TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

Establishment Name					Bobby Hotel 1st Floor Bar								Establic	shme	O Fermer's Market Food Unit					
Address 230 4th /					230 4th A	ve N							. 70	AC 01 0	_ 5401241	211110	O Temporary O Seasonal			-
					12	2:5	QF	M	AJ	M / PI	M Tin	ne ou	и 01:10: РМ АМ/РМ							
Inspection Date 04/11/2024 Establishment # 605318218									Emba											
			spect		KRoutine	O Follo	-	O Complaint			_	elimin		u <u>-</u>		0	nsultation/Other			
							w-up	_				earnars	ary						40	
Risi	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 (IK, OUT, KA, 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=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)																			
Compliance Status						COS R WT				Compliance Status					_	COS R WT				
-	_	-					pervision , demonstrates knowledge, and						IN OU		UT NA NO		Cooking and Roheating of Time/Temperature Control For Safety (TCS) Foods			
1	邕		NA	NO	performs dutie	\$	ee Health		0	0	5	16	00		ŝ	-	Proper cooking time and temperatures Proper reheating procedures for hot holding	<u> </u>	0	5
2	X	0	144		Management a		yee awareness	s; reporting	0	0		<i>"</i>				NO	Cooling and Holding, Date Marking, and Time	_		-
_	×	0			Proper use of r				0	0	<u> </u>						a Public Health Control			
	IN XX		NA				nic Practices Ig. or tobacco u		0	ा	-		00	0	훐	-	Proper cooling time and temperature Proper hot holding temperatures		0	
5	25	0	NA	0	No discharge f	rom eyes, nose			Ō	0	<u> </u>	20		0	25		Proper cold holding temperatures. Proper date marking and disposition	8	0	5
	1		nun.		Hands clean a	nd properly wa	shed		0	0		22	0	0	2		Time as a public health control: procedures and record	_	6	
7	鬣	ο	0	0	No bare hand alternate proce		ady-to-eat food	s or approved	0	0	5	-			NA		Consumer Advisory	, –	Ľ	4
8	X	0	NA	NO		sinks properly s	supplied and ac	cessible	0	0	2	23	0	0	12		Consumer advisory provided for raw and undercooked food	0	0	4
9	嵩	0	_		Food obtained	from approved	d source			0			IN	OUT	NA	NO	Highly Susceptible Populations			
	0 ※		0	×	Food received Food in good o		and unadultera	0ed	8	00	5	24	0	0	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	õ	ŏ	×	0	Required record		hell stock tags,		ŏ	ŏ		Н	IN	OUT	NA	NO	Chemicals	+		
	IN	OUT	NA	NO	destruction Pro	otection from	n Contaminat	ion				25	0	0	X		Food additives: approved and properly used	0	0	-
		00				d and protecter unfaces: clean	d ed and sanitize	d	8	0		26	<u>美</u> N		NA	NO	Toxic substances properly identified, stored, used Conformance with Approved Procedures	0	0	
	ž	_	Ť		Proper disposi		food, returned f				2	27	-	0	-	1000	Compliance with variance, specialized process, and	0	0	5
	~	-			served				-	- 1			-				HACCP plan			
				Goo	d Retail Pra	ctices are p	reventive m	easures to co	ontro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects into foods			
				011	T=not in complian			COS=corre				L PR		1CE	5		9 month including of the came on in our init			
			_	00	C	ompliance S		CO3-COR		R		Ē					R-repeat (violation of the same code provision Compliance Status		R	WT
2	_	OUT	Past	urize	Sa d eggs used w	fe Food and here required	Water		0	0	1			UT	ood an	nd no	Utensils and Equipment nfood-contact surfaces cleanable, properly designed,	-		
2	9	0	Wate	r and	lice from appro	ved source	erina mathode		0	0	2	45	1	•	onstru	cted,	and used	•	0	1
3		OUT	varie	nce c		Temperatur					<u> </u>	46	1	_			g facilities, installed, maintained, used, test strips	0	0	1
3	1	ο	Prop		oling methods u	ised; adequate	equipment for	temperature	0	0	2	47	_	O N UT	lonfood	5-con	nact surfaces clean Physical Facilities	0	0	1
3	_		Plant	food	properly cooke		ng		0	0		48	1	0 H			water available; adequate pressure		0	2
3	-				thawing methor eters provided a				0	0	1	45	_	_			talled; proper backflow devices waste water properly disposed	0	0	2
	_	OUT		- 12-114		ood identific	ation		Ľ			51	_	-			is: properly constructed, supplied, cleaned	ŏ	ŏ	1
3	5	0	Food	prop	erly labeled; ori	ginal container	r; required recor	rds available	0	0	1	52	2	0 G	Sarbag	e/refi	use properly disposed; facilities maintained	0	0	1
		OUT					ontamination	1				53	_	-			lities installed, maintained, and clean	0		1
3	6	0	Insec	ts, ro	dents, and anin	nais not preser	nt		0	0	2	54	1	0 A	vdequa	te ve	ntilation and lighting; designated areas used	0	0	1
3	7	0	Cont	amina	ation prevented	during food pri	eparation, stora	ige & display	0	0	1		0	UT			Administrative Items			
3	_				leanliness ths: properly us	ied and stored			0	0	1	55 56					nit posted inspection posted	0	0	0
4	0	0	Was		ruits and vegeta	ables			ŏ	ŏ		Ĕ	<u>.</u> т.,	<u> </u>		STOLEN.	Compliance Status			WT
4	_	OUT O		e uter	Pro nsils; properly s	oper Use of U tored	tensils		0	0	1	57	-	- 0	Complia	ince	Non-Smokers Protection Act with TN Non-Smoker Protection Act	- 37	0	
4	2	0	Uten	sils, e	quipment and I	inens; properly	stored, dried, h		0	0	1	58	5	T	obacc	o pro	ducts offered for sale	0	Ö	0
4					single-service ed properly	arucies; prope	rly stored, used	1		8		25		11	100800	uo pri	oducts are sold, NSPA survey completed	_0	10	
	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 conspicuous																			
man	ner a	nd po	st the	most	recent inspection	report in a cons	spicuous manner		ght to r	eques							 You are required to post the food service establishment p liling a written request with the Commissioner within ten (10) 			
100	- No Ba			10.001				A 10 10 10 10 10 10 10 10 10	100.000	1 A 1				-		-				

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04/11/2024

6 Date Signatur Environmental Health Specialist

04/11/2024

Date

SCORE

Signature of Person In Charge

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

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information Establishment Name: Bobby Hotel 1st Floor Bar Establishment Number #: 605318218

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 wenty-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.	
Sarage 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.	
	<u> </u>

Warewashing Info					
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)		
High temp washer			165		

Equipment l'emperature	
Description	Temperature (Fahrenheit)

Description	State of Food	Temperature (Fahrenheit



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Comments/Other Observations

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

2: An employee health policy is present.

3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.

- 4: (IN) Employee drinking from an approved container which is stored properly.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.
- 6: Observed employees washing hands with proper technique.

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 source info

- 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: No cooling takes place
- 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.

Establishment Information

Establishment Name: Bobby Hotel 1st Floor Bar Establishment Number : 605318218

Comments/Other Observations (cont'd)

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

Establishment Information

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SourcesSource Type:FoodSource:Source Type:Source:Source Type:Source:Source Type:Source:Source Type:Source:Source Type:Source:

Additional Comments