

Establishment Name

Address

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit **BROKEN CUP CAFE** Remanent O Mobile Type of Establishment

7945 WOLF RIVER CAFE O Temporary O Seasonal

Germantown Time in 09:30 AM AM / PM Time out 10:00; AM AM / PM City Embargoed 000 03/21/2023 Establishment # 605305242 Inspection Date

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

Risk Category О3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

itus (IN, OUT, NA, NO) for e

IIN	⊨in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		CC)\$=co	rrecte	d on-si	te duri	ng ins	spection
					Compliance Status	cos	R	WT						Ço
	IN	оит	NA	NO	Supervision			\Box		IN	оит	NA	NO	Cooking
1	羅	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	0	0	0	XX.	Proper cook
_	IN	ОИТ	NA	NO	Employee Health		-		17		ŏ	ō	8	Proper rehe
2	W.	0			Management and food employee awareness; reporting	0	0	\Box						Cooling a
3	×	0			Proper use of restriction and exclusion	0	0	5		IN	OUT	NA	NO	
	IN	ОUТ	NA	NO	Good Hygienic Practices				18		0	0	X	Proper cool
4	300	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19	0	0	0	黨	Proper hot h
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	l ° l	20	125	0	0		Proper cold
	IN	OUT	NA	NO	Preventing Contamination by Hands				21	100	0	0	0	Proper date
6	X	0		0	Hands clean and properly washed	0	0		22	0	0	×	0	Time as a p
7	800	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5			_		_	
-1	~		_	_	alternate procedures followed	_	_	Щ		IN	OUT	NA	NO	
8	赵	0	EL S	LIN.	Handwashing sinks properly supplied and accessible	0	0	2	23	0	ΙoΙ	38		Consumer a
_		OUT	NA	NO	Approved Source			-		_	0117			food
9	×	0	_	_	Food obtained from approved source	0	0			IN	OUT	NA	NO	н
10	0	0	0	<u>×</u>	Food received at proper temperature	0	0	5	24	0	l٥l	323		Pasteurized
11	×	0			Food in good condition, safe, and unadulterated	0	0	∣° I	1	_	_			- usicuraco
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			IN	ОUТ	NA	NO	
		OUT	NA	NO	Protection from Contamination				25		0	3%		Food additiv
13	Ä	0	0		Food separated and protected	0	0	4	26	窦	0		1	Taxic substa
14	X		0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Confe
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	×		Compliance HACCP pla

_					Compliance Status	COS	к	WI
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	0	黨	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	٠
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	×	Proper cooling time and temperature	0	0	
19	0	0	0	文	Proper hot holding temperatures	0	0	
20	凝	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	*
22	0	0	×	0	Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory			
23	0	0	×		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	300		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	3%		Food additives: approved and properly used	0	0	5
26	80	0			Toxic substances properly identified, stored, used	0	0	9
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	X		Compliance with variance, specialized process, and HACCP plan	0	0	5

trol the introduction of pathogens, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	-
30	0	Variance obtained for specialized processing methods	0	0	١.
	OUT	Food Temperature Control			
31	×	Proper cooling methods used; adequate equipment for temperature control	0	0	:
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	1
34	0	Thermometers provided and accurate	0	0	Т
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	-
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	885	Contamination prevented during food preparation, storage & display	0	0	
38	245	Personal cleanliness	0	0	Г
39	0	Wiping cloths; properly used and stored	0	0	
40	0	Washing fruits and vegetables	0	0	
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	Г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	
44	10	Gloves used properly	- 0	0	

pecti	on	R-repeat (violation of the same code provision)		-	14.0
_		Compliance Status	cos	R	W
	OUT	Utensiis and Equipment	-	_	_
45	麗	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	0	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	7
49	0	Plumbing installed; proper backflow devices	0	0	- 2
50	0	Sewage and waste water properly disposed	0	0	- 2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	•
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	,
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	Т		
55	嶷	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	'
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	1	١.
59		If tobacco products are sold, NSPA survey completed	0	0	

icuous manner. You have the right to request a h n (10) days of the date of the

03/21/2023 Date Signature of Environme 03/21/2023

Signature of Person In Charge

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 Inf	formation	
Establishment Name:	BROKEN CUP CAFE	
Establishment Number	= 605305242	

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.	No
Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	No
"No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	No
Garage type doors in non-enclosed areas are not completely open.	No
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	No
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	Yes
Smoking observed where smoking is prohibited by the Act.	Yes

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenhelt)				
			1				

Equipment Temperature					
Description		Temperature (Fahrenheit)			

Description	State of Food	Temperature (Fahrenheit

Observed Violations
Total # 5
Repeated # 0
31: Proper cooling method is not being used. Proper cooling must be used. 37: There are food items stored on the floor. Please place all food items on shelves and off the floor. 38: Employee is not wearing a hairnet or hat. All kitchen staff must wear a hairnet or hair restraint. 45: The cutting boards are deeply stained and have several grooves. Please replace cutting boards. The oven is not clean. Please maintain cleanliness of toaster oven. 55: The current permit is not posted. Please post a current permit. Please call 901-222-9175 to renew permit.

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

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Establishment Number: 605305242	

Comments/Other Observations	
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Additional Comments

See last page for additional comments.

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^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: BROKEN CUP CAFE Establishment Number: 605305242				
			Comments/Other Observations (cont'd)	
Additional Comments (cont'd)				
See last page for additional comments.				
see last paye for additional comments.				

Establishment Information

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Sources			
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Additional Comments			