# TENNESSEE DEPARTMENT OF HEALTH

			D			FOOD SERV	ICE ESTA	BL	ISH	IME	ENT		S	PEC	TIC	ON REPORT	sco			
Esta	bish	imen	t Nan		Buffalo Wild	d Wings #256						Tim		Establi	- 1	O Fermer's Market Food Unit	10		ſ	
Add	ress				5744 Hwy 1	153						тур	e or	CSIADIR	snme	O Temporary O Seasonal				/
City					Hixson Time in 01:40 PM AM / PM Time out 02:00; PM AM / PM															
		_			08/11/20	22 Establishment #						-			ine on					
		n Da			_					-			a _		-	L				
			spect	ion	O Routine	樹 Follow-up	O Complaint			O Pro	elimin	ary				nsuitation/Other			24	1
Risk	Cat	egor, R	·	act	O1	22	O3 and employee	beha		04	at c		honh			up Required O Yes 🗮 No I to the Centers for Disease Contr	Number of S	eats tion	24	4
																control measures to prevent illne				
			rix day	land	ed compliance stat											INTERVENTIONS ach liem as applicable. Deduct points for c	atenory or subcate	-		
IN	in co	ompii			OUT=not in complia		NO=not observe									spection R=repeat (violation of the				
5	_				Com	pliance Status		cos	R	WT					_	Compliance Status		COS	R	WT
н	-	OUT	NA	NO	Parson in charge	Supervision present, demonstrates i	mauladae and			_		IN	τυο	NA	NO	Cooking and Reheating of Time/I Control For Safety (TCS) F				
1		0		110	performs duties		nomeuge, and	0	0	5		*				Proper cooking time and temperatures		00	0	5
2	X		NA	NO	Management and	Employee Health food employee awarene	ess; reporting	0			"	0	0			Proper reheating procedures for hot hold Ceeling and Holding, Date Marking		0	0	
3	黨	0			Proper use of rest	riction and exclusion		0	0	5		IN	OUT	NA	NO	a Public Health Contro				
	IN (	_	NA			od Hygionic Practice ting, drinking, or tobacci					18	0 家	0			Proper cooling time and temperature Proper hot holding temperatures		00	8	
5	24	0		0	No discharge from	eyes, nose, and mouth	1	ŏ	ŏ	5	20	25	0	0		Proper cold holding temperatures		0	0	5
	IN C	001	NA		Prevent Hands clean and	ing Contamination b properly washed	y Hands	0	0	_		*				Proper date marking and disposition			0	
-	×	0	0	0	No bare hand con	tact with ready-to-eat fo	ods or approved	0	ō	5	22	-	0	NA		Time as a public health control: procedur	es and records	0	٥	
8	×	0			alternate procedur Handwashing sink	is properly supplied and	accessible	0	0	2	23	IN O	001		NO	Consumer advisory provided for raw and	undercooked	0	0	4
_	IN / 家		NA	NO	Food obtained from	Approved Source m approved source		0	0	_		IN	OUT		NO	food Highly Susceptible Popula	tions	-	-	-
10	0	0	0	20	Food received at p	proper temperature		0	0		24		0			Pasteurized foods used; prohibited foods		0	0	5
11 12	_	0	×	0		tition, safe, and unadult available: shell stock ta		0	0	5	-	IN	OUT		10	Chemicals	not onered	-	-	•
			NA	-	destruction Prote	ction from Contamin	ation	-		_	25	0		22		Food additives: approved and properly us	sed	0	0	
13	X	0	0		Food separated an	nd protected			0	4	26	Ř	0			Toxic substances properly identified, stor	red, used	ŏ	ŏ	5
14	_	0	0			aces: cleaned and sanit of unsafe food, returne		0	0	5		IN	OUT	-	NO	Conformance with Approved P Compliance with variance, specialized pr		-		
15	2	0			served	er unsure resul, resultio		0	0	2	27	0	0	黨		HACCP plan	eress, and	0	0	5
				Goo	d Retail Practic	ces are preventive	measures to co	ntro	l the	intr	oduc	tion	of	patho	gens	, chemicals, and physical objects	into foods.			
								600	D R	-TA	L PR	ACT	ICE	8						
				00	T=not in compliance Com	pliance Status	COS=corre	cted o	R R	during WT	inspe	ction				R-repeat (violation of the sam Compliance Status		COS	R	WT
	_	OUT			Safe	Food and Water			<u> </u>	_		0	UT			Utensils and Equipment				
2					d eggs used when ice from approved			8	8	1	4	5 0				infood-contact surfaces cleanable, properl and used	ly designed,	0	0	1
3	0		Varia		btained for special	ized processing method mperature Control	ts .	Ő	0	1	4	6 (	0	Narews	ashin	g facilities, installed, maintained, used, ter	st strips	0	0	1
3		0	_	er co		t; adequate equipment f	or temperature	0	0	2	4	7 0	0	Vonfoor	d-cor	ntact surfaces clean		0	0	1
		-	contr			a hat half an	-					-	UT O	1		Physical Facilities		_		
3	_				properly cooked for thawing methods u			8	8	1	4		-			I water available; adequate pressure stalled; proper backflow devices		00	8	2
3	_	-	Then	morme	eters provided and			0	0	1	50		-			waste water property disposed		0	2	2
3	_	OUT O	Food	locon		d Identification al container; required re	oorde available	0	0	1	5	_	_			es: properly constructed, supplied, cleaned use properly disposed; facilities maintaine		0	0 0	1
-		OUT	1000	prop		of Food Contaminati		Ľ		-	5		-	-		lities installed, maintained, and clean		0	0	1
3	-		Insec	ts, ro	dents, and animals			0	0	2	5	_	-			ntilation and lighting; designated areas us	ed	0	ō	1
3	,	0	Cont	amina	ition prevented dur	ring food preparation, st	orage & display	0	0	1		0	UT			Administrative Items				
3	8	0	Pers	onal o	leanliness			0	0	1	5		0	Ourrent	pern	nit posted		0	0	0
3	_				ths; properly used			0	0		54	6 (	0	Most re	cent	inspection posted		0	0	
4	_	OUT	-	ng f	ruits and vegetable Prope	s r Use of Utensils		0	0	1	$\vdash$					Compliance Status Non-Smokers Protection /	let	TES	NO	WT
4	1	0	In-us		nsils; properly store	ed .			0	1	5					with TN Non-Smoker Protection Act		X	0	
4	_					ns; properly stored, drie cles; properly stored, us		0	0		5	5				ducts offered for sale oducts are sold, NSPA survey completed		0	8	0
_					ed properly	and his being and and an		ŏ	ŏ	1	Ľ					and and and an and an		2	-	

in of your food service establishe prected immediately or operation ated violation of an identical risk factor may result in revocation of your foo u are required to post the food service establishment permit in a conspicuou within ten (10) da ult in s ou are requ ds sl be corr HC I g a written request with the Commissioner within ten (10) days of the date of thi ort in a c US 11 You have the right to request a hearing regarding this report by fill 8-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-3 P

	Date	Signature

Signature of Person In Charge

08/11/2022

Date

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#### \*\*\*\* 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 ( ) 4232098110 to sign-up for a class. PH-2267 (Rev. 6-15) RDA 629

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Environmental Health Specialist

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



#### Establishment Information

Establishment Name: Buffalo Wild Wings #256 Establishment Number #: 605213957

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.	
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Warewashing Info											
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)								

Equipment Temperature	ment l'emperature									
Decoription	Temperature (Fahrenheit)									

ecoription	State of Food	Temperature ( Fahrenheit

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Establishment Name: Buffalo Wild Wings #256 Establishment Number: 605213957

comments/Other Observations	

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: Buffalo Wild Wings #256 Establishment Number: 605213957

Comments/Other Observations (cont'd)

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

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Sources		
Source Type:	Source:	

## Additional Comments