TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Sec. 1		E CAR																
Establishment Name		ADE COFFEE						_				O Farmer's Market Food Unit at Permanent O Mobile	≻	K				
Addres				1305 DICKERSON PK O Temporary O Seasonal							J							
City				Nashville		Time in	02	2:2	5 F	PM		M/P	мта	ma 01	ut 02:35; PM AM / PM			
Inspec	ion D	ate		06/14/202	21 Establishment #									1110 04				
Purpos				ORoutine	資 Follow-up	O Complaint			- O Pr			-	-	Cor	nsultation/Other			
Risk C	atego	ov.		O 1	322	03			04				Fo	ollow-	up Required O Yes 窥 No Number of S	Seats	59	
		lisk													to the Centers for Disease Control and Preven control measures to prevent illness or injury.	tion	_	
			450	outripeting race														
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS (Mark designated compliance status (IN, OUT, KA, NO) for each numbered Item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.) IN-in compliance OUT=not in compliance NA=not applicable NO=not observed COS=corrected on-site during inspection R=repeat (violation of the same code provision)																		
IN≕in	comp	liance		OUT=not in complian Com	pliance Status	NO=not observe	od COS	R		>s=∝	srrecte	id on-i	site duri	ing ins	spection R*repeat (violation of the same code provis Compliance Status		R	WT
IN	-	r na	NO		Supervision			_			IN	001	NA	NO	Cooking and Roheating of Time/Temperature Control For Safety (TCS) Foods			
1 版				Person in charge p performs duties	vresent, demonstrates k	nowledge, and	0	0	5		6 0				Proper cooking time and temperatures	0	8	5
2) j		r na	NO	Management and f	Employee Health lood employee awarene	ss; reporting	0	0		17	10				Proper reheating procedures for hot holding Ceeling and Holding, Date Marking, and Time as	0	0	-
3 📡	_			,	iction and exclusion		0	0	٥		IN	001		NO	a Public Health Control			
4 🔉	0	r na			od Hyglenic Practice ing. drinking. or tobecco		0	0			8 O 9 O			훐	Proper cooling time and temperature Proper hot holding temperatures	00	ि	
5 🔊		NA			eyes, nose, and mouth ng Contamination by	Hands	0	0	•	2	0 XX 1 XX	8	8		Proper cold holding temperatures Proper date marking and disposition	8	8	5
6 🗎	_			Hands clean and p	roperly washed act with ready-to-eat for	ds or approved		0	5	ź	_	0	X		Time as a public health control: procedures and records	0	0	
7 📓		0	0	alternate procedure			0	0	2	Þ	IN	ou	_	NO	Consumer Advisory Consumer advisory provided for raw and undercooked			
9 X	00	NA	NO		Approved Source	000000000		0		23	3 💢	0	0	NO	food	0	0	4
10 O	0	0	2	Food obtained from Food received at p	roper temperature		0	0		24	-	0	200	neo -	Pasteurized foods used; prohibited foods not offered	0	0	5
11 📓 12 O	_	X	0	Required records a	ition, safe, and unadulte rvailable: shell stock tag		0	0	5	F	IN	001	-	NO	Chemicals	-		
IN	OUT	NA	-		tion from Contamin	ation				25	5 0	0	22		Food additives: approved and properly used	0	8	5
13 📡 14 🔉	0			Food separated an Food-contact surfa	d protected ces: cleaned and sanitiz	red	8	00	4	20	6 😥 IN	0	NA	NO	Toxic substances properly identified, stored, used Conformance with Approved Procedures	0	0	-
15 💥	0	1		Proper disposition	of unsafe food, returned		0	0	2	27	7 0	0	8		Compliance with variance, specialized process, and HACCP plan	0	0	5
	Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.																	
			Goo	d Retail Practic	es are preventive r	neasures to co	GOO							gens	s, chemicals, and physical objects into toods.	_		
			00	Penot in compliance	liance Status	COS=corre	cted o	n-site	during				0		R-repeat (violation of the same code provision)	000		LAUT.
	001	_		Safe	Food and Water		COS		_	b	0	TUC			Compliance Status Utensils and Equipment	cos	ĸ	WT
28	0	Wab	er and	d eggs used where lice from approved	source		8	0	1	4	15				enfood-contact surfaces cleanable, properly designed, and used	0	0	1
30	0		ance o		zed processing method mperature Control	\$	0	0	1	4	16	0	Narew	ashin	g facilities, installed, maintained, used, test strips	0	0	1
31	0	Prop		oling methods used	adequate equipment fo	or temperature	0	0	2	E	_		Vonfoo	d-cor	ntact surfaces clean	0	0	1
32		Plan	t food	properly cooked for			0		1		18	0			Physical Facilities I water available; adequate pressure		0	2
33	-			thawing methods un eters provided and a			0	00	1					- T	stalled; proper backflow devices	0	8	2
	our	_			Identification						_	_			es: properly constructed, supplied, cleaned	0	0	1
35	0		d prop		I container; required rec Feed Contamination		0	0	1			-	-	-	use properly disposed; facilities maintained lities installed, maintained, and clean	0	0	1
36	100	_	cts, ro	dents, and animals			0	0	2	-	-	-			entilation and lighting; designated areas used	ŏ	6	1
37	8	Cont	tamina	ition prevented duri	ng food preparation, sto	rage & display	0	0	1	F		τυς			Administrative Items			
38	-	-		leanliness			0	0	1		55	0	Durrient	t pern	nit posted	0		0
39 40				ths; properly used a ruits and vegetable			8	0	1	F	56		/lost re	cent	inspection posted Compliance Status		0 NO	WT
	OU	1		Proper	Use of Utensils					古					Non-Smokers Protection Act			
41 42		_		nsils; properly store ouipment and linen	d s; properly stored, dried	handled	8	00	1		57 58				with TN Non-Smoker Protection Act ducts offered for sale	8	8	0
43	0	Sing	le-use		cles; properly stored, us			8	1	2	59				roducts are sold, NSPA survey completed	0	0	
_		-			ems within ten (10) days m	ay result in susper				servi	ce est	ablish	ment p	ermit.	Repeated violation of an identical risk factor may result in revo	ation	of you	ar food
manner	and p	ost the	most	recent inspection rep	ort in a conspicuous mann	er. You have the rig	ht to r	eques							e. You are required to post the food service establishment permi filing a written request with the Commissioner within ten (10) days			
A.	1.C.A.	sectio	ns 68-	₩-703, 68-14-706, 68-1	14-708, 68-14-709, 68-14-71				_		٦	\mathbf{i}			XIDHA			
-71	U			WAA	`	06/1	L4/2		_	-	¢		A	\sum		06/1	.4/2	
Signat	ure o	r Pers	ion In	Charge	Additional food out-t	information and	hef		Date						ental Health Specialist			Date
PH-226	7 (Ber	6.15				-								-	ealth/article/eh-foodservice **** unty health department.		P	VA 629

PH-2267 (Rev. 6-15) Free to	ood safety training clas	RDA 62		
PH-2207 (Nev. 6-10)	Please call () 6153405620	to sign-up for a class.	NDA 62

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information						
Establishment Name: RE	TROGRADE COFFEE					
Establishment Number #:	605255602					

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Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						

Equipment Temperature	
Description	Temperature (Fahrenheit)

Food Temperature	State of Food	Temperature (Fahrenheit

Observed Violations		
Total # 3 Repeated # 0		
Repeated # ()		
37:		
39:		
56:		
50.		

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: RETROGRADE COFFEE Establishment Number : 605255602

Comments/Other Observations	
- 	
:	
:	
:	
0:	
1:	
2:	
3:	
.4:	
.5:	
.6:	
.7:	
.8:	
.9:	
L: 2: 3: 4: 5: 6: 7: 8: 9: 10: 11: 12: 13: 14: 15: 16: 17: 18: 19: 20: 21: 22: 23: 24: 25: 26: 27: 27: 27: 27: 27: 27: 27: 27	
21:	
2:	
.3:	
24:	
25:	
26:	
27:	
8: No tobacco products offered for sale.	

***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: RETROGRADE COFFEE

Establishment Number: 605255602

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: RETROGRADE COFFEE Establishment Number #: 605255602

Sources		
Source Type:	Source:	

Additional Comments