

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPOR

| e T | SCORE |
|------------|-------|
| | |

| | | 1 |
|---|---|---|
| | L | 4 |
| J | | J |

O Farmer's Market Food Unit Just Love Coffee Permanent O Mobile Establishment Name Type of Establishment 1310 Hazelwood Dr

O Temporary O Seasonal Smyrna Time in 12:11; PM AM / PM Time out 12:46; PM

04/25/2023 Establishment # 605316672 Embargoed 0 Inspection Date

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

Number of Seats 60 Risk Category О3 Follow-up Required 级 Yes O No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

| 10 | 4 =in c | ompli | ence | | OUT=not in compliance NA=not applicable NO=not observe | ed | | 0 |
|----|----------------|-------|------|----|---|-----|---|----|
| | | | | | Compliance Status | cos | R | WT |
| | IN | OUT | NA | NO | Supervision | | | |
| 1 | 氮 | 0 | | | Person in charge present, demonstrates knowledge, and performs duties | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Employee Health | | | |
| 2 | D)(| 0 | | | Management and food employee awareness; reporting | 0 | 0 | |
| 3 | 寒 | 0 | | | Proper use of restriction and exclusion | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Good Hygienic Practices | | | |
| 4 | X | 0 | | 0 | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | |
| 5 | 黨 | 0 | | 0 | No discharge from eyes, nose, and mouth | 0 | 0 | 0 |
| | IN | OUT | NA | NO | Preventing Contamination by Hands | | | |
| 6 | 滋 | 0 | | 0 | Hands clean and properly washed | 0 | 0 | |
| 7 | 鼷 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved alternate procedures followed | 0 | 0 | 5 |
| 8 | × | _ | | | Handwashing sinks properly supplied and accessible | | 0 | 2 |
| | IN | OUT | NA | NO | Approved Source | | | |
| 9 | 黨 | 0 | | | Food obtained from approved source | 0 | 0 | |
| 10 | 0 | 0 | 0 | 3% | Food received at proper temperature | 0 | 0 | |
| 11 | × | 0 | | | Food in good condition, safe, and unadulterated | 0 | 0 | 5 |
| 12 | 0 | 0 | × | 0 | Required records available: shell stock tags, parasite destruction | 0 | 0 | |
| | IN | OUT | NA | NO | Protection from Contamination | | | |
| 13 | Ŕ | | 0 | | Food separated and protected | 0 | 0 | 4 |
| 14 | 0 | X | 0 | | Food-contact surfaces: cleaned and sanitized | 翼 | 窦 | 5 |
| 15 | × | 0 | | | Proper disposition of unsafe food, returned food not re- served | 0 | 0 | 2 |

| ш | Compliance Status | | | | | | | WT | |
|----|-------------------|-----|-----|----|---|--------------------------------------|---|-----|--|
| | IN | OUT | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | | |
| 16 | 0 | 0 | 0 | 寒 | Proper cooking time and temperatures | 0 | 0 | 5 | |
| 17 | 0 | 0 | 0 | X | Proper reheating procedures for hot holding | 0 | 0 | Ů | |
| | 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 | Proper hot holding temperatures | 0 | 0 | | |
| 20 | 245 | 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 | 333 | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 | |
| | IN | оит | NA | NO | Chemicals | Chemicals | | | |
| 25 | 0 | | 巡 | | Food additives: approved and properly used | 0 | 0 | - 5 | |
| 26 | 0 | * | | | oxic substances properly identified, stored, used 💢 🔾 | | 0 | , | |
| | IN | OUT | NA | NO | Conformance with Approved Procedures | Conformance with Approved Procedures | | | |
| 27 | 0 | 0 | × | | Compliance with variance, specialized process, and HACCP plan | 0 | 0 | 5 | |

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

| | | | GOO | | |
|----|-----|--|-----|---|--------|
| | | OUT=not in compliance COS=con | | | |
| | | Compliance Status | cos | R | W |
| | OUT | | | | |
| 28 | 0 | Pasteurized eggs used where required | 0 | 0 | , |
| 29 | | Water and ice from approved source | 0 | 0 | \Box |
| 30 | 0 | Variance obtained for specialized processing methods | 0 | 0 | l ' |
| | OUT | Food Temperature Control | | _ | |
| 31 | 0 | 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 | |
| 34 | 0 | Thermometers provided and accurate | 0 | 0 | Г |
| | 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 | 1 |
| 38 | 0 | 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 | 1 |
| 43 | 0 | Single-use/single-service articles; properly stored, used | 0 | 0 | r |
| 44 | 0 | Gloves used properly | 0 | 0 | |

| ecti | on | R-repeat (violation of the same code provision) | 1000 | | |
|------|-----|--|------|----|-----|
| _ | | Compliance Status | COS | R | W |
| | OUT | Utensiis and Equipment | Ь. | _ | |
| 45 | 0 | 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 | 4 |
| 47 | 0 | Nonfood-contact surfaces clean | 0 | 0 | - |
| | OUT | Physical Facilities | | | |
| 48 | 0 | Hot and cold water available; adequate pressure | 0 | 0 | - : |
| 49 | 0 | Plumbing installed; proper backflow devices | 0 | 0 | - ; |
| 50 | 0 | Sewage and waste water properly disposed | 0 | 0 | - : |
| 51 | 0 | Toilet facilities: properly constructed, supplied, cleaned | 0 | 0 | |
| 52 | 0 | Garbage/refuse properly disposed; facilities maintained | 0 | 0 | - |
| 53 | 0 | Physical facilities installed, maintained, and clean | 0 | 0 | |
| 54 | 0 | Adequate ventilation and lighting, designated areas used | 0 | 0 | |
| | OUT | Administrative Items | П | | |
| 55 | 0 | Current permit posted | 0 | 0 | П |
| 56 | 0 | Most recent inspection posted | 0 | 0 | |
| | | Compliance Status | YES | NO | ٧ |
| | | Non-Smokers Protection Act | | | |
| 57 | | Compliance with TN Non-Smoker Protection Act | X | 0 | |
| 58 | | Tobacco products offered for sale | 0 | 0 | 1 |
| 59 | | If tobacco products are sold, NSPA survey completed | 0 | 0 | |

You have the right to request a h ten (10) days of the date of the

04/25/2023

04/25/2023

Signature of Person In Charge

PH-2267 (Rev. 6-15)

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

Free food safety training classes are available each month at the county health department.) 6158987889 Please call (to sign-up for a class.

Date

RDA 629

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Just Love Coffee
Establishment Number # | 605316672

| 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 wenty-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. | |
| Sarage type doors in non-enclosed areas are not completely open. | |
| Fents 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. | \vdash |
| Smoking observed where smoking is prohibited by the Act. | - |

| Warewashing Info | | | | | | | |
|------------------------|----------------|-----|---------------------------|--|--|--|--|
| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenhelt) | | | | |
| Dish machine | CI | 0 | | | | | |
| Dish machine | CI | 100 | | | | | |
| 3 comp sink not set up | | | | | | | |

| Equipment Temperature | | | | | |
|-----------------------|---------------------------|--|--|--|--|
| Description | Temperature (Fahrenheit) | | | | |
| Reach in cooler | 37 | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Food Temperature | | | | | |
|----------------------------------|---------------|-------------------------|--|--|--|
| Description | State of Food | Temperature (Fahrenheit | | | |
| White gravy steam well | Hot Holding | 139 | | | |
| Scrambled egg steam well | Hot Holding | 140 | | | |
| Salsa make line cooler | Cold Holding | 40 | | | |
| Breaded chicken make line cooler | Cold Holding | 41 | | | |
| Sausage pattie make line cooler | Cold Holding | 40 | | | |
| Sliced ham ric | Cold Holding | 41 | | | |
| Breaded chicken ric | Cold Holding | 41 | | | |
| Milk coffee area ric | Cold Holding | 40 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Observed Violations |
|---|
| Total # 3 |
| Repeated # () |
| 14: Dish machine was not reading any sanitizer. Sink and surface bucket was completely empty. Corrected by discussing and pic replacing sanitizer with new bucket. Was able to get a reading of 100ppm cl. This is a repeat violation, a warning letter will be requested. 26: Multiple chemical spray bottles with clear liquid in coffee area not labeled. |
| Corrected by discussing and pic labeling bottles. 37: Multiple employee drinks stored on food prep tables directly next to stored 2 |
| go boxes and food product. |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Just Love Coffee
Establishment Number: 605316672

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Management awareness
- 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: Employees stayed on task
- 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 food source
- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (NA) Shell stock not used and parasite destruction not required at this establishment.
- 13: (IN) All raw animal food is separated and protected as required.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: Not observed
- 17: (NO) No TCS foods reheated during inspection.
- 18: Not observed
- 19: See food temps
- 20: See food temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 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:

58:

***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 Name: Just Love Coffee | | | |
|--|--|--|--|
| Establishment Number: 605316672 | | | |
| | | | |
| Comments/Other Observations (cont'd) | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Additional Comments (cont'd) | | | |
| See last page for additional comments. | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Establishment Information

| Establishment information | | | | |
|--|------------------------|------------------------------|----------------------------------|-----------|
| Establishment Name: Just Love Coffee Establishment Number # 605316672 | | | | |
| Establishment Number #; | 605316672 | | | |
| Sources | | | | |
| | | | | |
| Source Type: | Food | Source: | Sysco | |
| Source Type: | Water | Source: | Smyrna city | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Additional Commer | nts | | | |
| Bluebaldwin12@gma | ail.com | | | |
| A warning letter will brisk control plan. | e requested for repeat | violation. Will send applica | able food safety fact sheets and | discuss a |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

. .. .

. . .