TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

| See. | | | A.C. | | | | | | | | | | | | | | _ | | |
|--|--|---|---|---|--|---|---|---|------------------------------------|--|----------------------------|-----------------|--|--|---|--|-------------------------|-------------------------|---------|
| | | and the second se | | | TailGate Br | ewery South N | ashville | | | | | | | | | Farmer's Market Food Unit Sent O Mobile | | | |
| Estat | | imen | t Nan | | 4060 Cane | Ridge Pkwy | | | | | _ | Ту | pe of E | Establ | ishme | ent © Permanent O Mobile O Temporary O Seasonal | | | |
| Addre | :55 | | | | Antioch | | Time is | 0 | 2.2 | 5 F | - M | | | | | ut 03:10; PM AM / PM | | | |
| City | - 10 | | | | 04/03/20 | 24 Establishment # | | _ | | | | _ | n 0 | | me or | AN / PM | | | |
| Inspe Purps | | | | | MRoutine | O Follow-up | O Complaint | | | - O Pr | | - | | | 0.000 | nsultation/Other | | | |
| Risk | | | | | 01 | \$2 | 03 | | | 04 | Quillin. | ary | | | | up Required O Yes 🕅 No Number of S | Contr | 22 | 5 |
| Nak | 000 | | isk i | | ors are food pre | paration practices | and employee | | | * m | | | | rep | ortec | to the Centers for Disease Control and Preven | | _ | |
| | | | | as c | ontributing fac | | | | | _ | | | | | | control measures to prevent illness or injury. | | | |
| | | (iin | rk de | algnat | ed compliance stat | | | | | | | | | | | ach Hom as applicable. Deduct points for category or subcat | egory. |) | |
| IN= | in co | mpīi | ance | | | nce NA=not applicable | NO=not observe | | R | | >s=∞ | rrecte | d on-s | ite dur | ing ins | pection R=repeat (violation of the same code provis Compliance Status | | R | WT |
| | N | ουτ | NA | | | Supervision | | | | | | IN | оυт | NA | NO | Cooking and Reheating of Time/Temperature | | _ | |
| | ×. | 0 | | | Person in charge performs duties | present, demonstrates i | knowledge, and | 0 | 0 | 5 | | 1 | 0 | 0 | - | Control For Safety (TCS) Foods Proper cooking time and temperatures | 0 | 8 | 5 |
| 2 | | | NA | NO | Management and | Employee Health food employee awaren | ess; reporting | 0 | 0 | | 17 | 0 | 0 | 0 | | Proper reheating procedures for hot holding Ceeling and Helding, Date Marking, and Time as | 0 | 0 | |
| 3 8 | × | 0 | | | Proper use of rest | riction and exclusion | | 0 | 0 | 5 | | IN | OUT | | NO | a Public Health Control | | | |
| 4 | N | OUT | NA | | | od Hygionic Practice ting, drinking, or tobacc | | 0 | 0 | | 18 | | 8 | 8 | | Proper cooling time and temperature Proper hot holding temperatures | 0 | 0 | |
| | | O | NA | 0 | No discharge from | neyes, nose, and mouth ing Contamination b | 1 | | 0 | 5 | | | 8 | 8 | 0 | Proper cold holding temperatures Proper date marking and disposition | | 8 | 5 |
| 6) | X | 0 | | | Hands clean and | - | | - | 0 | | 22 | - | ō | X | | Time as a public health control: procedures and records | 0 | ō | |
| | × | 0 | 0 | 0 | alternate procedu | res followed | | 0 | 0 | Ľ | | IN | OUT | _ | NO | Consumer Advisory Consumer advisory provided for raw and undercooked | | | |
| 8) 9) | N | our | NA | NO | | s properly supplied and Approved Source | accessible | | | - | 23 | | 0 | 2 | | food | 0 | ٥ | 4 |
| 10 0 | 0 | 0 | 0 | 20 | Food received at | m approved source proper temperature | | 0 | 0 | | 24 | | OUT | NA XX | NO | Highly Susceptible Populations Pasteurized foods used; prohibited foods not offered | 0 | 0 | |
| | 8 | 0 | * | 0 | | dition, safe, and unadult available: shell stock ta | | 0 | 0 | 5 | Ĥ | IN | OUT | | NO | Chemicals | ľ | _ | - |
| h | N | OUT | NA | - | destruction Prote | ction from Contamin | ation | - | | | | 0 | 0 | 25 | | Food additives: approved and properly used | 0 | 0 | |
| 13 (| 2 | 8 | | | Food separated a Food-contact surf | nd protected aces: cleaned and sanit | ized | 0 | 00 | 4 | 26 | IN | 0 OUT | | NO | Taxic substances properly identified, stored, used Conformance with Approved Procedures | 0 | 0 | • |
| 14) 15) | | ō | - | | | of unsafe food, returne | | ō | 0 | 2 | 27 | 0 | 0 | 8 | | Compliance with variance, specialized process, and HACCP plan | 0 | 0 | 5 |
| | - | | | _ | | | | - | | | | | - | - | | | | | |
| | | | | Goo | d Retail Practi | ces are preventive | measures to co | | | | | | - | | gens | , chemicals, and physical objects into foods. | | | |
| | | | | 00 | T=not in compliance | | COS=corre | ected o | n-site | during | | | 11CEB | 5 | | R-repeat (violation of the same code provision) | | _ | |
| | | OUT | | | Safe | pliance Status Food and Water | | | R | _ | | 0 | NUT | | | Compliance Status Utensils and Equipment | cos | R | WT |
| 28 | | | | | d eggs used when lice from approved | | | 0 | 0 | 2 | 4 | 5 | | | | nfood-contact surfaces cleanable, properly designed, and used | 0 | 0 | 1 |
| 30 | _ | 0 001 | | ince c | | ized processing method mperature Control | 25 | 0 | 0 | 1 | 4 | 6 | 0 V | Varew | ashin | g facilities, installed, maintained, used, test strips | 0 | 0 | 1 |
| 31 | T | 0 | | | | t; adequate equipment f | for temperature | 0 | 0 | 2 | 4 | _ | O N | lonfoo | d-cor | tact surfaces clean | 0 | 0 | 1 |
| 32 | - | | | t food | properly cooked for | | | | 0 | 1 | | 8 | 0 1 | | | Physical Facilities water available; adequate pressure | 0 | | 2 |
| 33 | _ | | | | thawing methods u eters provided and | | | 8 | 00 | 1 | | _ | _ | | - | stalled; proper backflow devices | 8 | 0 | 2 |
| | - | OUT | | | | didentification | | | - | | | _ | _ | | | es: properly constructed, supplied, cleaned | 0 | 0 | 1 |
| 35 | _ | O OUT | Food | i prop | | al container; required re of Food Contaminati | | 0 | 0 | 1 | | _ | - | | | use properly disposed; facilities maintained lities installed, maintained, and clean | 0 | 0 | 1 |
| 36 | - | - | Insec | ts, ro | dents, and animals | | ••• | 0 | 0 | 2 | | _ | - | | | intilation and lighting; designated areas used | ō | ō | 1 |
| 37 | 1 | X | Cont | amina | ation prevented du | ing food preparation, st | orage & display | 0 | 0 | 1 | | 4 | лυт | | | Administrative Items | | _ | |
| 38 | | 0 | Pers | onal c | leanliness | | | 0 | 0 | 1 | | _ | | | - | nit posted | 0 | | 0 |
| 39 | _ | 0 | | | ths; properly used ruits and vegetable | | | 8 | 0 | 1 | - | 6 | 0 | /lost re | cent | inspection posted Compliance Status | 0 YES | O NO | WT |
| | _ | 0 | | | | r Use of Utensils | | 0 | 0 | 1 | | 7 | - | Somoli | 3000 | Non-Smokers Protection Act with TN Non-Smoker Protection Act | 0 | | |
| 41 | | OUT | | a ute | | ard . | | | | | Hà | 3 | | | | ducts offered for sale | | | 0 |
| 41 | | out X | In-us Uten | sils, e | nsils; properly store quipment and line | ns; properly stored, drie | | 0 | | 1 | H | ÷ | | | | advate ass sold MODA cup ou completed | | 0 | |
| | | out XX O | In-us Uten Singi | sils, e le-use | nsils; properly store quipment and line | | | Ō | 000 | 1 | 5 | 9 | | | | oducts are sold, NSPA survey completed | 0 | | |
| 42 43 44 Failur | e to | | In-us Uten Singl Glov | sils, e le-use es us y viola | nsils; properly ston quipment and line single-service art ed properly tions of risk factor i | ns; properly stored, drie icles; properly stored, us tems within ten (10) days | sed may result in susper | O O | O O | 1 1 r food | servie | (9) | if ablish | tobac | co pr | Repeated violation of an identical risk factor may result in revo | O | O of you | |
| 42 43 44 Failur servic manne | e to e es | out | In-us Uten Singl Glove there | sils, e le-use es us y viola t perm most | nsils; properly stor- quipment and line /single-service art ed properly tions of risk factor i ait, items identified a recent inspection rep | ns; properly stored, drie cles; properly stored, us tems within ten (10) days a constituting imminent hy | may result in susper ealth hazards shall b ner. You have the rig | O O Vision o corre | o o f you seted i | 1 1 | servic | a est or op | ablishe | tobac ment p | ermit. | | O sation t in a s | O of you | icuous |
| 42 43 44 Failur servic manne | e to e es | out | In-us Uten Singl Glove there | sils, e le-use es us y viola t perm most | nsils; properly stor- quipment and line /single-service art ed properly tions of risk factor i ait, items identified a recent inspection rep | ns; properly stored, drie cles; properly stored, us tems within ten (10) days a constituting imminent h out in a conspicuous man | sed may result in susper ealth hazards shall b ner. You have the rig 11, 68-14-715, 68-14-7 | o o vsion c e corre pht to r 16, 4-5 | o o sted i eques -320. | 1 immed immed it a he | servic liately aring | or op regard | ablish eration ling th | ment p ns shal is repo | ermit. I ceas et by f | Repeated violation of an identical risk factor may result in revo- e. You are required to post the food service establishment perm lling a written request with the Commissioner within ten (10) day | O t in a the | of you onspi date | of this |
| 42 43 44 Failur servic manner report | The second secon | out 3 0 0 0 0 0 | In-us Uten Singl Glov st the section | sils, e le-use es us y viola t perm most ns 68- | nsils; properly stor- quipment and line /single-service art ed properly tions of risk factor i ait, items identified a recent inspection rep | ns; properly stored, drie cles; properly stored, us tems within ten (10) days a constituting imminent h out in a conspicuous man | may result in susper ealth hazards shall b ner. You have the rig | o o vsion c e corre pht to r 16, 4-5 | f you seted i eques -320. | 1 immed immed it a he | servic liately aring | or op regard | ablish eration ling th | ment p ns shal is repo | ermit. I ceas et by f | Repeated violation of an identical risk factor may result in revo e. You are required to post the food service establishment perm lling a written request with the Commissioner within ten (10) days | O t in a the | of you onspi date | icuous |
| 42 43 44 Failur servic manner report | The second secon | out 3 0 0 0 0 0 | In-us Uten Singl Glov st the section | sils, e le-use es us y viola t perm most ns 68- | nsils; properly stor quipment and line /single-service art ed properly tions of risk factor i sit. Items identified a recent inspection rep 14-703, 68-14-706, 68 Charge | ns; properly stored, drie cles; properly stored, us tems within ten (10) days i s constituting imminent h ort in a conspicuous man 14-708, 68-14-709, 68-14-71 | sed may result in susper ealth hazards shall b ner. You have the rig 11, 68-14-715, 68-14-7 04/(| 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | o o o cted i -320. | 1 1 immed immed it a he 4 Date | servic liately aring | gnat. | the station of the state of the | tobac ment p ns shall is repo | co pr ermit. I ceas et by f S | Repeated violation of an identical risk factor may result in revo- e. You are required to post the food service establishment perm lling a written request with the Commissioner within ten (10) day | O t in a the | of you onspi date | of this |

| PH-2267 (Rev. 6-15) | Free food safety training cla | RDA 62 | | |
|---------------------|-------------------------------|--------------|-------------------------|--------|
| (192207 (104. 0-10) | Please call (|) 6153405620 | to sign-up for a class. | nor de |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: TailGate Brewery South Nashville Establishment Number #: 605321937

| 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. | |

| Warewashing Info | | | | | | | | | | |
|-----------------------|----------------|-----|--------------------------|--|--|--|--|--|--|--|
| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenheit) | | | | | | | |
| Low temp dish machine | Chlorine | 50 | | | | | | | | |

| Equipment Temperature | | | | | |
|-----------------------|--------------------------|--|--|--|--|
| Description | Temperature (Fahrenheit) | | | | |
| Prep cooler 1 | 34 | | | | |
| Lowboy freezer | -4 | | | | |
| Prep cooler 2 | 33 | | | | |
| Reach in freezer | -2 | | | | |

| Food Temperature | | |
|---|---------------|--------------------------|
| Description | State of Food | Temperature (Fahrenheit) |
| Diced tomatoes on rail of prep cooler 1 | Cold Holding | 33 |
| Cooked chicken on rail of prep cooler 1 | Cold Holding | 35 |
| Blue cheese on rail of prep cooler 1 | Cold Holding | 36 |
| Coleslaw in prep cooler 1 | Cold Holding | 42 |
| Cheese pizza from oven | Cooking | 207 |
| Mozzarella on rail of prep cooler 2 | Cold Holding | 40 |
| Diced tomatoes on rail of prep cooler 2 | Cold Holding | 33 |
| Cooked chicken on rail of prep cooler 2 | Cold Holding | 36 |
| Cooked sausage on rail of prep cooler 2 | Cold Holding | 36 |
| Diced ham in prep cooler 2 | Cold Holding | 37 |
| Cooked chicken in prep cooler 2 | Cold Holding | 38 |
| Nacho cheese on steam table | Hot Holding | 188 |
| Cooked chicken in walk in cooler | Cold Holding | 40 |
| Reuben in walk in cooler | Cooling | 44 |
| Shredded cabbage in walk in cooler | Cold Holding | 43 |

Observed Violations

Total # 4

Repeated # ()

37: Observed employee hoodie hanging on shelf with soda reservoirs in kitchen.37: Cardboard boxes of single use articles stored directly on the floor in storage area beside back door.

41: In-use scooper stored in container of room temperature water on prep table.

42: Observed clear plastic containers being wet nested on drying rack.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Number : 605321937

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.

2: Written policy posted

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.

6: Observed proper hand washing

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: (NÁ) Shell stock not used and parasite destruction not required at this establishment.
- 13: No raw animal foods served.
- 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: See temps
- 17: (NO) No TCS foods reheated during inspection.
- 18: See temps
- 19: See temps
- 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: (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: Back door is missing "No Smoking" sign or symbol.

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: TailGate Brewery South Nashville Establishment Number : 605321937

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: TailGate Brewery South Nashville Establishment Number #: 605321937

| Sources | | | | |
|--------------|-------|---------|------|--|
| Source Type: | Food | Source: | PFG | |
| Source Type: | Water | Source: | City | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |

Additional Comments