



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

100

Establishment Name FGL LITTLE RED CORVETTE BAR #1 Type of Establishment ☒ Farmer's Market Food Unit ☐ Permanent ☐ Mobile
Address 120 3RD AVE S ☐ Temporary ☐ Seasonal
City Nashville Time in 03:55 PM AM / PM Time out 04:05 PM AM / PM
Inspection Date 03/22/2024 Establishment # 605251687 Embargoed 0
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other
Risk Category ☒ 1 ☐ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats 0

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

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance					OUT=not in compliance					NA=not applicable					NO=not observed					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
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	IN	OUT	NA	NO	Supervision										COS	R	WT		IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods										COS	R	WT																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
1	<input checked="" type="radio"/>	<input type="radio"/>			Person in charge present, demonstrates knowledge, and performs duties										<input type="radio"/>	<input type="radio"/>	5	16	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper cooking time and temperatures										<input type="radio"/>	<input type="radio"/>	5																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
	IN	OUT	NA	NO	Employee Health													17	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper reheating procedures for hot holding										<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
2	<input checked="" type="radio"/>	<input type="radio"/>			Management and food employee awareness, reporting										<input type="radio"/>	<input type="radio"/>	5		IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
3	<input checked="" type="radio"/>	<input type="radio"/>			Proper use of restriction and exclusion										<input type="radio"/>	<input type="radio"/>		18	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper cooling time and temperature										<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
	IN	OUT	NA	NO	Good Hygienic Practices													19	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper hot holding temperatures										<input type="radio"/>	<input type="radio"/>	5																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
4	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	Proper eating, tasting, drinking, or tobacco use										<input type="radio"/>	<input type="radio"/>	20	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Proper cold holding temperatures										<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
5	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	No discharge from eyes, nose, and mouth										<input type="radio"/>	<input type="radio"/>	21	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Proper date marking and disposition										<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
	IN	OUT	NA	NO	Preventing Contamination by Hands													22	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Time as a public health control: procedures and records										<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
6	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	Hands clean and properly washed										<input type="radio"/>	<input type="radio"/>	5		IN	OUT	NA	NO	Consumer Advisory																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
7	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed										<input type="radio"/>	<input type="radio"/>		23	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Consumer advisory provided for raw and undercooked food										<input type="radio"/>	<input type="radio"/>	4																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
8	<input checked="" type="radio"/>	<input type="radio"/>			Handwashing sinks properly supplied and accessible										<input type="radio"/>	<input type="radio"/>	2		IN	OUT	NA	NO	Highly Susceptible Populations																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
	IN	OUT	NA	NO	Approved Source													24	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Pasteurized foods used; prohibited foods not offered										<input type="radio"/>	<input type="radio"/>	5																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
9	<input checked="" type="radio"/>	<input type="radio"/>			Food obtained from approved source										<input type="radio"/>	<input type="radio"/>	5		IN	OUT	NA	NO	Chemicals																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
10	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Food received at proper temperature										<input type="radio"/>	<input type="radio"/>		25	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Food additives: approved and properly used										<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
11	<input checked="" type="radio"/>	<input type="radio"/>			Food in good condition, safe, and unadulterated										<input type="radio"/>	<input type="radio"/>		26	<input checked="" type="radio"/>	<input type="radio"/>			Toxic substances properly identified, stored, used										<input type="radio"/>	<input type="radio"/>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
12	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Required records available: shell stock tags, parasite destruction										<input type="radio"/>	<input type="radio"/>			IN	OUT	NA	NO	Conformance with Approved Procedures																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
	IN	OUT	NA	NO	Protection from Contamination													27	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Compliance with variance, specialized process, and HACCP plan										<input type="radio"/>	<input type="radio"/>	5																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
13	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Food separated and protected										<input type="radio"/>	<input type="radio"/>	4																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES															
OUT=not in compliance					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)					
Compliance Status					COS	R	WT	Compliance Status					COS	R	WT
Safe Food and Water					Utensils and Equipment										
28	OUT	○	Pasteurized eggs used where required	○	○	1	45	OUT	○	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	○	○	1		
29	○	Water and ice from approved source	○	○	2	46	○	Warewashing facilities, installed, maintained, used, test strips	○	○	1				
30	○	Variance obtained for specialized processing methods	○	○	1	47	○	Nonfood-contact surfaces clean	○	○	1				
Food Temperature Control					Physical Facilities										
31	OUT	○	Proper cooling methods used; adequate equipment for temperature control	○	○	2	48	OUT	○	Hot and cold water available; adequate pressure	○	○	2		
32	○	Plant food properly cooked for hot holding	○	○	1	49	○	Plumbing installed; proper backflow devices	○	○	2				
33	○	Approved thawing methods used	○	○	1	50	○	Sewage and waste water properly disposed	○	○	2				
34	○	Thermometers provided and accurate	○	○	1	51	○	Toilet facilities: properly constructed, supplied, cleaned	○	○	1				
Food Identification					Administrative Items										
35	OUT	○	Food properly labeled; original container; required records available	○	○	1	52	OUT	○	Garbage/refuse properly disposed; facilities maintained	○	○	1		
Prevention of Food Contamination					Compliance Status										
36	OUT	○	Insects, rodents, and animals not present	○	○	2	53	OUT	○	Physical facilities installed, maintained, and clean	○	○	1		
37	○	Contamination prevented during food preparation, storage & display	○	○	1	54	○	Adequate ventilation and lighting; designated areas used	○	○	1				
38	○	Personal cleanliness	○	○	1	Non-Smokers Protection Act									
39	○	Wiping cloths; properly used and stored	○	○	1	55	OUT	○	Current permit posted	○	○	0			
40	○	Washing fruits and vegetables	○	○	1	56	○	Most recent inspection posted	○	○	0				
Proper Use of Utensils					Compliance Status										
41	OUT	○	In-use utensils; properly stored	○	○	1	57	OUT	○	Compliance with TN Non-Smoker Protection Act	○	○	0		
42	○	Utensils, equipment and linens; properly stored, dried, handled	○	○	1	58	○	Tobacco products offered for sale	○	○	0				
43	○	Single-use/single-service articles; properly stored, used	○	○	1	59	○	If tobacco products are sold, NSPA survey completed	○	○	0				
44	○	Gloves used properly	○	○	1										

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



Establishment Information

Establishment Name: FGL LITTLE RED CORVETTE BAR #1

Establishment Number #: 605251687

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.

"No Smoking" signs or the International "Non-Smoking" symbol are not conspicuously posted at every entrance.

Garage type doors in non-enclosed areas are not completely open.

Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.

Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.

Smoking observed where smoking is prohibited by the Act.

Warewashing Info

Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)

Equipment Temperature

Description	Temperature (Fahrenheit)

Food Temperature

Description	State of Food	Temperature (Fahrenheit)

Observed Violations

Total # 1

Repeated # 0

56: Inspection not posted.

TENNESSEE DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
FOOD INSPECTION DATA



Establishment Information

Establishment Name: FGL LITTLE RED CORVETTE BAR #1

Establishment Number : 605251687

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Posted.
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (N.O.) No food workers present.
- 5: (N.O.) No food workers present at the time of inspection.
- 6: Bar not open.
- 7: (NO) No food workers present during the inspection.
- 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: (NA) Establishment does not cold hold TCS foods.
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 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: FGL LITTLE RED CORVETTE BAR #1

Establishment Number : 605251687

Comments/Other Observations (cont'd)**Additional Comments (cont'd)*****See last page for additional comments.***

Establishment Information

Establishment Name: FGL LITTLE RED CORVETTE BAR #1

Establishment Number #:	605251687
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Sources

Source Type:	Food	Source:	Creation garden, ajax, lipman
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Source Type:	Water	Source:	City
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Source Type:	Source:
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Source Type: _____ Source: _____

Source Type: _____ Source: _____

Additional Comments