

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION F

REPORT	SCORE
	1

	Donut Time			O Farmer's Mark	et Food Unit
stablishment Name			Type of Establishment	Permanent	O Mobile
ddress	102 C Hartman Dr		Type of Commission	O Temporary	O Seasonal
ity	Lebanon	Time in 10:21 AM	_ AM / PM Time out	11:14:AM	AM / PM

03/15/2023 Establishment # 605259750 Embargoed 0 Inspection Date

KRoutine O Follow-up O Complaint O Preliminary Purpose of Inspection O Consultation/Other

Number of Seats 16 Risk Category **O**3 04 Follow-up Required O Yes 🕱 No

(Mark designated compliance status (IN, OUT, NA, NO) for each	numbered Item. For Items marked OUT, mark COS	S or R for each Item as applicable. Deduct	points for category or subcategory.)
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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	I⊏					Compliance Status	cos	R	Γ
	IN	OUT	NA	NO	Supervision				П	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature			
Ε.	6=2	$\overline{}$	-		Person in charge present, demonstrates knowledge, and				ш	""		100	110	Control For Safety (TCS) Foods			
וין	氮	0			performs duties	0	0	5	16	0	0	0	寒	Proper cooking time and temperatures	0	ТО	T
	IN	OUT	NA	NO	Employee Health				17	0	0	0	3%	Proper reheating procedures for hot holding	0	0	1
2	DK.	0			Management and food employee awareness; reporting	0	0		П					Cooling and Holding, Date Marking, and Time as			
3	×	0			Proper use of restriction and exclusion	0	0	5	Ш	IN	OUT	NA	NO	a Public Health Control			
	IN	OUT	NA	NO	Good Hygienic Practices				18	3 100	0	0	0	Proper cooling time and temperature	0	О	
4	300	0			Proper eating, tasting, drinking, or tobacco use	0	0	5	15		0	0	寒	Proper hot holding temperatures	0	0	Δ.
5	×	0			No discharge from eyes, nose, and mouth	0	0	l "	20		0	0		Proper cold holding temperatures	0	0	
		OUT	NA	NO	Preventing Contamination by Hands				21		0	0	0	Proper date marking and disposition	0	0	4
6	200	0		0	Hands clean and properly washed	0	0		27	0	l٥	0	報	Time as a public health control: procedures and records	0	0	П
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5	ľ	_	_	_			Ŭ	L	丄
ļ.			_	_	alternate procedures followed			-	ı⊢	IN	OUT	-		Consumer Advisory	-	_	_
8	-			NO	Handwashing sinks properly supplied and accessible Approved Source	0	0	2	23	0	0	33		Consumer advisory provided for raw and undercooked food	0	10	ш
9	×		Nex.	NO	Food obtained from approved source	0	0		Н	IN	ОИТ	NA	NO	Highly Susceptible Populations	-	_	_
_	0		_	3	Food received at proper temperature	ŏ	ŏ	1	ı⊢	-	001	nen.	INC	riigiiiy Susceptible Populations	-	_	$\overline{}$
11	×	ŏ	Ŭ	~	Food in good condition, safe, and unadulterated	ŏ	ŏ	5	24	1 8%	0	0		Pasteurized foods used; prohibited foods not offered	0	0	۱.
			0.0	_	Required records available: shell stock tags, parasite	_	_	1	ı⊨							_	_
12	0	0	×	0	destruction	0	0		ш	IN	OUT	NA	NO	Chemicals			
			NA	NO	Protection from Contamination				25		0	3%		Food additives: approved and properly used	0		T
13	Ä				Food separated and protected	0	0	4	26	黨	0		-	Toxic substances properly identified, stored, used	0	0	1
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Conformance with Approved Procedures			
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	X		Compliance with variance, specialized process, and HACCP plan	0	0	ľ

	GOOD RETAIL PRACTICES											
		OUT=not in compliance COS=corre	ected o	n-site	durin	ng ins	spectio	m	R-repeat (violation of the same code provision)			
		Compliance Status	COS	R	WT][Compliance Status	COS	R	WT
	OUT	Safe Food and Water				10		OUT	Utensiis and Equipment			
28	0	Pasteurized eggs used where required	0	О	1	1 Г	45	0	Food and nonfood-contact surfaces cleanable, properly designed,	0	0	•
29	0	Water and ice from approved source	0		2	1 L	40	•	constructed, and used	_	u	'
30		Variance obtained for specialized processing methods	0	0	1	3 F	46	題	Warewashing facilities, installed, maintained, used, test strips	0	0	4
	OUT	Food Temperature Control				3 L	40	090	warewashing lacinoes, installed, maintained, dised, test suips		_	
31	0	Proper cooling methods used; adequate equipment for temperature	0	0	2	1 Г	47	0	Nonfood-contact surfaces clean	0	0	1
31	١٠	control	١٠	١٩	2	Ιħ	OU		Physical Facilities		_	
32	0	Plant food properly cooked for hot holding	0	0	1	11	48	0	Hot and cold water available; adequate pressure	0	ा	2
33	_	Approved thawing methods used	ō	ō	1	1 t	49		Plumbing installed; proper backflow devices	ō	ō	2
34	0	Thermometers provided and accurate	0	О	1	11	-		Sewage and waste water properly disposed	0	0	2
	OUT		Ť	-		1 h	51		Toilet facilities: properly constructed, supplied, cleaned	ō	ō	1
35	0	Food properly labeled; original container; required records available	0	Го	1	11	52		Garbage/refuse properly disposed; facilities maintained	0	ō	1
-	OUT	Prevention of Feed Contamination		_	_	4 F	53	^	Physical facilities installed, maintained, and clean	0	0	1
	-					4 F	-				$\overline{}$	
36	0	Insects, rodents, and animals not present	0	0	2	JΙ	54	0	Adequate ventilation and lighting; designated areas used	0	0	1
37	0	Contamination prevented during food preparation, storage & display	0	0	1	Ш		OUT	Administrative Items			
38	0	Personal cleanliness	0	0	1	1 [55	0	Current permit posted	0	ा	0
39	0	Wiping cloths; properly used and stored	0	0	1	11	56	0	Most recent inspection posted	0	0	v
40	0	Washing fruits and vegetables	0	0	1	1 [Compliance Status		YES	NO	WT	
	OUT	Proper Use of Utensils				1 Г	\neg		Non-Smokers Protection Act			
41		In-use utensils; properly stored	0	0	1] [57 58		Compliance with TN Non-Smoker Protection Act	X	0	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1	1 [58		Tobacco products offered for sale	0	0	0
43	0	Single-use/single-service articles; properly stored, used	0	0	1] [59		If tobacco products are sold, NSPA survey completed	0	0	
44	0	Gloves used properly	0	0	1	ם כ						

03/15/2023

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Signature of Person In Charge

Date

 $N \sigma \tilde{C}$

Date

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Int	formation		
Establishment Name:	Donut Time		
Establishment Number	605259750		

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.	
moke 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 (Fahrenhelt)					
Three comp sink	Chlorine							

Equipment Temperature				
Description	Temperature (Fahrenheit)			
True RIC	40			
True RIF	-9			
Beverage Air RIC	40			

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Kolche	Cold Holding	38
Kolche	Cooling	110
Eggs	Cooling	48

Observed Violations						
Total #						
Repeated # ()						
46: Three comp sink missing drain boards						
""See page at the end of this document for any violations that could not be displayed in this space.						

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Donut Time Establishment Number: 605259750

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: (IN): PIC has knowledge of symptoms and diseases of foodborne illnesses.
- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (IN) Employee isn't drinking, eating, or using tobacco in a food preparation area.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.

- 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 sources
- 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: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: See temps
- 19: (NO) TCS food is not being held hot during inspection.
- 20: See temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.

24:

- 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.

[&]quot;See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Donut Time	
Establishment Number: 605259750	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Information			
	nut Time		
Establishment Number #:	605259750		
Courses			
Sources			
Source Type:	Water	Source:	City
Source Type:	Food	Source:	Dawns Food Supply IWC
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	
Additional Comments			