TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Establishment Name			t Nar	me	Krystal #NSH020						Type of Establishment O Farmer's Market Food Unit O Mobile									
Address					2671 Murfreesboro Rd.						Type of Establishment O Temporary O Seasonal									
City					Nashville Time in 02:40 PM AM / PM Time out 03:45: PM AM / PM															
Inspection Date 03/20/2024 Establishment # 605119585								_				_	d C							
Purpose of Inspection Reputine O Follow-up O Complaint									O Pr			-		Cor	nsuitation/Other					
Risk	Cat	egon	y		O 1	882	03			O 4				Fo	ollow-	up Required O Yes 🕅 No	Number of S	eats	68	
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																				
(Hark designated compliance status (IN, OUT, NA, NO) for each numbered Item. IN=in compliance OUT=not in compliance NA=not applicable NO=not observed								For Items marked OUT, mark COS or R for each Item as applicable. Deduct points for category or a COS=corrected on-site during inspection R=repeat (violation of the same code)				
	_	_	_	_		liance Status	NO-IN COOLIN		R	WŤ	Ē	1	I III	one due	- ng 11 10	Compliance Status			R	WT
-	-	_	NA	NO	Person in charge or	Supervision esent, demonstrates k	nowledge and					IN	ουτ	NA	NO	Cooking and Reheating of Time Control For Safety (TCS)				
	嵐 IN	0	NA	NO	performs duties	Employee Health	nomeoge, and	0	0	5		8				Proper cooking time and temperatures Proper reheating procedures for hot hol	dina	0	00	5
2	X	0	101	110		ood employee awarene	ss; reporting		0	5	l"	IN	OUT		NO	Cooling and Holding, Date Markin		Ĭ		
	× N	O	NA	NO	Proper use of restri	ction and exclusion d Hyglenic Practice		0	0	-	18	0	0			a Public Health Cont Proper cooling time and temperature	lor	0	σ	
4 7	1		101	0	Proper eating, tastir	ng, drinking, or tobacco	use	0	8	5	19	12		0		Proper hot holding temperatures		0	0	
	IN	OUT	NA	NO	Preventin	eyes, nose, and mouth og Contamination by									0	Proper cold holding temperatures Proper date marking and disposition		8	ŏ	5
_		0	0	0		ct with ready-to-eat foo	ods or approved	0	0	5	22		0	~	-	Time as a public health control: procedu		0	0	
8	X	0	-	-	alternate procedure Handwashing sinks	properly supplied and	accessible	-	0	2	23		001	NA	NO	Consumer Advisory Consumer advisory provided for raw an		0	0	4
9 3	嵐	0		NO	Food obtained from			0	0		H	IN N		NA	NO	food Highly Susceptible Popul	ations	Ŭ	-	
10	0	0	0	2	Food received at pr Food in good condition	oper temperature tion, safe, and unadulte	erated	0	0	5	24	0	0	x		Pasteurized foods used; prohibited food	s not offered	0	0	5
	õ	0	×	0		vailable: shell stock tag		ō	ō	1		IN	ουτ	NA	NO	Chemicals				
13				NO		tion from Contamin	ation	0	0		25	0	8	X		Food additives: approved and properly Toxic substances properly identified, sto		0	0	5
14	0	黨		1	Food-contact surface	es: cleaned and saniti		0		5	Ē	IN		NA		Conformance with Approved	Procedures	Ľ	_	
15	2	0			Proper disposition of served	of unsafe food, returned	d food not re-	0	0	2	27	0	0	窝		Compliance with variance, specialized p HACCP plan	rocess, and	0	0	5
	Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.																			
								GOC	DD R	ET/A	L PR	LACT	TICE	8						
				00	T=not in compliance Comp	liance Status	COS=corre			during WT	inspe	ection				R-repeat (violation of the sar Compliance Status		COS	R	WT
28	_	OUT O	Past	eurize	Safe F ed eggs used where	eed and Water required		0	0	1	E		NUT	ood a	nd no	Utensils and Equipment infood-contact surfaces cleanable, prope	rly designed.			
29	_	0	Wate	er and	lice from approved :		5	0	0	2	\vdash	-	×,	constru	cted,	and used		0	0	1
	_	OUT			Food Ten	nperature Control		-				_	-			g facilities, installed, maintained, used, b ntact surfaces clean	ist strips	0	0	1
31	'	0	cont	rol	-	adequate equipment fo	or temperature	0	0	2		0	TUK	401100	G-COI	Physical Facilities		0		'
32	_				properly cooked for thawing methods us			8	8			_				I water available; adequate pressure stalled; proper backflow devices		0	8	2
34	_	X OUT		mom	eters provided and a	ocurate		0	0	1						waste water properly disposed s: properly constructed, supplied, cleane	ud.	0	0	2
35	_			d prop		container; required rec	cords available	0	0	1	-	_	_			use properly disposed; facilities maintain		0	ō	1
		OUT			Prevention of	Food Contaminatio	>n		-		-	-				ilities installed, maintained, and clean			0	1
36	-	0	Inse	ots, ro	idents, and animals	not present		0	0	2	5	4	<u>ہ</u>	Adequa	ste ve	entilation and lighting; designated areas u	sed	0	0	1
37	_					g food preparation, sto	orage & display	0	0	1			TUK			Administrative items				
38	_	-	-		cleanliness ths; properly used a	nd stored		0	0	1		_				nit posted inspection posted		0	0	0
40	· ·	0 TUO	Was	hing f	ruits and vegetables Proper	Use of Utensils		0	0	1	F	-	_	_	_	Compliance Status Non-Smokers Protection		YES	NO	WT
41		0			nsils; properly stored		handlad	8	0	1		7				with TN Non-Smoker Protection Act ducts offered for sale		00		0
43	5	0	Sing	le-use	e/single-service artic	es; properly stored, us		0	0	1		š				oducts are sold, NSPA survey complete	d	ŏ		<u> </u>
44 O Gloves used properly O O 1 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 cases. 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	L T.	1	sectio	ns 68-	14-703 61-14-706, 68-1	1-708, 68-14-709, 68-14-71	1, 68-14-715, 68-14-7	16, 4-5	-320.			A	$\mathbf{\hat{\mathbf{A}}}$) 	\mathcal{F}					
		J			7		03/2	20/2			_		Х	\$7	0	teven	C)3/2	20/2	024
Sign	atur	re of	Pers	ion In	Charge					Date						ental Health Specialist				Date
							7						-		-	ealth/article/eh-foodservice **** Inty health department.				
PH-2	267	(Rev.	6-15))			e call (3405						p for a class.			RD	A 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Krystal #NSH020 Establishment Number #: 605119585

ISPA Survey – To be completed if #57 is "No"	
ge-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are venty-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.	
arage 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)					

Equipment Temperature					
Decoription	Temperature (Fahrenheit)				
Reach in freezer	-3				
Reach in freezer	10				
Reach in cooler	48				
Hamburger freezer	24				

Food Temperature		
Decoription	State of Food	Temperature (Fahrenheit)
Chili steamwell	Hot Holding	181
Raw bacon reach in cooler by oven	Cold Holding	49
Hot dogs hot box	Hot Holding	145
Corn dogs hot box	Hot Holding	142
Hot dogs in prep cooler	Cold Holding	35
Hamburger	Cooking	182
Corn dog walk in cooler	Cold Holding	38

Observed Violations

Total # 10 Repeated # 0

14: 0 ppm quaternary ammonia in 3 comp sink.

Ca will call to have mixer at 3 comp sink fixed

20: Raw bacon at 49F in reach in cooler by oven. Reach in cooler at 52F. Must be at 41F or below

Ca calked to have fixed and moved bacon to a different cooler

34: No visible thermometer for reach in freezer

- 34: No thermometer in prep cooler
- 45: Condensation leak in walk in freezer
- 47: Side of grill is dirty
- 47: Shelves are dirty
- 51: No lid on trashcan in women's restroom
- 53: Floor dirty under equipment
- 53: Walls and ceiling are dirty

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Establishment Number : 605119585

Comments/Other Observations

- 1: Serv safe certified Tacoreia Lewis Exp: 8-10-26
- 2: Employee health policy is available. Symptoms and diseases are listed on the policy.
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (IN) Employee isn't drinking, eating, or using tobacco in a food preparation area.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.
- 6: Observed employees properly washing hands

7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.

8: (IN): All handsinks are properly equipped and conveniently located for food employee use.

9: Us foods

- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (NA) Shell stock not used and parasite destruction not required at this establishment.
- 13: (IN) All raw animal food is separated and protected as required.
- 15: (IN) No unsafe, returned or previously served food served.

16: Hamburger above 155F

- 17: (NO) No TCS foods reheated during inspection.
- 18: No active cooling during inspection
- 19: Hot food at 135F and above
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NA) No food held under time as a public health control.
- 23: Consumer advisory is on the menu
- 24: (NA) A highly susceptible population is not served.
- 25: (NA) Establishment does not use any additives or sulfites on the premises.
- 26: (IN) All poisonous or toxic items are properly identified, stored, and used.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57: No smoking signs not posted at all entrances into the building

58:

***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.

Establishment Information

Establishment Name: Krystal #NSH020

Establishment Number : 605119585

Comments/Other Observations (cont'd)

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

Establishment Information

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Sources								
Source Type:	Water	Source:	City					
Source Type:	Food	Source:	Us foods					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						

Additional Comments