

Establishment Name

Inspection Date

Risk Category

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Remanent O Mobile Type of Establishment

Follow-up Required

O Temporary O Seasonal

O Yes 疑 No

SCORE

Number of Seats 20

Time in 02:10 PM AM/PM Time out 02:15: PM AM/PM

04/01/2024 Establishment # 605251717 Embargoed 0

∰ Follow-up Purpose of Inspection Routine O Complaint O Preliminary O Consultation/Other О3

CAFE ROZE RESTAURANT

1115 PORTER RD

Nashville

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FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

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

10	¥=in c	omplii	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		CC	\$=co	rrecte	d on-si	te duri	ing int	spection
					Compliance Status	cos	R	WT						
	IN	OUT	NA	NO	Supervision					IN	оит	NA	NO	Co
1	鼷	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	0	0	0	300	Prope
	IN	ОИТ	NA	NO	Employee Health				17	ŏ	ŏ	XK.	6	Prope
2	300	0			Management and food employee awareness; reporting	0	0	\Box				-		Cool
3	×	0			Proper use of restriction and exclusion	0	0	5		IN	OUT	NA	NO	
	IN	OUT	NA	NO	Good Hygienic Practices				18	0	0	0	涎	Prope
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0		19	0	0	楽	0	Prope
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	5	20	245	0	0		Prope
	IN	OUT	NA	NO	Preventing Contamination by Hands				21	200	0	0	0	Prope
6	100	0		0	Hands clean and properly washed	0	0		22	0	0	×	0	Time a
7	級	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5	L.	_	_		_	11176
		_			alternate procedures followed	_	_	\Box		IN	OUT	NA	NO	
8	-	0			Handwashing sinks properly supplied and accessible	0	0	2	23	×	lol	0		Consu
		OUT	NA	NO					food					
9	黨	0			Food obtained from approved source	0	0	l I		IN	OUT	NA	NO	
10	0	0	0	×	Food received at proper temperature	0	0	١.١	24	0	0	300		Paste
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	Ľ.	ŭ	ŭ	-		, asic
12	Ħ	0	0	0	Required records available: shell stock tags, parasite destruction	0	0	ΙI		IN	ОUТ	NA	NO	
	IN	OUT	NA	NO	Protection from Contamination				25	0	0	X		Food
13	黛	0	0		Food separated and protected	0	0	4	26	窳	0			Taxic:
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	×		Comp

ш					Compliance Status	COS	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	-	0	0	寒	Proper cooking time and temperatures	0	0	5
17	0	0	200	0	Proper reheating procedures for hot holding	0	0	
	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	文	0	Proper hot holding temperatures	0	0	
20		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	OUT	NA	NO	Chemicals			
25		0	X		Food additives: approved and properly used	0	0	5
26	0.0	0			Toxic substances properly identified, stored, used	0	0	Ľ
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

Good Retail Practices are preventive m ires to control the introduction of pathoge s, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	W
	OUT	Caro i con amo i i mon			
28	0	Pasteurized eggs used where required	0	0	
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	
	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	г
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 Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	0	Contamination prevented during food preparation, storage & display	0	0	Г
38	0	Personal cleanliness	0	0	Г
39	0	Wiping cloths; properly used and stored	0	0	Г
40	0	Washing fruits and vegetables	0	0	Г
	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	Г
43	0	Single-use/single-service articles; properly stored, used	0	0	Г
44	0	Gloves used properly	-	0	т

pecti		R-repeat (violation of the same code provision) Compliance Status	COS	R	W
	OUT	Utensiis and Equipment	-	-	
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	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	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items			
55	0	Current permit posted	0	0	Γ,
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	0	100	
58		Tobacco products offered for sale	0	0	١
59		If tobacco products are sold, NSPA survey completed	0	0	_

er and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regardi 53-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320. n ten (10) days of the date of the

04/01/2024

Date Signature Environmental Health Specialist 04/01/2024 Date

Signature of Person In Charge

**** 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. PH-2267 (Rev. 6-15) RDA 629) 6153405620 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information										
Establishment Name: CAFE ROZE RE										
Establishment Number #: 605251717										
NSPA Survey - To be completed if										
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.										
Age-restricted venue does not require each per	rson attempting to gain entry	to submit acceptable f	orm of identification.							
"No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.										
Garage type doors in non-enclosed areas are not completely open.										
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.										
Smoke from non-enclosed areas is infiltrating in	nto areas where smoking is p	prohibited.								
Smoking observed where smoking is prohibited	i by the Act.									
Warewashing Info		1								
Machine Name	Sanitizer Type	PPM	Temperature (Fat	irenheit)						
Equipment Temperature										
Description			Temperature (Fah	renhelt)						
			<u>'</u>							
Food Temperature										
Description		State of Food	Temperature (Fah	renhelt)						
			1							
1										

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information		
Establishment Name: CAFE ROZE RESTAURANT		
Establishment Number: 605251717		
Comments/Other Observations		
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2:		
3:		
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Additional Comments	
See last page for additional comment	S.
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^{***}See page at the end of this document for any violations that could not be displayed in this space.

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

Establishment Name: CAFE ROZE RESTAURANT				
Establishment Number: 605251717				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				

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Sources						
Source Type:	Source:					
Source Type:	Source:					
Source Type:	Source:					
Source Type:	Source:					
Source Type:	Source:					
Additional Comments						
All critical items corrected.						

Establishment Information