TENNESSEE DEPARTMENT OF HEALTH OD SERVICE ESTARI ISHMENT INSPECTION REPORT

| | | | | FOOD SERVICE ESTABLISHMENT INSPECTION REPORT | | | | | | | | | | sco | SCORE | | | | | | |
|----------|----------|--------|--------------|--|--|-----------------------------------|--------------|-------------|--------------|-----------------|--------------|-------------|---------------|-------|---|------------------------|---------------------|---|---------|------|--------------|
| | 2744 | C. C. | | | | | | | | | | | | | | | _ | | | | |
| Estab | ishmer | it Nar | | Nordstrom | E Bar | | | | | _ | Tvr | e of i | Establi | shme | E Porm | er's Market anent 🔇 | | Y | \succ | Ś | |
| Addre | 55 | | | 2130 Abbo | tt Martin Road | | | | | | . ,, | | | | | xorary (|) Seasona | | | | |
| City | | | | Nashville | | Time in | 02 | 2:4 | QF | M | AJ | M / PI | M Tir | ne ou | at 03:00; | PM | AM / PI | u . | | | |
| - | tion D | ate | | 03/18/20 | 24 Establishment | | | | | Emba | - | | | | | | - | | | | |
| Purpo | se of Ir | spect | | ORoutine | 篇 Follow-up | O Complaint | | | _ | elimin | | | | Cor | nsuitation/Other | r | | | | | |
| Risk (| ategor | У | | XX1 | 02 | 03 | | | 04 | | | | Fo | ilow- | up Required | O Y | es 叙 N | o Number of S | eats | 54 | |
| | P | isk I | acto as c | ors are food pro ontributing fac | eparation practices tors in foodborne i | s and employee liness outbreak | behs s. P | vior | s ma ; He | et co lith i | e inter | only ven | repo tions | are | to the Cent control mea | ters for sures to | Disease prevent | Control and Preven | | | |
| | | | | | | ILLNESS RI | | | | | | | | | | | | ts for category or subcate | | | |
| IN-ir | n compli | | ngna | | ance NA=not applicable | | | in daak | | | | | | | pection | | | n of the same code provisi | | | |
| _ | | _ | | Con | npliance Status | | COS | R | WT | | | | _ | | | pliance | Status | | | R | WT |
| _ | | NA | NO | Person in charge | Supervision present, demonstrates | knowledge and | | | | | IN | ουτ | NA | NO | - | | - | fime/Temperature FCS) Foods | | | |
| 1 8 | | NA | NO | performs duties | Employee Health | niomeoge, and | 0 | 0 | 5 | 16 17 | 00 | 00 | | - | Proper cooking Proper reheating | | | | 0 | 8 | 5 |
| 23 | 0 | - | no | Management and | food employee awarer | ess; reporting | 0 | 0 | | -" | IN | | NA | NO | | | | arking, and Time as | _ | | |
| - | 8 0 | | | | triction and exclusion | | 0 | 0 | 5 | | | | | | | | Health (| | | _ | |
| 4 8 | | NA | | | ood Hygionic Practic sting, drinking, or tobacc | | 0 | | _ | 18 19 | 00 | 0 | 훐 | | Proper cooling Proper hot hok | | | ire | 0 | | |
| 5 2 | ξ Ο | | 0 | No discharge from | m eyes, nose, and mout | th | ŏ | | 5 | 20 | 25 | 0 | 0 | | Proper cold ho | iding tem | peratures | | 0 | 0 | 5 |
| 6 8 | | NA | | Hands clean and | ting Contamination properly washed | by Hands | 0 | 0 | | 21 | 0 | 0 | 0 ※ | | Proper date ma | | | | 0 | 0 | |
| | 8 0 | 0 | 0 | No bare hand cor alternate procedu | ntact with ready-to-eat four solution of the second se | oods or approved | 0 | 0 | 5 | " | IN | OUT | | | Time as a pub | | umer Adv | ocedures and records | • | 9 | |
| 8 8 | | NA | - | | ks properly supplied an Approved Source | d accessible | 0 | 0 | 2 | 23 | 0 | 0 | 2 | | Consumer adv food | | | w and undercooked | 0 | 0 | 4 |
| 9 8 | 8 0 | | | | orn approved source | | 0 | 0 | | H | IN | OUT | NA | NO | | hiy Susc | eptible P | opulations | | | |
| 10 C | | 0 | × | | proper temperature dition, safe, and unadul | torated | 8 | 00 | 5 | 24 | 0 | 0 | 83 | | Pasteurized fo | ods used | prohibited | foods not offered | 0 | 0 | 5 |
| 12 0 | _ | × | 0 | Required records | available: shell stock to | | ŏ | ŏ | | Н | IN | OUT | NA | NO | | | homicals | | | | |
| - 10 | | | NO | destruction Prete | ection from Contami | nation | | | | 25 | 0 | 0 | X | | Food additives | approve | d and prop | cerly used | 0 | | |
| | 0 ≷ 0 | | | Food separated a | and protected faces: cleaned and san | Rimod | 0 | 8 | 4 | 26 | | 0 | NA | | | | | d, stored, used | 0 | 0 | 0 |
| 15 8 | _ | | | | n of unsafe food, returne | | 0 | 0 | 2 | 27 | 0 | 0 | 8 | | | | | ized process, and | 0 | 0 | 5 |
| _ | - | | Goo | | ices are preventive | measures to co | vatro | l the | intr | aduc | tion | of a | atho | | | and ph | vaical of | hierts into foods. | | | |
| | | | _ | | | | | | | L PR | | | | | | | | | | | |
| | | | 00 | T=not in compliance | pliance Status | COS=corre | | n-site R | | inspe | ction | | | | | | violation of t | he same code provision) | COS | R | WT |
| | OUT | | | Safe | Food and Water | | | · · · | | | 0 | UT | | | | | Equipmer | rt | | ~ 1 | |
| 28 29 | | | | d eggs used when lice from approve | | | | 8 | | 45 | 5 8 | | | | nfood-contact s and used | surfaces o | leanable, p | properly designed, | 0 | 0 | 1 |
| 30 | 0 | Varia | | obtained for specia | alized processing metho | ds | ŏ | ŏ | ĩ | 46 | 5 0 | - | | | g facilities, insta | alled, mai | ntained, us | ed, test strips | 0 | 0 | 1 |
| | OUT | _ | er co | | emperature Control d; adequate equipment | for temperature | | | | 47 | , , | _ | | | tact surfaces c | - | | | 0 | 0 | 1 |
| 31 | 0 | contr | lo | | | | 0 | 0 | 2 | | | UT | | | | ysical F | | | | | |
| 32 | | | | properly cooked fi thawing methods | | | 8 | 8 | 1 | 41 | | | | | water available stalled; proper b | | | e | 8 | 윙 | 2 |
| 34 | 12 | Ther | | eters provided and | f accurate | | ō | Ō | 1 | 50 | | o s | Sewage | and | waste water pr | roperly dis | sposed | | 0 | 0 | 2 |
| 96 | OUT | _ | | | d identification | and a stable | | | - | 51 | _ | | | | s: properly con | | | | | 0 | 1 |
| 35 | 0 | | prop | | of Food Contaminat | | 0 | 0 | 1 | 53 | | - | - | | use properly dis lities installed, r | , , | | | 0 | 0 | 1 |
| 36 | - | _ | ts. ro | dents, and animal | | ion | 0 | 0 | 2 | 54 | _ | - | | | ntilation and lig | | | | 0 | 0 | 1 |
| 37 | - | - | - | | iring food preparation, s | torage & display | 0 | 0 | 1 | | + | UT | , | | | | ve items | | - | - | |
| 38 | | | | leanliness | | | 0 | 0 | 1 | 55 | 5 0 | 0 0 | Jument | perm | nit posted | | | | 0 | 0 | |
| 39 | Ó | Wipi | ng cic | ths; properly used | | | 0 | 0 | 1 | 56 | | | | | inspection post | | | | 0 | 0 | 0 |
| 40 | O | | hing f | ruits and vegetable Prope | es or Use of Utensils | | 0 | 0 | 1 | | _ | _ | | | | pliance n-Smoke | Status rs Protec | tion Act | YES | NO | WT |
| 41 | 0 | In-us | | nsils; properly stor | red | | | 0 | | 57 | | | | | with TN Non-St | moker Pro | | | 25 | 0 | |
| 42 | | | | | ins; properly stored, drie ticles; properly stored, u | | 8 | 0 | | 58 | | | | | ducts offered fo oducts are sold | | urvey com | pleted | 0 | 00 | 0 |
| 44 | 0 | Glov | es us | ed properly | | | | 0 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | factor may result in revoc ervice establishment permit | | | |
| manne | r and po | st the | most | recent inspection re | | nner. You have the rig | pht to r | eques | | | | | | | | | | isioner within ten (10) days | | | |
| | | _ | | | | | - | | 1 | | \mathbf{x} | | 1 | | | | | , , | 0.14 | 0/2 | 0004 |
| Cierro | <u>ل</u> | Beer | 0.0.1- | Charge | _ | 03/1 | 10/2 | | ate | Circ. | <u>۲</u> ۷ |). | | | nones | | | (| 1/2/ | .ŏ/2 | 2024 Date |
| Signa | ure of | r-cr8 | on m | | ** Additional food safe | ety information can | be fo | | | - | | | | | ental Health Sp ealth/article/e | | ervice *** | | | | 0408 |

| PH-2267 (Rev. 6-15) | Free food safety training of | RDA 629 | | |
|----------------------|------------------------------|--------------|-------------------------|--------|
| (19220) (1004. 0-10) | Please call (|) 6153405620 | to sign-up for a class. | 101025 |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Nordstrom E Bar Establishment Number # 605215811

Warewashing Info Machine Name Sanitizer Type PPM Temperature (Fahrenheit)

| Equipment l'emperature | |
|------------------------|--------------------------|
| Description | Temperature (Fahrenheit) |
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| Description | State of Food | Temperature (Fahrenheit |
|-------------|---------------|--------------------------|
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| Observed Violations | |
|---------------------|--|
| Total # 2 | |
| Repeated # () | |
| 34: | |
| 45: | |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



| Establishment Information Establishment Name: Nordstrom E Bar | |
|--|----------|
| Establishment Number : 605215811 | |
| Establishment Number . 605213811 | |
| Comments/Other Observations | |
| | |
| 2: | |
| 3: | |
| 4. 5: | |
| 6: | |
| 7: 8: (IN): All handsinks are properly equipped and conveniently located for food employee use. | |
| 9: | |
| 1: 2: 3: 4: 5: 6: 7: 8: (IN): All handsinks are properly equipped and conveniently located for food employee use. 9: 10: 11: 12: 13: | |
| 12: | |
| 13: | |
| 14: (IN) All food contact surfaces of equipment and utensils cleaned and sanitized using approved 15: 16: 17: 18: 19: 20: 21: 22: 23: 24: 25: | methods. |
| 16: | |
| 17: | |
| 18: 19 [.] | |
| 20: | |
| 21: | |
| 23: | |
| 24: | |
| 25: 26: (IN) All poisonous or toxic items are properly identified, stored, and used | |
| 27: | |
| 26: (IN) All poisonous or toxic items are properly identified, stored, and used. 27: 57: 58: | |
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***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: Nordstrom E Bar

Establishment Number : 605215811

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Nordstrom E Bar Establishment Number # 605215811

| Sources | | |
|--------------|---------|--|
| Source Type: | Source: | |
| | | |

Additional Comments