constituting imministre reach nazaros shar | De corre | cted i | immed | iately | or op | | | | e. You are required to post the food service establishment p | rmit in a | conse | |
| manner report. | T.C | d por | st the action | most is 68- | recent inspection report in a conspicuous manner. You have the 14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14 | right to r | eques | | | | eratio | ns shall | ceas | e. You are required to post the food service establishment po | | | |

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Signature of Person In Charge

1/2024 Date Signature of Environmental Health Specialist

04/01/2024

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| , | Additiona | al food | safet | y in | forma | tion can | be found on our web | site, h t | ttp://t | n.gov/he | alth/a | artick | e/eh- | foods | ervic | e **** |
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| PH-2267 (Rev. 6-15) | Free food safety training classes are available each month at the or Please call () 6153405620 to sign | ounty health department. RDA 629 -up for a class. |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Citizen Kitchens Establishment Number #: 605245329

| 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) | | | | | | | |
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| Equipment l'emperature | |
|------------------------|--------------------------|
| Description | Temperature (Fahrenheit) |
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| Food Temperature Decorption | State of Food | Temperature (Fahrenheit |
|--------------------------------|---------------|-------------------------|
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| bserved Violations | | |
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| epeated # () | | |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Citizen Kitchens Establishment Number : 605245329

Comments/Other Observations

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| *See page at the | | | |

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: Citizen Kitchens

Establishment Number : 605245329

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Citizen Kitchens Establishment Number #: 605245329

| Sources | | |
|--------------|---------|--|
| Source Type: | Source: | |

Additional Comments