# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

			ALC: NO															
"THE ROAD					Neighbors					Type of Establishment     O Farmer's Market Food Unit     St Permanent O Mobile								
Establishment Name			ne	710 Demonbreun S	10 Domonbroun St							ノ、	J					
0.01030				10	א.ר	0 /						o Temporary O Seasonal ut 11:05:AM AM / PM						
City Nashville Time in 1 Inspection Date 04/17/2024 Establishment # 605319305					J.4						me ou							
		n Da							_	Emba		d L			L			
,		of In		tion	KRoutine O Follow	w-up O Complaint			O Pr	elimin	ary		C	Cor	nsultation/Other			
Risk	Cat	egon R		act	篇1 O2	O3 practices and employee	beha		04	ate	mm	honh			up Required O Yes 🐹 No Numb I to the Centers for Disease Control and Pr	er of Seats		
															control measures to prevent illness or inju		·	
		(Me	rk de	alona		OODBORNE ILLNESS RI NA. NO) for each numbered liter									INTERVENTIONS ach liem as applicable. Deduct points for category or a	ubcategor	63	
IN	in c	ompīi			OUT=not in compliance NA=n	ot applicable NO=not observe	d		c						pection R=repeat (violation of the same code	provision)		
	-	010	NA	NO	Compliance S		cos	R	WT						Compliance Status Cooking and Reheating of Time/Temperatu	_	S R	WT
-	in 刻	-	NA	NO	Person in charge present, der	vision monstrates knowledge, and	-		-		IN	OUT	NA	NO	Control For Safety (TCS) Foods	~		
		0 OUT	NA	NO	performs duties	e Health	0	0	5		00	8	X		Proper cooking time and temperatures Proper reheating procedures for hot holding	8	0	5
2	X	0			Management and food employ	yee awareness; reporting		0	5	<u> </u>	IN		NA	NO	Cooling and Holding, Date Marking, and Tim		10	
_	8	0		110	Proper use of restriction and e		0	0	Ľ	4					a Public Health Control		10	
4	X	0	NA	NO	Good Hyglen Proper eating, tasting, drinking		0	0		19	00	0	窒	_	Proper cooling time and temperature Proper hot holding temperatures	0	0	1
		0	NA	0 NO	No discharge from eyes, nose	, and mouth mination by Hands	0	0	•	20	14	8			Proper cold holding temperatures. Proper date marking and disposition	- 8	8	5
	×		-		Hands clean and properly was	shed	0	0		22		ō	x	-	Time as a public health control: procedures and reco		-	1
7	鬣	0	0	0	No bare hand contact with rea alternate procedures followed		0	0	5		IN	OUT			Consumer Advisory		1-	
		애	NA	NO	Handwashing sinks properly s Approve		0	0	2	23	0	0	X		Consumer advisory provided for raw and undercook food	o bi	0	4
9	嵐	0			Food obtained from approved	source		0			IN	OUT	NA	NO	Highly Susceptible Populations			_
10 11			0	24	Food received at proper temp Food in good condition, safe,		0	0	5	24	0	0	X		Pasteurized foods used; prohibited foods not offered	0	0	5
	0	0	X	0	Required records available: st destruction	hell stock tags, parasite	0	0			IN	ουτ	NA	NO	Chemicals			
		OUT O		NO	Protection from Food separated and protected	Contamination	0		4	25	<b>0</b>	0	X		Food additives: approved and properly used Toxic substances properly identified, stored, used	0	8	5
		ŏ			Food-contact surfaces: cleane	ed and sanitized		ŏ	5	20			NA		Conformance with Approved Procedures		10	
15	1	0			Proper disposition of unsafe for served	ood, returned food not re-	0	0	2	27	0	0	黨		Compliance with variance, specialized process, and HACCP plan	0	0	5
				Go	d Retail Practices are pr	eventive measures to co	ntro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects into foo	is.		
										L PR			3					
	_			00	T=not in compliance Compliance St	COS=corre tatus		R		inspe	ction				R-repeat (violation of the same code provi Compliance Status		S R	WT
2	_	001	Past	euríz	Safe Food and ad eggs used where required	Water	0	0	1			UT	ood a	nd no	Utensils and Equipment nfood-contact surfaces cleanable, properly designed		La	
2	9	0	Wate	er and	d ice from approved source obtained for specialized proces	sing methods	0	0 0	2	4	s (				and used	0	0	1
3		OUT	varie	ince	Food Temperature				-	4		_			g facilities, installed, maintained, used, test strips	0	-	1
3	1	0	Prop		oling methods used; adequate	equipment for temperature	0	0	2	4	_	0 UT	Vonfoo	d-con	tact surfaces clean Physical Facilities	0	0	1
3	_		Plan	t food	properly cooked for hot holding	g	0		1	4	8 (	0 1			water available; adequate pressure		0	
3	_				thawing methods used eters provided and accurate		0	0	1	49	_	_	_	-	talled; proper backflow devices waste water properly disposed	0	_	
	_	OUT			Food Identific	ation	Ŭ		_	5	_	-			is: properly constructed, supplied, cleaned	ŏ		1
3	5	0	Food	i prop	erly labeled; original container;	required records available	0	0	1	5	2	0	Sarbag	e/refi	use properly disposed; facilities maintained	0	0	1
	-	OUT			Prevention of Feed Co					5	_	-			lities installed, maintained, and clean	0	-	1
3	5	-			idents, and animals not presen		0	0	2	5	+-	-	vdequa	de ve	ntilation and lighting; designated areas used	0	0	1
3					ation prevented during food pre	eparation, storage & display	0	0	1			UT			Administrative Items			
3					cleanliness ths: properly used and stored		0	0	1	5					nit posted inspection posted	8	8	0
4	)	0			ruits and vegetables			ŏ		É	_	- 1.			Compliance Status			WT
4	_	001	Inau	e ute	Proper Use of U nsils; properly stored	tensils	0		1	5	, -	-	Somolis	2000	Non-Smokers Protection Act with TN Non-Smoker Protection Act		10	1
4	2				equipment and linens; properly	stored, dried, handled	ŏ			54	8				ducts offered for sale	0	0	] 0
4					a/single-service articles; proper ed properly	ty stored, used		8		5	9	1	tobac	co pr	oducts are sold, NSPA survey completed	0	0	1
_	_	_				en (10) days may result in susper			_	servic	o esta	blish	ment p	ermit.	Repeated violation of an identical risk factor may result in	revocation	of ye	ur food
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 cease. You are required to post the food service establishment permit in a conspicuo 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 the										picuous								
геро	t. T.	CA .	ectio	ns (a	14-703, 68-14-706, 68-14-708, 68-14	709, 68-14-711, 68-14-715, 68-14-7	16, 4-5	320.				_		-	$\bigcirc$			
04/1					17/2	024	1			$\sim$	/ ~	n	Forme	04/	17/2	2024		
Sigr	atu	re of	Pers	on Ir	Charge			(	Date	Sig	natu	ire of	Envir	onme	ental Health Specialist			Date
**** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****																		

	r	-		
PH-2267 (Rev. 6-15)	Free food safety training clas Please call (	sses are available each mon ) 6153405620	th at the county health department. to sign-up for a class.	RDA 629

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



### Establishment Information

Establishment Name: Neighbors Establishment Number #: 605319305

Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)					
3-compartment sink	Sink and surface	7.81						

Equipment Temperature			
Description	Temperature (Fahrenheit)		
Line Low-boy cooler	36		
Prep Low-boy cooler	36		
Prep Reach in cooler	34		

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Milk in line Low-boy cooler	Cold Holding	40
Turkey sandwich in display cooler	Cold Holding	38
Caesar salad in prep Reach in cooler	Cold Holding	39
Milk in prep Low-boy cooler	Cold Holding	33

#### Observed Violations

Total 🗱 📋

Repeated # ()

37: Employee drinks in bottles with screw top caps stored on shelf next to utensils and pre-packed coffee pouches.

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



#### Establishment Information

Establishment Name: Neighbors

Establishment Number : 605319305

#### Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2: Posted and reviewed.

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: Employees 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: Food source(s) listed.

- 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.
- 14: (IN) All food contact surfaces of equipment and utensils cleaned and sanitized using approved methods.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: Not applicable.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: Food source(s) listed.
- 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: (NA) Establishment does not serve animal food that is raw or undercooked.
- 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:
- 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 Information

Establishment Name: Neighbors

Establishment Number: 605319305

Comments/Other Observations (cont'd)

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

# Establishment Information

Establishment Name: Neighbors

Establishment Number #: 605319305

Sources							
Source Type:	Food	Source:	Us foods, creation garden, gfs				
Source Type:	Water	Source:	City				
Source Type:		Source:					
Source Type:		Source:					
Source Type:		Source:					

# Additional Comments