TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

100		1															1 C		^	
Esta	bisł	nem	t Nar	ne	The Paper	Vill Bar					_	Tvr	xe of E	Establi	shme	Farmer's Market Food Unit W Permanent O Mobile	10			
Address		4066 N Mt. Juliet Rd Ste B								211111	O Temporary O Seasonal				/					
City Mount Juliet		Time in	01	L:3	O F	РМ	_ A!	M/PI	A Tr	me ou	иt 01:42: PM АМ/РМ									
Insp	ectio	n Da	te		02/15/20	24_Establishment#														
Purp	ose	of In	spec		ORoutine	摄 Follow-up	O Complaint			O Pr			_		Cor	nsuitation/Other				
Risi	Cat	egon	,		3831	02	03			O 4				Fo	ilow-	up Required O Yes 觊 No	Number of Se	eats		
		R	isk													to the Centers for Disease Co control measures to prevent ill		ion		
																INTERVENTIONS	inter of injury.			
				algaa					item							ach llom as applicable. Deduct points fo				
IN		ompili		_	OUT=not in complia Com	nce NA=not applicable pliance Status	NO=not observe		R	WT		recte	d on-s	ne dun	ng ins	pection R=repeat (violation of Compliance Status	the same code provisio	n) COS	R	WT
	_		NA	NO	Desease in shares	Supervision	and data and		_			IN	ουτ	NA	NO	Cooking and Reheating of Tim Control For Safety (TCS				
1	嵩	0			Person in charge performs duties	present, demonstrates ko	nowledge, and	0	0	5			0		-	Proper cooking time and temperatures	1	8	0	5
2		001	NA	NO	Management and	Employee Health food employee awarene	ss; reporting	0	0		17	0			-	Proper reheating procedures for hot he Ceoling and Holding, Date Marki		0	0	_
3	黨	0				riction and exclusion		0	0	5			OUT		NO	a Public Health Con	trol		_	
4	0	OUT	NA			od Hygienic Practice ing. drinking. or tobecco	-	0	0		19	0	00	盒		Proper cooling time and temperature Proper hot holding temperatures		0	0	
5	O IN	0	NA			eyes, nose, and mouth ing Contamination by		0	0	Ľ		12				Proper cold holding temperatures Proper date marking and disposition		8	00	5
-	0	0			Hands clean and p	roperly washed act with ready-to-eat foo	ods or approved	0	-	5	22	-	0	×		Time as a public health control: proce	dures and records	0	0	
	0	0	0	×	alternate procedur			0	0	2	Þ	_		NA	NO	Consumer Adviso Consumer advisory provided for raw a			-	
	IN	OUT	NA	NO		Approved Source	0000334040				23	O IN	O OUT	NA	_	food		0	0	4
10			0	*	Food received at p			0	00		24		001	200		Highly Susceptible Pope Pasteurized foods used; prohibited foo		0	0	5
	<u>×</u>	0	22	0	Required records	ition, safe, and unadulte available: shell stock tag		0	0	5	H	IN	OUT	-		Chemicais	do not onered	-	-	-
	IN	OUT	NA	NO	destruction Prote	ction from Contamin	ation					0	0		110	Food additives: approved and properly	/ used	0	0	
	息区	00			Food separated an Food-contact surface	nd protected sces: cleaned and sanitia	zed	8	00		26	100 IN	0 OUT	NA	NO	Toxic substances properly identified, s Conformance with Approved		0	0	-
	×	_	-			of unsafe food, returned		0	0	2	27	_	0	2		Compliance with variance, specialized HACCP plan		0	0	5
			_					-											_	
				Goo	d Retail Practic	es are preventive r	neasures to co						-		gens	, chemicals, and physical obje	ts into foods.			
				00	T=not in compliance		COS=corre	ected o	n-site				ICER	, 		R-repeat (violation of the s			_	
		OUT				Food and Water		cos	R	WT		0	UT			Compliance Status Utensils and Equipment		cos	R	WT
2	_	0	Wate	er and	d eggs used when fice from approved	source		8	00	1 2	4	5 (nfood-contact surfaces cleanable, prop and used	erly designed,	0	0	1
3	-	0 OUT	Varia	ince		ized processing method: mperature Control	5	0	0	1	4	6 (0 V	Varewa	ashin	g facilities, installed, maintained, used,	test strips	0	0	1
3	1	0				; adequate equipment fo	or temperature	0	0	2	4	_	-	lonfoo	d-con	tact surfaces clean		0	0	1
3	_			t food	properly cooked fo			0	0			8 (Physical Facilities I water available; adequate pressure			0	2
3	_	_			thawing methods u eters provided and			0	00	1		_				talled; proper backflow devices waste water properly disposed		0	0	2
		OUT				Identification		Ě	_		5	1	-			s: properly constructed, supplied, clea	ned	0	0	1
3	-	0 001	Food	i prop		I container; required rec		0	0	1			-	-		use properly disposed; facilities maintai	ned	2	0	1
3	_		Inse	ts, ro	dents, and animals		an .	0	0	2		_	-			lities installed, maintained, and clean ntilation and lighting, designated areas	used	0	0	1
3	7	0	Cont	amin	ation prevented dur	ing food preparation, sto	rage & display	0	0	1		0	UT			Administrative items				
3	-	0	Pers	onal	leanliness			0	0	1	5	5 0	0 0	urrent	perm	nit posted		0	0	_
3	_				ths; properly used ruits and vegetable			8	0	1	5	6 (0 1	lost re	cent	inspection posted Compliance Status		O YES	O NO	WT
4		OUT				Use of Utensils			0	_	5	-		omeli		Non-Smokers Protection with TN Non-Smoker Protection Act	n Act			
4	2	0	Uten	sils, e	quipment and liner	s; properly stored, dried		0	0	1	5	8	T	obacc	o pro	ducts offered for sale		8	0	٥
4	3 4				single-service art ed properly	cles; properly stored, use	ed	8	8		5	9	If	tobac	co pr	oducts are sold, NSPA survey complet	be	0	0	
																Repeated violation of an identical risk fac e. You are required to post the food servic				
man	ner a	nd po	st the	most	recent inspection rep		er. You have the rig	pht to r	eques							ling a written request with the Commission				
	C	8		_	>		02/1			4		\langle	\angle	L	¥	The	r	2/1	5/2	024
Sigr	natu	re of	Pers	on In	Charge			-572		Date	Si		re d	M	onme	ental Health Specialist		<i>L</i> / L	512	Date
						Additional food safet	y information can	n be fo			ir web	bsite.	http			ealth/article/eh-foodservice ****				
PHG	267	(Rev.	6-15													inty health department.			RD	A 629
						Please	e call () 6	154	1445	532	5		to sig	gn-up	p for a class.				

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: The Paper Mill Bar Establishment Number #: 605319840

ISPA Survey – To be completed if #57 is "No"	
ope-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are wenty-one (21) years of age or older.	
ge-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.	
Sarage type doors in non-enclosed areas are not completely open.	
ents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
moke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	
moking observed where smoking is prohibited by the Act.	

Warewashing Info											
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)								

I	Equipment Temperature									
	Description	Temperature (Fahrenheit)								
I										
I										
I										
I										
I										
I										
٠										

Description	State of Food	Temperature (Fahrenheit

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: The Paper Mill Bar Establishment Number : 605319840

Comments/Other Observations		
٦.		
J.		
L.).		
<u>-</u> . 2.		
5. 1·		
+.		
5. S-		
). 7.		
·		
).).		
<i>.</i>		
J. 1.		
L. D.		
2. 9.		
Ο. Λ·		
4. E·		
D. S: Itom corrected		
5: Item corrected 7: 7:		
7.		
3:		
).		

***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: The Paper Mill Bar Establishment Number: 605319840

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: The Paper Mill Bar Establishment Number #. 605319840

Sources		
Source Type:	Source:	
Additional Comments		

See routine inspection for comments