TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Contra Contra	in the second																	^		
Establishment Name		Springhill Suites - E & D					Type of Establishment O Fermer's Merket Food Unit O Mobile							1						
Address		85 W. Court	St.						Typ	e of t	stabl	shme	O Temporary O Seasonal							
City			Memphis		Time in	09	9:30	0 A	M	A	M/P	и ті	me ou	ut 09:45: AM AM / PM						
Insp	xectio	n Di	ate		01/26/202	2 Establishment # 605	515678				Emba									
Pur	pose	of In	spec		ORoutine		Complaint		,	-	elimin				Cor	nsuitation/Other				
Ris	k Cat	-	-		01	第2 0	*			04						up Required O Yes 罠 No	Number of Si		44	
		F	lisk													to the Centers for Disease Control : control measures to prevent illness		tion		
					ad compliance status											INTERVENTIONS ach liem as applicable. Deduct points for categ	and an automate			
18	⊨in c		ance		OUT=not in compliance	e NA=not applicable NO	-not observe	đ		co						spection R=repeat (violation of the san	ne code provisio	xn)		
	IN	оит	NA	NO	Comp	liance Status Supervision		cos	R	WT	F					Compliance Status Cooking and Reheating of Time/Tem		COS	R	WT
1	展	0				esent, demonstrates knowled	ge, and	0	0	5	40	IN	OUT			Control For Safety (TCS) Food		_	~	
	IN	OUT	NA	NO	performs duties	Employee Health						00	00	0		Proper cooking time and temperatures Proper reheating procedures for hot holding		00	8	5
2	X	0			Management and to Proper use of restric	od employee awareness; rep tion and exclusion	orting	0	8	5		IN	ουτ	NA	NO	Cooling and Holding, Date Marking, an a Public Health Control	d Time as			
	IN		NA			d Hygionic Practicos		_				0	0	0		Proper cooling time and temperature		0	응	_
4	黨	0		0	No discharge from e	g drinking or tobacco use yes, nose, and mouth		0	0	5	20	100	00	0		Proper hot holding temperatures Proper cold holding temperatures		0	0	5
6	IN 送	001	NA	NO O	Hands clean and pro			0	0	۲	21 22	× 0	0	0 ※		Proper date marking and disposition Time as a public health control: procedures a	and records	0	0 0	
7	×	0	0	0	No bare hand conta alternate procedures	ct with ready-to-eat foods or a s followed	pproved	0	0	5	-	IN	OUT		-	Consumer Advisory		-	<u> </u>	
		OUT	NA	NO		properly supplied and access Approved Source	ible	0	0	2	23	0	0	麗		Consumer advisory provided for raw and uno food	ercooked	0	0	4
	黨		0	0	Food obtained from Food received at pro			00	8			IN	OUT		NO	Highly Susceptible Population				
11	×	0		_	Food in good condit	on, safe, and unadulterated ailable: shell stock tags, para	site	0	0	5	24	_	0	0		Pasteurized foods used; prohibited foods not	offered	0	0	5
12		0 001	X	0 NO	destruction	ion from Contamination		0	0	_	25	IN O	OUT		NO	Chemicals Food additives: approved and properly used		0	0	
13	12	0	0	-	Food separated and				2	_	26	黛	0		·	Toxic substances properly identified, stored, Conformance with Approved Proc		õ	õ	5
	展		0	J	Proper disposition of	es: cleaned and sanitized f unsafe food, returned food n	iot re-	0	0	5	27	IN O	OUT			Compliance with variance, specialized proce		0	0	5
	~	-			served			-	<u> </u>	-	_	-	-	~		HACCP plan		•	-	-
				Goo	d Retail Practice	s are preventive measu									gens	, chemicals, and physical objects in	to foods.			
				00	T=not in compliance		COS=correr	cted or		őuring				3		R-repeat (violation of the same co	de provision)			
		OUT	1			iance Status ood and Water		COS	R	WT		0	UT			Compliance Status Utensils and Equipment		COS	R	WT
	8 9				ed eggs used where r fice from approved s				8		4	5 (infood-contact surfaces cleanable, properly de and used	signed,	0	0	1
- 2	0			ance		ed processing methods perature Control		0	0	1	4	5 (o v	Varew	ashin	g facilities, installed, maintained, used, test st	rips	0	0	1
-	11	0	Prop		oling methods used;	adequate equipment for temp	erature	0	0	2	4	_	O N UT	lonfoo	d-cor	ntact surfaces clean		0	0	1
_	2		Plan	t food	properly cooked for				0	1	4	8 (0 1			Physical Facilities I water available; adequate pressure		0		2
	3 14				thawing methods use eters provided and as				0	1	4	_	_			stalled; proper backflow devices waste water properly disposed		00	0	2
	_	OUT	_			Identification				_	5	_	_			s: properly constructed, supplied, cleaned		0	0	1
- 3	5	O OUT		d prop		container; required records av Feed Contamination	vailable	0	0	1	5		~	-	·	use properly disposed; facilities maintained lities installed, maintained, and clean		0	0	1
3	6		_	cts, ro	dents, and animals r			0	0	2	5	_				ntilation and lighting; designated areas used		0	0	1
1	17	0	Con	tamina	ation prevented durin	g food preparation, storage &	display	0	0	1		0	UΤ			Administrative items			_	
	8				leanliness			0	0	1	5	_			-	nit posted		0	0	0
_	9 0			_	ths; properly used an ruits and vegetables	nd stored			0	1	5	\$ 0	0 1	fost re	cent	Compliance Status		O YES	O NO	WT
-	1	001	_	se ute	Proper I nsils; properly stored	Use of Utensils		0	0	1	5	,	-0	ompli	ance	Non-Smokers Protection Act with TN Non-Smoker Protection Act		0	N(I	
	2					properly stored, dried, handles; properly stored, used	ed		0	1	5	3				ducts offered for sale oducts are sold, NSPA survey completed		0	0	0
	4				ed properly				ŏ									-	-	
serv	ice et	tabli	shme	nt perm	nit. Items identified as (constituting imminent health haz	ards shall be	corre	cted in	mmedi	ately	or op	mation	is shal	l ceas	Repeated violation of an identical risk factor may e. You are required to post the food service establ	lishment permit	in a c	onspi	cuous
						t in a conspicuous manner. You -708, 68-14-709 14-14-711, 68-14-				ahei	ring r	egard	ing th	is repo	n by f	lling a written request with the Commissioner with	in ten (10) days	of the	date	of this
	(x	r D	Res PO	K My K	01/2	6/2	022)		P	2	K	\searrow		C)1/2	6/2	022
Sig	natur	re of	Pers	son In	Charge	\bigcirc			C	Date	Sig	natu	re of	Envir	onme	ertal Health Specialist				Date
_						P						-			-	ealth/article/eh-foodservice				
PH-	2267	(Rev.	6-15)		Free food safety trainin Please call			avai 012							inty health department. p for a class.			RD	A 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information Establishment Name: Springhill Suites - E & D Establishment Number #: [605156785

ISPA Survey – To be completed if #57 is "No"	
ge-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are venty-one (21) years of age or older.	
ge-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.	
arage type doors in non-enclosed areas are not completely open.	
ents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
moke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	<u> </u>
moking observed where smoking is prohibited by the Act.	

Warewashing Info											
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)								
			l								

Equipment Temperature								
Description	Temperature (Fahrenheit)							

Description	State of Food	Temperature (Fahrenheit

Observed Violations	
Total #	
Repeated # 0	
52:	

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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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: Springhill Suites - E & D	
Establishment Number: 605156785	

Comments/Other Observations (cont'd)

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

Establishment Information

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Sources		
Source Type:	Source:	
Additional Comments		

Violation #20 was corrected.