### **TENNESSEE DEPARTMENT OF HEALTH** FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

6/230

			100			FOOD	SERVICE EST	ABL	ISH	IM	ENT	1	ISF	PEC	TI	ON REP	ORT		Ļ	so	ORE		
ß			S. C.																				
Esta	blish	men	t Nar		Centennia	al Cafe						Tur	a of f	Establi	ehme	E Porr		et Food U O Mobi		U U		7	
Addr	655				5207 Cen	tennial Blv	d					174	AC 101 L	-500-01	24111110		porary	O Seas	ional				
City					Nashville		Time	. 09	9:4	5 A	M	A	4 / PI	и та	me or	ut 09:50			/PM				
Insp	ectio	n Da	te		11/30/20	023 <sub>Establi</sub>	shment # 6052456	_			Emba	-											
Purp	ose	of In	spect		ORoutine	题 Follow-u				O Pr			_		Cor	nsultation/Othe	er.						
Risk	Cate	Racin	,		01	\$22	03			04				Fc	low-	up Required	0	Yes 🕅	8 No	Number	f Seats	46	3
			isk i				actices and employed borne illness outbrea							repo	ortec	to the Cen				ol and Prev	ention		
						FO	ODBORNE ILLNESS R	ISK F	ACT	ors	AND	PUI	BLIC	HEA	LTH	INTERVEN	TIONS						
IN	in co	mpīi			OUT=not in comp	iance NA=not a	applicable NO=not obser									pection				same code pro		••	
_		010			Co	mpliance Sta		cos	R	WΤ		_						e Statu		emperature	COS	R	WT
-	-	-	NA	NO	Person in charo	Supervis e present, demo	nstrates knowledge, and			-		IN	OUT	NA	NO	-		-	y (TCS) F				
		0	NA	NO	performs duties		÷ .	0	0	5		<u>第</u> 0	00	8		Proper cookin Proper reheat				0.0	- 8	8	5
2	84	0				nd food employee	e awareness; reporting	_	0		H	IN	олт							, and Time a	_	10	
		0	NA	110	,	estriction and exc		0	0	Ľ	18					O			th Contro	4			
4	1	0	nu-A	0	Proper eating, t	Sood Hygionic asting, drinking, d	or tobacco use	0	0	5	19	家	00	0	õ	Proper cooling Proper hot ho	Iding ter	nperature	95		0	0	
	in (		NA	-		om eyes, nose, a nting Contami	nd mouth nation by Hands	0	0	-	20 21	100	00	8		Proper cold he Proper date m					-8	8	5
_		0			Hands clean an	d properly washe		_	0	5		×	0	0	0	Time as a pub	lic heat	th control	procedure	es and records		0	1
		0	٥	0	alternate proces	dures followed		0	0	Ľ		IN	OUT	NA	NO	C			Advisory		+	-	_
_	IN (	OUT	NA	NO		Approved 2			0	<u> </u>	23	×	0	0		Consumer ad food					0	0	4
	8		0	20		from approved so at proper tempera			0			IN	OUT		NO				le Populat		+-		
11	×	0			Food in good co	ondition, safe, and	d unadulterated I stock tags, parasite	0	0	5	24		0	×		Pasteurized fo	ods us			not offered	0	0	•
		0	XX NA	O NO	destruction	tection from C		0	0		25	IN O	OUT	NA		Food additive	5: anyy	Chemie wed and		ad.		0	
13	2	0	0		Food separated	and protected			0		26	×	0		·	Toxic substan	ces pro	perly ider	ntified, store	ed, used		ŏ	5
		0	0			urfaces: cleaned on of unsafe food	and sanitized d, returned food not re-	0	0	5 2	27	IN O	OUT	NA	NO	Compliance w HACCP plan				ocess, and	0	0	5
				Goo		tices are prev	rentive measures to c	ontro	l the	intr	oduc	tion	ofp	atho	gens		, and i	ohvaica	l objects	into foods.		-	-
										ETA			_			,							
				00	Tenot in complian	e mpliance Stat	COS=con	ected o		during								t (violation ce Stat		e code provision			WT
	_	OUT	_	_	Sa	e Food and Wa						0	UT			Uten	sils an	d Equip:	ment				
20					d eggs used wh lice from approv			0	0	2	45	5 0				nfood-contact and used	surface	s cleanab	ole, property	y designed,	0	0	1
30		0 0UT	Varia	nce c		ialized processin Temperature C		0	0	1	46	1	o v	Varew	ashin	g facilities, inst	talled, m	aintaineo	d, used, tes	t strips	0	0	1
31		0					uipment for temperature	0	0	2	47	_	_	lonfoo	d-cor	ntact surfaces (					0	0	1
32	-	0	contr Plant		properly cooked	for hot holding		0	0	1	48		υτ Ο ⊦	lot and	1 cold	Ph water availabi		Facilitie uate pres			0	0	2
33	5	0	Appr	oved	thawing method	s used		0	0	1	49	1	R P	Numbir	ng ins	stalled; proper	backflov	v devices	1		0	0	2
34		OUT		morrie	eters provided ar	od identificati	on	0	0	1	50	_	-			waste water p s: properly cor				1		0	
35	;	0	Food	l prop	erly labeled; orig	inal container; re	quired records available	0	0	1	52	2 0	0	Sarbag	e/refi	use properly di	sposed;	facilities	maintained	ŧ	0	0	1
		OUT			Preventio	n of Feed Cont	amination		—		53	5	R P	hysica	al faci	ifties installed,	maintai	ned, and	clean		0	0	1
36	:	×	Insec	ts, ro	dents, and anim	als not present		0	0	2	54	1	0 ^	vdequa	nte ve	ntilation and lig	ghting; d	lesignate	d areas use	ed	0	0	1
37	'	0	Cont	amina	ation prevented of	during food prepa	ration, storage & display	0	0	1		0	UT			Ada	ninistra	ntive ite	ms				
38		-	-		leanliness ths: properly use	and stoned		0	0	1	55					nit posted inspection pos	tod				0	0	0
40	_				ruits and vegetal				ŏ		É		<u>n 28</u>	105616	Ven.	Con	npliand	e State					wτ
4	_	OUT	lo ur	o udo	Prop nsils; properly st	per Use of Uter	nsils		0	-	57		-	Samel	1000	No with TN Non-S	n-Smo	kers Pro	tection A	lict .		T N	
43	2	0	Uten	sils, e	quipment and lin	nens; properly sto	ored, dried, handled	0	0	1	58	5	T	obacc	o pro	ducts offered f	or sale				0	0	0
4:	5	0	Singl	e-use		articles; properly		0	8	1	55		If	tobac	co pr	oducts are solo	d, NSP/	survey	completed		0	0	1
		-				r items within ten	(10) days may result in susp				service		blish	ment p	ermit.	Repeated violat	tion of a	n identical	risk factor r	may result in re	vocation	of ye	ur food
servi	-	tablis vi no	hmen st the	t perm	nit. Items identified	d as constituting in report in a conspic	minent health hazards shall yous manner. You have the r	be com	icted i	mmed	ately o	er ope	mation	ns shall	ceas	e. You are requi	ired to p	ost the foo	od service es	stablishment pe	mit in a	consp	picuous
repor	L. T.(	C.A.	ectio	ns 68-	14-703, 68-14-705,	68-14-708, 68-14-70	9, 68-14-711, 68-14-715, 68-14 11/	716, 4-5	320.		-	-	-				_						
	1	ø	5	J.	لعرفهم		11/	30/2	023	3	-	N	ic	l	-V	as a second	en f	/			11/3	30/2	2023
Sign	atur	e of	Pers	on In	Charge				[	Date	Sig	natu	re of	Envir	onme	ental Health S	pecialis	đ					Date
						Additional f	ood safety information ca	n be fe	ound	on ou	r web	site,	http	c//tn.g	jow/h	ealth/article/	eh-food	Iservice	****				

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PH-2267 (Rev. 6-15)	Free food safety training cla		th at the county health department.	RDA 629
	Please call (	) 6153405620	to sign-up for a class.	101.020

#### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



#### Establishment Information

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Establishment Name: Centennial Cafe Establishment Number #: 605245656

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							

Equipment Temperature	
Description	Temperature (Fahrenheit)

Description	State of Food	Temperature ( Fahrenheit

Observed Violations Total # 4 Repeated # 0 36: 49: 53: 56:	
36: 49: 53:	
36: 49: 53:	
49: 53:	
53:	
53: 56:	
56:	

#### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



#### Establishment Information

Establishment Name: Centennial Cafe Establishment Number : 605245656

Comments/Other Observations

	uld not be displayed	

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: Centennial Cafe

Establishment Number : 605245656

Comments/Other Observations (cont'd)

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

#### Establishment Information

Establishment Name: Centennial Cafe Establishment Number #: 605245656

Sources		
Source Type:	Source:	

## Additional Comments