TENNESSEE DEPARTMENT OF HEALTH IN SERVICE ESTARI ISHMENT INSPECTION REPORT

18/230

£						FOOD SERVICE EST	ABL	ISI	HME	EN	T II	NSI	PEC	TI	ON REPORT	sco	RE		
																$\mathbf{\cap}$	ſ		
Estab	lish	men	t Nar	ne	Papa John's	#85					Tve	e of l	Establ	ishme	Fermar's Merket Food Unit K Permanent O Mobile	Y	7	K	
Addre	55				2745 B Leba	anon Rd.					.,,				O Temporary O Seasonal				
City					Nashville	Tim	e in 02	2:0)5 F	M	A	M/P	м ті	me o	ut 02:25; PM AM / PM				
Inspec	tio	n Da	te		03/25/202	24 Establishment # 6051594						d C							
Purpo	se	of In	spect	tion	ORoutine	∰ Follow-up O Compla			O Pr			-		Cor	nsuitation/Other				
Risk (ate	igon	,		3 \$1	02 03			04				Fo	low-	up Required O Yes 💢 No	Number of S	ieats	0	
		R													to the Centers for Disease Cont control measures to prevent illne	rol and Preven			
						FOODBORNE ILLNESS	RISK F	ACT	ORS	AND	PU	BLIC	HEA	ЦТН	INTERVENTIONS				
IN=ir	1 60			algna		(IN, OUT, NA, NO) for each sumbered it ce NA=not applicable NO=not obset		ltem							ach item as applicable. Deduct points for e spection R=repeat (violation of the)	
_	_					liance Status		R	WŤ	Ē	1	1			Compliance Status			R	WT
	-	-	NA	NO	Person in charge pr	Supervision resent, demonstrates knowledge, and	+-				IN	OUT	NA	NO	Cooking and Reheating of Time/ Control For Safety (TCS)				
	·	O	NA	NO	performs duties	Employee Health	0	0	5		0	00	8	Š	Proper cooking time and temperatures Proper reheating procedures for hot hold	ling	0	8	5
23	¢	0				ood employee awareness; reporting	_	0	1 6 1	Ë	IN	ол			Cooling and Holding, Date Marking	g, and Time as	Ū		
-	×	O	NA	NO	Proper use of restric	d Hygienic Practices	0	0	Ľ	18	0	0	0		a Public Health Contr Proper cooling time and temperature	ol	0	0	
4 8	8	0		0	Proper eating, tastin	ng, drinking, or tobacco use	0	0	5	19	0	0	0		Proper hot holding temperatures		0	0	
1	N		NA	NO	Preventin	eyes, nose, and mouth ag Contamination by Hands	0	0			12	8		0	Proper cold holding temperatures Proper date marking and disposition		00	00	5
6 8	_	0	_	_	Hands clean and pr No bare hand conta	operly washed oct with ready-to-eat foods or approved		0	5	22	0	0	×	0	Time as a public health control: procedu	res and records	0	0	
7 5	·	0	0	0	alternate procedure		0	0	2		IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and	t undercooked	_		
B	N C	our O	NA	NO		Approved Source		0		23	O IN	O	NA	NO	food Highly Susceptible Popula		0	0	4
10 C	5	ō	0	2	Food received at pr	oper temperature	0	0	1 I	24	-	0	200	NO	Pasteurized foods used; prohibited foods		0	0	5
11 ¥	_	0 0	22	0		tion, safe, and unadulterated vailable: shell stock tags, parasite	0	0		H	IN	OUT	_	NO	Chemicals	THOL OTHER CO	-		•
- 10	N	DUT	NA	-	destruction Protect	tion from Contamination	Ť	10	Ч	25	0	0	26		Food additives: approved and properly u	sed	0	ा	
13 (Food separated and	d protected ces: cleaned and sanitized			4	26	100	0		·	Toxic substances properly identified, sto Conformance with Approved P	red, used	0	0	5
14 ¥	_	0	-		Proper disposition of	of unsafe food, returned food not re-	6	0	5	27	0	OUT	104 32	NO	Compliance with variance, specialized p		0	0	5
	~	-			served			-				-	1		HACCP plan		-		
				Go	od Retail Practice	es are preventive measures to						_		gens	s, chemicals, and physical object	s into foods.			
				01	T=not in compliance		prrected o	n-site					5		R-repeat (violation of the sam	e code provision)			
	(DUT				liance Status ood and Water	COS	R	WT	H		UT			Compliance Status Utensils and Equipment		COS	R	WT
28 29					ed eggs used where i d ice from approved s			8	1 2	4	5				infood-contact surfaces cleanable, proper and used	ly designed,	0	0	1
30		0			obtained for specializ	ted processing methods		ŏ			6	-			g facilities, installed, maintained, used, te	st strips	0	0	1
31	Ŧ	OUT	Ргор	er co		nperature Control adequate equipment for temperature	0	0	2	4	7	_			ntact surfaces clean		0	0	1
31		-	contr		properly cooked for	hat habing	-	6				NUT O	int and	f cold	Physical Facilities I water available; adequate pressure		~		2
33		0	Appr	oved	thawing methods us	ed	0	0	1		_	-			stalled; proper backflow devices		Ō	Ō	2
34	_	OUT	Ther	mom	eters provided and a Food	courate Identification	0	0	1		_	-			I waste water properly disposed es: properly constructed, supplied, cleane	d	0	0	2
35	Τ	0	Food	i prop	erly labeled; original	container; required records available	0	0	1	5	2	0	Sarbaç	e/refi	use properly disposed; facilities maintaine	d	0	0	1
	<	DUT			Prevention of	Feed Contamination		-		5	3 2	R F	hysica	al faci	ilities installed, maintained, and clean		0	0	1
36	4	٥	Insec	ds, n	odents, and animals r	not present	0	0	2	5	4	<u>ہ</u>	/dequa	ste ve	intilation and lighting; designated areas us	Jed	0	0	1
37	4	0				ng food preparation, storage & display	0	0	1			UT			Administrative Items				
38	_	-	-		cleanliness oths; properly used ar	nd stored	0	0							nit posted inspection posted			0	0
40	_	OUT	Was	hing	fruits and vegetables	Use of Utensils	0	0	1		_	_			Compliance Status Non-Smokers Protection		YES	NO	WT
41	T	0		_	nsils; properly stored	1			1		7				with TN Non-Smoker Protection Act	Met	0		
42						c, properly stored, dried, handled les; properly stored, used		0		5	8 9				ducts offered for sale oducts are sold, NSPA survey completed	1		0	0
44		Ö	Glov	es us	sed properly			0											
service	-	tablir	hmer	t pen	mit. Items identified as	constituting imminent health hazards sha	I be com	ected	immed	iately	or op	eratio	ns shal	l ceas	Repeated violation of an identical risk factor e. You are required to post the food service e	establishment permit	t in a	consp	icuous
						rt in a conspicuous manner. You have the 4-708, 68-14-709, 68-14-711, 68-14-715, 68-1			st a hei	ring	regard	ling th	is repo	rt by f	fling a written request with the Commissioner	within ten (10) days	of the	e date	of this
			()	X	B		3/25/2	202	4			¥	$\langle \cdot \rangle$	/	1 Marin	()3/2	25/2	2024
Signa	tun	e of	Pers	on Ir	n Charge		0, 2	-	Date	Si	gnati	ire of	Envir	onme	ental Health Specialist				Date
						Additional food safety information of	an be fo	ound	on ou										
PH-22	67 (J	Rev.	6-15)			Free food safety training clas						onth						R	DA 629
						Please call () 6	TD	3405	200	0		10 SI	gn-u	p for a class.				

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Papa John's #85 Establishment Number # 605159492

Warewashing Info											
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)								

Equipment Temperature	
Decoription	Temperature (Fahrenheit)

ecoription	State of Food	Temperature (Fahrenheit

Observed	Violations	_
Total # 4		_
Repeated #	0	_
16:	•	
53:		
ю. ГГ.		
55:		
56:		

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Establishment Name: Papa John's #85 Establishment Number : 605159492

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.

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Establishment Name: Papa John's #85

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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:	

Additional Comments