TENNESSEE DEPARTMENT OF HEALTH VICE ESTABLISHMENT INSPECTION REPO

						FOOD SER	VICE ESTA	BL	ISH	IME	N1	F II	NSI	PEC	TI	ON REPORT	sco	RE		
Ŵ		114 ·	and a second																7	
Esta	bīst	hmen	t Nar	700	Papa Johns	6										Fermer's Market Food Unit St Permanent O Mobile	g			
Addr					6210 Hixso	n Pike					_	Тур	xe of I	Establ	ishme	O Temporary O Seasonal	J			
City					Hixson		Time in	03	3:5	5 P	M	A	M/P	мт	me o	out 04:10: PM AM / PM				
	ectic	on Da	ite		10/08/20	21 Establishmen						_	d C							
Purp	ose	of In	spec	tion	ORoutine	間 Follow-up	O Complaint			O Pre			-		Cor	nsultation/Other				
Risk	Cat	egor			O 1	\$22	O 3			O 4						-up Required O Yes 🕱 No	Number of S		0	
		R														d to the Centers for Disease Cont control measures to prevent illne		tion		
																INTERVENTIONS				
IN	in c	ompli		ang na	OUT=not in complian	nce NA=not applicab			at data							sech item as applicable. Deduct points for e spection R=repeat (violation of th	e same code provisio	on)		
		0.07	NA	110	Com	pliance Status		cos	R	WT	F					Compliance Status Cooking and Reheating of Time/		cos	R	WT
\rightarrow	in (武	001	nua.	NO	Person in charge r	Supervision present, demonstrate	s knowledge, and	0		-		IN	OUT	NA	NO	Control For Safety (TCS)				
		-	NA	NO	performs duties	Employee Healt		0	0	5		00	00	Š		Proper cooking time and temperatures Proper reheating procedures for hot hold	ina	00	00	5
2	X	0				food employee awar			0	5	Ë	IN	ол	NA		Cooling and Heiding, Date Marking	-	-		
	2	0	NA	10	,	riction and exclusion od Hyglenic Pract		0	0	Ť	48	0	0	0		a Public Health Centr Proper cooling time and temperature	ol	0		
4	1	0	nue.	_		ting, drinking, or toba		0	0		19	0	0	黛		Proper hot holding temperatures		0	0	
5			NA	-		eyes, nose, and mo ing Contamination		0	0	<u> </u>	20	20	8	8	0	Proper cold holding temperatures Proper date marking and disposition		8	e	5
6	<u>×</u>	0	_		Hands clean and p	properly washed		0	0			0	ō	×			res and records	0	ō	
	邕	0	0	0	alternate procedur			0	0	°		IN	OUT	NA	NO					
8	N IN	ᇞ	NA	NO	Handwashing sink	s properly supplied a Approved Source		0	0	2	23	0	0	黛		Consumer advisory provided for raw and food	undercooked	0	0	4
	8		~			m approved source			0			IN	OUT		NO	Highly Susceptible Popula	tions			
10	×	8	0	200		ition, safe, and unad		8	0	5	24	0	0	22		Pasteurized foods used; prohibited foods	not offered	0	0	5
12	0	0	Ж	0	Required records a destruction	available: shell stock	tags, parasite	0	0			IN	ουτ	NA	NO	Chemicals				
13			NA	NO	Prote Food separated an	ction from Contan	lination				25	0 戻	0	X	J	Food additives: approved and properly u Toxic substances properly identified, sto		0	00	5
14		ŏ	ŏ			ices: cleaned and sa	nitized		ŏ	5	20	IN	OUT	NA	NO			Ŭ		
15	2	0			Proper disposition served	of unsafe food, retur	ned food not re-	0	0	2	27	0	0	×		Compliance with variance, specialized p HACCP plan	rocess, and	0	0	5
_	_		_	George	d Ratall Brastle		a manufacto da cu			Inter		tion	ad a	athe	_	s, chemicals, and physical object	a lato fooda		_	
						ces are preventiv	e mensures to co			at/Al					gena	s, chemicals, and physical object	Tinto Toota.			
				OU	T=not in compliance		COS=com	icted o	n-site	during						R-repeat (violation of the san				
		OUT				Food and Water		cos	R	WT		0	UT			Compliance Status Utensils and Equipment		cos	R	WT
21					ed eggs used where fice from approved				0		4	5				onfood-contact surfaces cleanable, proper , and used	ly designed,	0	0	1
30)	0	Varia		obtained for special	ized processing meth		ŏ	ŏ	1	4	6	-			ng facilities, installed, maintained, used, te	st strips	0	0	1
		OUT	_	er co		mperature Contro t; adequate equipment	-				4	_	_			ntact surfaces clean		0	0	1
3		0	cont	rol				0	0	2		0	UT			Physical Facilities				
3:	_				properly cooked fo thawing methods u				8	1	4					d water available; adequate pressure stalled; proper backflow devices		0	8	2
34		0	Ther		eters provided and	accurate		0	0	1	5		-			d waste water properly disposed		0	0	2
35	_	OUT O	_			d Identification	research auszahle	0	0	1	5	_				es: properly constructed, supplied, cleane fuse properly disposed; facilities maintaine		0	0 0	1
3.	, 	OUT	F 000	s pros		al container; required		<u> </u>	<u> </u>	-	5		-		-	ilities installed, maintained, and clean		0	0	1
30	;		Inse	cts, re	dents, and animals			0	0	2	5	_	_			entilation and lighting; designated areas ut	sed	õ	ŏ	1
37	,		-			ing food preparation,	storace & display	0	0	1	F	0	υт			Administrative items				
31	_				cleanliness	ng roos proportional,	storage a stop of	0	0	1	5			Jurren	t pern	mit posted		0	0	
3	2	Ó	Wipi	ng ck	oths; properly used			0	0	1	5					t inspection posted		0	0	0
4		O OUT		ning	ruits and vegetable Proper	s r Use of Utensils		0	0	1	\vdash					Compliance Status Non-Smokers Protection		YES	NO	WT
4		0	In-us		nsils; properly store	id .	fed handled		8		5					with TN Non-Smoker Protection Act		×	8	
4:	3	0	Sing	le-us	e/single-service arti	ns; properly stored, di cles; properly stored,		0	0	1	5 5	9				oducts offered for sale roducts are sold, NSPA survey completed		0	0	0
4			-		ed properly				0											
servi	te et	stabli	shmer	t per	nit. Items identified a	s constituting imminent	health hazards shall b	e corre	cted i	mmedi	ately	or op	eratio	ns shai	l ceas	 Repeated violation of an identical risk factor se. You are required to post the food service of 	stablishment permit	t in a i	onsp	icuous
						ort in a conspicuous m 14-708, 68-14-709, 68-14				t a hea	ring r	egard	ling th	is repo	et by f	filing a written request with the Commissioner	within ten (10) days	of the	date	of this
_		1		_	·		10/0)8/2	021	L			1-	2	Ų	XX	1	10/0)8/2	2021
Sigr	atur	re of	Pers	on Ir	Charge		2010			Date	Sig	gnatu	ire of	Envir	onme	ental Health Specialist				Date

A		V	2
Classifiers of	Darson In (Charas	

10/08/2021

Signature of Person In Charge

Date	Signature of

Date

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

	RDA 629
PH-2257 (Rev. 6-15) Please call () 4232098110 to sign-up for a class.	1004 025

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Papa Johns Establishment Number #: 605249819

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 inflitrating 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	
Decoription	Temperature (Fahrenheit)

ecoription	State of Food	Temperature (Fahrenheit

Observed Violations	
Total # 2	
Repeated # 0	
36:	
54:	

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Papa Johns Establishment Number: 605249819

Comments/Other Observations	
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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: Papa Johns

Establishment Number : 605249819

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Papa Johns Establishment Number #. 605249819

Sources		
Source Type:	Source:	

Additional Comments