

Address

Inspection Date

Risk Category

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Captain D's #3529 Remanent O Mobile Establishment Name Type of Establishment 1041 W. Main St. O Temporary O Seasonal Lebanon Time in 03:33 PM AM / PM Time out 04:34; PM

05/31/2023 Establishment # 605004215 Embargoed 0

O Follow-up Purpose of Inspection **K**Routine O Complaint O Preliminary O Consultation/Other О3

Number of Seats 90 04

Follow-up Required

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	4 =in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observ	ed		0	05=
					Compliance Status	cos	R	WT] [
	IN	OUT	NA	NO	Supervisien				П
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	1
	IN	OUT	NA	NO	Employee Health] [
2	$\mathbb{R}^{\mathbb{C}}$	0			Management and food employee awareness; reporting	0	0		П
3	×	0			Proper use of restriction and exclusion	0	0	5	П
	IN	OUT	NA	NO	Good Hygienic Practices				1 1
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	11
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	٥	П
	IN	OUT	NA	NO	Preventing Contamination by Hands				11
6	滋	0		0	Hands clean and properly washed	0	0		П
7	氮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	Н
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2	П
	IN	OUT	NA	NO	Approved Source				П
9	嵩	0			Food obtained from approved source	0	0		П
10	0	0	0	3%	Food received at proper temperature	0	0		П
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	П
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0		П
	IN	OUT	NA	NO	Protection from Contamination				1 [
13	Ä	0	0		Food separated and protected	0	0	4	11
14	0	X	0		Food-contact surfaces: cleaned and sanitized	0	0	5] [
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	11

	Compliance Status							WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	×	0	0	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	3%	Proper reheating procedures for hot holding	0	0	٠
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	×	Proper cooling time and temperature	0	0	
19	×	0	0	0	Proper hot holding temperatures	0	0	
20	245	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	•
22	0	0	0		Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory			
23	0	0	×		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	氮	0	0		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25		0	巡		Food additives: approved and properly used	0	0	5
26	0	100			Toxic substances properly identified, stored, used	0	0	,
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

级 Yes O No

trol the introduction of pathogo s, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	COS	R	W
	OUT	Caro i con amo i i mon			_
28	0	Pasteurized eggs used where required	0	0	1
29	0		0	0	-2
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	1
32	0	Plant food properly cooked for hot holding	0	0	Т
33	0	Approved thawing methods used	0	0	7
34	0	Thermometers provided and accurate	0	0	7
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	ŀ
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	1
37	86	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	г
39	0	Wiping cloths; properly used and stored	0	0	Ŀ
40	0	Washing fruits and vegetables	0	0	'
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	-
42	100	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г
43	0		0	0	г
44		Gloves used properly	0	0	-

specti	ion	R-repeat (violation of the same code provision)		
		Compliance Status	COS	R	WT
	OUT	Utensiis and Equipment			
45	0	Food and norfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	凝	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	2
49	0	Plumbing installed; proper backflow devices	0	0	2
50	0	Sewage and waste water properly disposed	0	0	2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	Т		
55	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	
$\overline{}$		Compliance Status	YES	NO	WT
Non-Smokers Protection Act					
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request (10) days of the date of the

05/31/2023

Date Signature of Environmental Health Specialist

05/31/2023

Signature of Person In Charge

Date

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Captain D's #3529
Establishment Number #: 605004215

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.	\neg
"No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	\top
Garage type doors in non-enclosed areas are not completely open.	\top
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	\top
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	\top
Smoking observed where smoking is prohibited by the Act.	+

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenhelt)				
Hobart			72				
Three comp sink							

Equipment Temperature						
Description	Temperature (Fahrenheit)					
M3Turbo Air RIF	-2					
Turbo Air RIC	42					
Turbo Air RIF	4					
M3Turbo Ar RIF	30					

Food Temperature						
Description	State of Food	Temperature (Fahrenheit)				
Fish Filets	Hot Holding	158				
Chicken Tenders	Hot Holding	148				
White Fish	Cooking	198				
Crab Cake/Stuffed Crab	Hot Holding	149				
Shrimp	Hot Holding	158				
Mac and Cheese	Hot Holding	160				
Cole Slaw	Cold Holding	32				
Corn on the Cob	Hot Holding	135				
Crab Cake	Cold Holding	39				
Salmon	Hot Holding	135				
Tilapia Filet	Hot Holding	139				
Chicken Tenders	Cold Holding	33				
Baked Potatoes	Hot Holding	165				
White Fish	Cold Holding	39				
Cat Fish	Cold Holding	38				

Observed Violations
Total # 5
Repeated # ()
14: No sanitizer at three comp sink PIC checked chemical supply and stated that establishment is out of sanitizer for three comp sink; Hobart Dish Machine temping at 115 degrees with plate thermometer
26: Chemical spray bottle stored in cabinets at front counter POS with boxed food items and plastic ware
37: Employee drink stored on hand sink located in cook line area next to M3 Turbi Air RIF
42: Large plastic containers stacked wet on shelving above three comp sink 47: Food debris buildup in bottom of M3 Turbo RIF next to frying station

[&]quot;"See page at the end of this document for any violations that could not be displayed in this space.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Captain D's #3529 Establishment Number: 605004215

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Establishment has employee illness 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: Good hand washing observed
- 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: See sources
- 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: See temps
- 17: (NO) No TCS foods reheated during inspection.
- 18: No foods cooled or cooling during inspection
- 19: See temps
- 20: See temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.

24:

- 25: (NA) Establishment does not use any additives or sulfites on the premises.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.

57:

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.

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Captain D's #3529	
Establishment Number: 605004215	
Comments/Other Observations (cont'd)	
4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Information								
Establishment Name: Captain D's #3529								
Establishment Number #:	605004215			Til Til				
processing with the system with the								
Sources								
Source Type:	Water	Source:	City					
Source Type:	Food	Source:	Mcclane					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Commen	nts							