



# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

100

Establishment Name PEARL DIVER Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile  
Address 1008 GALLATIN AVE ☐ Temporary ☐ Seasonal  
City Nashville Time in 03:10 PM AM / PM Time out 03:15 PM AM / PM  
Inspection Date 03/21/2024 Establishment # 605255645 Embargoed 0  
Purpose of Inspection ☐ Routine ☒ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other  
Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats 50

**Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.**

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=In compliance OUT=not in compliance NA=not applicable NO=not observed COS=corrected on-site during inspection R=repeat (violation of the same code provision)					Compliance Status			COS R WT		
Supervision					Compliance Status			COS R WT		
1	IN	OUT	NA	NO	Person in charge present, demonstrates knowledge, and performs duties					5
Employee Health					Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			COS R WT		
2	IN	OUT	NA	NO	Management and food employee awareness, reporting					5
3	IN	OUT	NA	NO	Proper use of restriction and exclusion					5
4	IN	OUT	NA	NO	Proper cooking time and temperatures					5
Good Hygienic Practices					Cooling and Holding, Date Marking, and Time as a Public Health Control			COS R WT		
5	IN	OUT	NA	NO	Proper reheating procedures for hot holding					5
6	IN	OUT	NA	NO	Proper cooling time and temperature					5
7	IN	OUT	NA	NO	Proper hot holding temperatures					5
8	IN	OUT	NA	NO	Proper cold holding temperatures					5
9	IN	OUT	NA	NO	Proper date marking and disposition					5
Preventing Contamination by Hands					Time as a public health control: procedures and records			COS R WT		
10	IN	OUT	NA	NO	Hands clean and properly washed					5
11	IN	OUT	NA	NO	No bare hand contact with ready-to-eat foods or approved alternate procedures followed					5
12	IN	OUT	NA	NO	Handwashing sinks properly supplied and accessible					2
Approved Source					Consumer Advisory			COS R WT		
13	IN	OUT	NA	NO	Food obtained from approved source					4
14	IN	OUT	NA	NO	Food received at proper temperature					5
15	IN	OUT	NA	NO	Food in good condition, safe, and unadulterated					5
16	IN	OUT	NA	NO	Required records available: shell stock tags, parasite destruction					2
Protection from Contamination					Highly Susceptible Populations			COS R WT		
17	IN	OUT	NA	NO	Food separated and protected					4
18	IN	OUT	NA	NO	Food-contact surfaces: cleaned and sanitized					5
19	IN	OUT	NA	NO	Proper disposition of unsafe food, returned food not re-served					2
Chemicals					Compliance with Approved Procedures			COS R WT		
20	IN	OUT	NA	NO	Food additives: approved and properly used					5
21	IN	OUT	NA	NO	Toxic substances properly identified, stored, used					5
22	IN	OUT	NA	NO	Compliance with variance, specialized process, and HACCP plan					5

**Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.**

OUT=not in compliance COS=corrected on-site during inspection R=repeat (violation of the same code provision)					Compliance Status			COS R WT		
Safe Food and Water					Compliance Status			COS R WT		
28	OUT	Pasteurized eggs used where required			45	OUT	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			1
29	OUT	Water and ice from approved source			46	OUT	Warewashing facilities, installed, maintained, used, test strips			1
30	OUT	Variance obtained for specialized processing methods			47	OUT	Nonfood-contact surfaces clean			1
Food Temperature Control					Physical Facilities			COS R WT		
31	OUT	Proper cooling methods used; adequate equipment for temperature control			48	OUT	Hot and cold water available; adequate pressure			2
32	OUT	Plant food properly cooked for hot holding			49	OUT	Plumbing installed; proper backflow devices			2
33	OUT	Approved thawing methods used			50	OUT	Sewage and waste water properly disposed			2
34	OUT	Thermometers provided and accurate			51	OUT	Toilet facilities: properly constructed, supplied, cleaned			1
Food Identification					52	OUT	Garbage/refuse properly disposed; facilities maintained			1
35	OUT	Food properly labeled; original container; required records available			53	OUT	Physical facilities installed, maintained, and clean			1
Prevention of Food Contamination					54	OUT	Adequate ventilation and lighting; designated areas used			1
36	OUT	Insects, rodents, and animals not present			Administrative Items			COS R WT		
37	OUT	Contamination prevented during food preparation, storage & display			55	OUT	Current permit posted			0
38	OUT	Personal cleanliness			56	OUT	Most recent inspection posted			0
39	OUT	Wiping cloths: properly used and stored			Compliance Status			YES NO WT		
40	OUT	Washing fruits and vegetables			Non-Smokers Protection Act			COS R WT		
Proper Use of Utensils					57	OUT	Compliance with TN Non-Smoker Protection Act			0
41	OUT	In-use utensils; properly stored			58	OUT	Tobacco products offered for sale			0
42	OUT	Utensils, equipment and linens; properly stored, dried, handled			59	OUT	If tobacco products are sold, NSPA survey completed			0
43	OUT	Single-use/single-service articles; properly stored, used								
44	OUT	Gloves used properly								

Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous manner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this report. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge [Signature] Date 03/21/2024 Signature of Environmental Health Specialist [Signature] Date 03/21/2024

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

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**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)
Low temp machine	Cl	50	

**Equipment Temperature**

Description	Temperature ( Fahrenheit)

**Food Temperature**

Description	State of Food	Temperature ( Fahrenheit)

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**Comments/Other Observations**

- 1:
- 2:
- 3:
- 4:
- 5:
- 6:
- 7:
- 8:
- 9:
- 10:
- 11:
- 12:
- 13:
- 14: (IN) All food contact surfaces of equipment and utensils cleaned and sanitized using approved methods.
- 15:
- 16:
- 17:
- 18:
- 19:
- 20:
- 21:
- 22:
- 23:
- 24:
- 25:
- 26:
- 27:
- 57: No smoking sign not available at entrance.

\*\*\*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.

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**Comments/Other Observations (cont'd)****Additional Comments (cont'd)**

***See last page for additional comments.***

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**Sources**

Source Type:	Source:
Source Type:	Source:
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**Additional Comments**

All critical items corrected.