



TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
64

Establishment Name MEMORIES CAFE
Address 1098 MURFREESBORO PIKE
City Nashville
Inspection Date 10/12/2023
Risk Category 01
Number of Seats 70

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Table with 2 main columns: Supervision, Employee Health, Good Hygienic Practices, Preventing Contamination by Hands, Approved Source, Protection from Contamination, Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods, Cooling and Holding, Date Marking, and Time as a Public Health Control, Consumer Advisory, Highly Susceptible Populations, Chemicals, Conformance with Approved Procedures.

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES

Table with 2 main columns: Safe Food and Water, Food Temperature Control, Food Identification, Prevention of Food Contamination, Proper Use of Utensils, Utensils and Equipment, Physical Facilities, Administrative Items, Compliance Status, Non-Smokers Protection Act.

Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit.

Signature of Person In Charge: [Signature] Date: 10/12/2023
Signature of Environmental Health Specialist: [Signature] Date: 10/12/2023

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



<b>Establishment Information</b>	
Establishment Name:	MEMORIES CAFE
Establishment Number #:	605253587

<b>NSPA Survey – To be completed if #57 is "No"</b>	
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.	Yes
Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	Yes
"No Smoking" signs or the International "Non-Smoking" symbol are not conspicuously posted at every entrance.	Yes
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.	No
Smoking observed where smoking is prohibited by the Act.	Yes

<b>Warewashing Info</b>			
Machine Name	Sanitizer Type	PPM	Temperature ( Fahrenheit)
3 compartment sink not yet set	Cl		

<b>Equipment Temperature</b>	
Description	Temperature ( Fahrenheit)
Prep cooler 1	39
Walk in cooler	36
Chest freezer 1 (no thermometer )	
Chest freezer 2 (no thermometer)	

<b>Food Temperature</b>		
Description	State of Food	Temperature ( Fahrenheit)
Sliced tomatoes on prep cooler	Cold Holding	52
jalapenos on prep cooler	Cold Holding	57
Mozzarella cheese in walk in cooler	Cold Holding	39
Raw chicken In walk in cooler	Cold Holding	39

## Observed Violations

Total # 28

Repeated # 0

- 11: Dripping meat cooling down in 2 door reach in freezer onto bananas .  
Corrective Action: disposed by person in charge 1 lbs.
- 13: Par cooked chicken and beef stored over ready to eat rice in walk in cooler.  
Corrective Action: moved to proper storage area,
- 13: Raw shelled eggs stored over bread and yellow mustard in walk in cooler.  
Corrective Action: moved to proper storage area by person in charge
- 14: No sanitizer at 3 compartment sink at sink initially and person in charge did not know where to find some. Corrective Action: bleach was found in facility and reviewed proper ware washing and use of bleach and test strips.
- 20: Improper cold holding of tomatoes at 54F on prep cooler. Prep was possibly done at 5 PM. Corrective Action: items placed on ice and in walk in cooler to achieve proper cooling. Follow up required to ensure cooler is working properly.
- 26: Burn and itch spray stored over food in dry storage area. Corrective Action: moved to proper storage area.
- 26: Terminex stored in dry stock room. Corrective Action: discussed and reviewed that pesticide must be applied by licensed pest control and that pesticide should not be stored on site.
- 34: Missing thermometer in chest freezer.
- 35: Some containers of powder on shelving in dry storage.
- 36: Excessive mouse droppings through out dry storage stock room.
- 36: Observed dead insects in traps and under equipment
- 36: Dead mice under cooking equipment in main kitchen.
- 36: Flying insects observed during inspection.
- 37: Excessive ice build up in chest freezer covering food.
- 37: Bulk powder containers have no lid
- 37: Personal drink stored over tea packets and straws.
- 37: Bug trap stored over prep table near 3 compartment sink.
- 42: Wet nesting of pans at 3 compartment sink
- 43: Some single service plates stored with food contact surface face up that does not allow for prevention of contamination
- 45: Excessive wear and scoring on cutting boards in facility.
- 45: Shelving in facility is wrapped with foil and some has excessive food build
- 45: Cracked plastic pans in use for meats in walk in cooler.
- 45: Bananas and other food product stored in shopping bag and non food grade containers.
- 46: Chlorine tests strips not on site.
- 47: Excessive grease build up on hood vent covers.
- 51: Women's restroom has some build up and dirty

**Observed Violations**

**Total #** 28

**Repeated #** 0

53: Excessive grease build up under cooking equipment.  
56: Inspection report not posted.



**Establishment Information**

Establishment Name: MEMORIES CAFE

Establishment Number : 605253587

**Comments/Other Observations**

- 1: Employee illness policy posted at time of inspection.
- 2: Employee illness policy posted at hand sink.
- 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. No unapproved sources discovered during inspection.
- 10: (NO): No food received during inspection.
- 12: (NA) Shell stock not used and parasite destruction not required at this establishment.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: No cooking observed at time of inspection
- 17: (NA) No TCS foods reheated for hot holding.
- 18: Cooling not observed during inspection.
- 19: (NA) Establishment does not hot hold TCS foods.
- 21: Observed proper date marking
- 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.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57: Age-restricted venue restricts access to its buildings or facilities at all times to persons who are twenty-one (21) years of age or older.
- 1:
- 2:
- 3:
- 4:
- 5:
- 6:
- 7: Observed 1 customer smoking in lobby area
- 58: Yes hookah,
- 1:
- 2:
- 3:
- 4:
- 5:

\*\*\*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.**

\*\*\*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: MEMORIES CAFE

Establishment Number : 605253587

***Comments/Other Observations (cont'd)***

***Additional Comments (cont'd)***

***See last page for additional comments.***

**Establishment Information**

Establishment Name: MEMORIES CAFE

Establishment Number #: 605253587

**Sources**

Source Type:	Water	Source:	Metro/municipal
Source Type:	Food	Source:	Restaurant depot/ sams
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

**Additional Comments**

Follow up required to ensure proper compliance and correction of all items.