TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

No.						FOOD	SERVICE	ESTA	BL	ISH	IME	IN 1	F IN	ISI	PEC	TI	ON REPORT	SCO	RE		
Ŵ		1	T. C.																		
Esta	bisi	hmen	t Nar	ne	Outback S	Steakhous	e #4320						Turr	o of i	Establ	ie litore o	Farmer's Market Food Unit K Permanent O Mobile	y'		1	
Add	ress				1968 Old	Fort Park	way						1 yp	eori	-5180	ISCIENC	O Temporary O Seasonal				
City					Murfreesb	oro		Time in	12	2:3	2 P	M	AJ	A/P	мті	me o	ut 12:39; PM AM/PM				
		on Da	de.		03/28/20	024 Estab	lishment # 60	-													
			spec	tion	ORoutine	A Follow		Complaint	-		- O Pre			-		0.00	nsultation/Other				
				10011	01	\$122	-	3			04		,				up Required O Yes 🕱 No	Number of Se	aate	23	5
POS	Ca	legor R		act	ors are food p	reparation p	ractices and e	mployee	beha	vior	s mo	st co	mm	only	rep	ortec	to the Centers for Disease Control	and Prevent			
				as (contributing fa												control measures to prevent illness	or injury.			
		(Ma	ırk de	algas	ted compliance st												INTERVENTIONS ach liem as applicable. Deduct points for cate	gory or subcate	gory.)	1	
IN	⊧in c	ompii	ance		OUT=not in comp			-not observe	-			\$=cor	recte	d on-s	ite dur	ing ins	spection R=repeat (violation of the sa				MAT
	IN	OUT	NA	NO		mpliance Sta Supervi			COS	R	WT	Ь		010			Compliance Status Cooking and Reheating of Time/Ter		cos	ĸ	WT
1	展	0					onstrates knowled	dge, and	0	0	5		IN	OUT			Control For Safety (TCS) For				
H	_		NA	NO	performs duties	Employee	Health		-		-		00	00			Proper cooking time and temperatures Proper reheating procedures for hot holding		0	읭	5
	X	_		_			e awareness; rep	porting	0		5		IN	оυт		NO	Cooling and Holding, Date Marking, a				
3	8	0	NA	100	Proper use of re	estriction and ex Bood Hygienic			0	0	-	18		0	0		a Public Health Control Proper cooling time and temperature		0		
4	10	0	nu-	_	Proper eating, ta				0	0		19	X	0	ŏ	_	Proper hot holding temperatures		0	0	
5		0	NA	-	No discharge fro		and mouth Ination by Han	da	0	0	<u> </u>	20	200	00	8		Proper cold holding temperatures Proper date marking and disposition		8	8	5
6	X	0			Hands clean an				0	0			0	ō	x		Time as a public health control: procedures	and records	0	ŏ	
7	鬣	0	0	0	No bare hand or alternate proced		y-to-eat foods or	approved	0	0	5	-	IN	OUT	NA	-		0.101000100		-	
8	×	0	NA		Handwashing si	inks properly su	pplied and acces	sible	0	0	2	23	×	0	0		Consumer advisory provided for raw and un	dercooked	0	0	4
	高		NA	NO	Food obtained f	Approved s rom approved s		_	0	0	-	H	IN	OUT	NA	NO	food Highly Susceptible Populatio	ans de la		_	
	0 ※		0	2	Food received a		rature nd unadulterated		00	00	5	24	0	0	83		Pasteurized foods used; prohibited foods no	t offered	0	0	5
	x	ō	0	0	Required record		il stock tags, par	asite	ō	ŏ		H	IN	OUT	NA	NO	Chemicais				
H	IN	OUT	NA	NO	destruction	tection from (Contamination					25	0	0	23		Food additives: approved and properly used		0		
13	2	0	0		Food separated					0		26	8	0		·	Toxic substances properly identified, stored		0	0	•
	_	0	0	l,	Food-contact su Proper disposition		d and sanitized	not re-	0	0	5		IN	OUT	_	NO	Conformance with Approved Pro- Compliance with variance, specialized proc				
15	2	0			served				0	0	2	27	0	0	2		HACCP plan		0	٥	5
				Go	d Retail Prac	tices are pre	ventive meas	ures to co	ntro	l the	intro	duc	tion	of p	atho	gens	s, chemicals, and physical objects in	to foods.			
									600	DR	ar Al	L PR	АСТ	ICE	8						
				01	T=not in compliance	e mpliance Sta	<i></i>	COS=corre	cted o		during						R-repeat (violation of the same o Compliance Status		COS		WT
		OUT			Saf	e Food and W				R			0	UT			Utensiis and Equipment		000	~ 1	-
2					ed eggs used who d ice from approv				8	0	1	4	5 (infood-contact surfaces cleanable, properly of and used	lesigned,	0	0	1
	0	0	Varia		obtained for spec	ialized processi			ŏ	ŏ	1	4	5 0				g facilities, installed, maintained, used, test s	trips	0	0	1
		OUT	_	er co	Feed 1 oling methods us	Temperature		pecature				47		-			ntact surfaces clean		0	0	1
3	1	0	cont	rol	-			perenere	0	0	2		0	UT			Physical Facilities				
	23				d properly cooked thawing methods				0	8	1	41	_				f water available; adequate pressure stalled; proper backflow devices		8		2
	4		<u> </u>		eters provided an				ō	õ	1	50	_	o s	Sewag	e and	waste water properly disposed		0	0	2
		OUT	_			od identificat					_	51	_				es: properly constructed, supplied, cleaned		0		1
3	5		Food	i proj	perly labeled; orig			rvailable	0	0	1	53	_			·	use properly disposed; facilities maintained		0	0	1
	0	001	Inco			n of Food Con	tamination		_		-	5	-	_			ilities installed, maintained, and clean			0	1
	6	-			odents, and anim				0	0	2	L ^a	-	-	vaequa	ne ve	entilation and lighting; designated areas used		0	0	1
3	_				ation prevented o	during food prep	aration, storage &	& display	0	0	1			UT			Administrative items			- 1	
	8 9	-	-		cleanliness oths; properly use	id and stored			0	0	1	54					nit posted inspection posted		0	응	0
_	0	0	Was		fruits and vegetal	bles				ŏ	1	Ē		o 1.	10000 10		Compliance Status		YES		WT
4	1	OUT		ie utr	Prop Insils; properly str	per Use of Ute ored	ensils		0	0	1	5		-	Somol	ance	Non-Smokers Protection Act with TN Non-Smoker Protection Act		X	01	
4	2	0	Uten	sils, i	equipment and lin	tens; properly st		lled	0	0	1	53	8	T	obacc	o pro	ducts offered for sale		0	0	0
_	3 4				e/single-service a sed properly	irticles; properly	stored, used			8		55	9	15	tobac	co pr	roducts are sold, NSPA survey completed		0	0	
Fails	re to	corre	ect an	y viol	ations of risk facto	r items within ter	(10) days may res	ult in suspen	sion o	fyour	food	iervic	o esta	blish	ment p	ermit.	Repeated violation of an identical risk factor ma	y result in revocr	ation 4	of you	ar food
serv	ce e	stablis	shmer	t per	mit. Items identified	as constituting	imminent health ha	cards shall be	corre	cted i	mmedi	ately o	or ope	ration	ns shal	l ceas	e. You are required to post the food service esta filing a written request with the Commissioner wit	blishment permit	in a c	onsp	icuous
7	-		sectio		-14-703, 68-14-706, 1									-)		Q_{n}				
	_		(JL				03/2	8/2	024	ļ	6	Ľ	5	2~	JŽ	Sh	0	3/2	8/2	2024
Sig	natu	re of	Pers	on Ir	n Charge					[Date	Sig	natu	re of	Envir	onme	ental Health Specialist				Date

Signature of Person In Charge

	œ
Date	Signatu

Date

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

PH-2267 (Rev. 6-15)	Free food safety training cla	RDA 629		
(Net: 0-15)	Please call () 6158987889	to sign-up for a class.	nor des

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Outback Steakhouse #4320 Establishment Number #: 605112800

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 twenty-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.	
Garage 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)						
			l						

juipment l'emperature								
Description	Temperature (Fahrenheit)							

esoription	State of Food	Temperature (Fahrenheit

Observed Violations	
Total # 2 Repeated # 0	
Repeated # 0	
53:	
53:	

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Establishment Name: Outback Steakhouse #4320 Establishment Number : 605112800

Comments/Other Observations		

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: Outback Steakhouse #4320 Establishment Number : 605112800

Comments/Other Observations (cont'd)

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

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Sources		
Source Type:	Source:	

Additional Comments