

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

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O Farmer's Market Food Unit **Backroads Coffee TN** O Permanent MMobile Establishment Name Type of Establishment 1913 Hwy 166 N O Temporary O Seasonal Mt. Pleasant Time in 11:00; AM AM/PM Time out 11:30; AM AM/PM 03/06/2024 Establishment # 605324131 Embargoed 0 Inspection Date O Follow-up Purpose of Inspection **K**Routine O Complaint O Preliminary O Consultation/Other

Risk Category О3 04 Follow-up Required O Yes 疑 No

10	in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe				S=co	rrecte	ed on-si	te duri	ing ins	spection R=repeat (violation of the same code pr
	Compliance Status						R WT Compliance Status				Compliance Status			
		оит	NA	NO	Supervision Person in charge present, demonstrates knowledge, and					IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods
1	×	0			performs duties	0	0	5	16	0	0	XX.	0	Proper cooking time and temperatures
	IN	OUT	NA	NO	Employee Health	-			17	0	0	X		Proper reheating procedures for hot holding
2	2 X O Management and food employee awareness; reporting		ा ।							Cooling and Holding, Date Marking, and Time				
3	×	0			Proper use of restriction and exclusion	0 0 5		IN	OUT	NA	NO	a Public Health Control		
	IN	OUT	NA	NO	Good Hygienic Practices				18	0	0	0	×	Proper cooling time and temperature
4	0	0		X	Proper eating, tasting, drinking, or tobacco use	0	0		19		0	文	0	Proper hot holding temperatures
5	0	0		*	No discharge from eyes, nose, and mouth	0	0	l ° I	20	124	0	0		Proper cold holding temperatures
	IN	OUT	NA	NO	Preventing Contamination by Hands				21	0	0	746	0	Proper date marking and disposition
6	0	0			Hands clean and properly washed	0	0		22	0	0	×	0	Time as a public health control: procedures and record
7	0	0	0	×	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	∣°∣	Н	IN	OUT		NO	Consumer Advisory
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2	23	0	$\overline{}$	M		Consumer advisory provided for raw and undercooked
	IN	OUT	NA	NO	Approved Source				23	10	0	245		food
9	黨	0			Food obtained from approved source	0	0	\Box		IN	OUT	NA	NO	Highly Susceptible Populations
10	0	0	0	×	Food received at proper temperature	0	0	1	24	0	0	323		Dactaurized foods used prohibited foods not afford
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	[24	10	•	340		Pasteurized foods used; prohibited foods not offered
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			IN	OUT	NA	NO	Chemicals
		OUT	NA	NO	Protection from Contamination				25		0	- XX		Food additives: approved and properly used
13	Ŕ	0	0		Food separated and protected	0	0	4	26	窦	0			Toxic substances properly identified, stored, used
14	X	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Conformance with Approved Procedures
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	×		Compliance with variance, specialized process, and HACCP plan

	GOOD RETAIL PRACTICES											
	OUT=not in compliance COS=corrected on-site during inspection R-repeat (violation of the same code provision)											
Compliance Status				COS R WT] [Compliance Status	COS	R	WT
	OUT Safe Food and Water				1 [OUT	UT Utensiis and Equipment				
28	0	Pasteurized eggs used where required	0	0	1	1 [45 O Food and nonfood-contact surfaces cleanable, prope		Food and nonfood-contact surfaces cleanable, properly designed,	0	0	•
29	0	Water and ice from approved source	0	0	2	1 L	40	•	constructed, and used	_	u	'
30		Variance obtained for specialized processing methods	0	0	1] [46 O Warewashing facilities, installed, maintained, used, test		Warewashing facilities, installed, maintained, used, test strips	0	0	4
OUT Food Temperature Control 49 Vivarewashing facilities, ins		warewashing lacinoes, installed, maintained, dised, test sorps		_								
31	0	Proper cooling methods used; adequate equipment for temperature	0	0	2	11	47	0	Nonfood-contact surfaces clean	0	0	1
31	١٠	control	١ ٠	١٧	l ²	11		OUT	Physical Facilities		_	
32	0	Plant food properly cooked for hot holding	0	0	1	11	48 O Hota		Hot and cold water available; adequate pressure	0	ा	2
33	_	Approved thawing methods used	ō	Ō	1	11			Plumbing installed; proper backflow devices	ō	ō	2
34	_	Thermometers provided and accurate	0	0	1	11	50		Sewage and waste water properly disposed	0	0	2
	OUT		Ť	_		t t	51 O Toilet facilities: properly constructed, supplied, cleaned		ō	ō	1	
35	0	Food properly labeled; original container; required records available	0	О	1	11	52		Garbage/refuse properly disposed; facilities maintained	0	ō	1
-	OUT	Prevention of Feed Contamination	-			53	\sim	Physical facilities installed, maintained, and clean	0	0	1	
_	-				_	\neg					-	
36	0	Insects, rodents, and animals not present	0	0	2	IJ	54 0		Adequate ventilation and lighting; designated areas used	0	0	1
37	0	Contamination prevented during food preparation, storage & display	0	0	1	Ш	OUT Administrative Items		Administrative Items			
38	0	Personal cleanliness	0	0	1	11	55	0	Current permit posted	0	ा	0
39	0	Wiping cloths; properly used and stored	0	0	1	11	56	0	Most recent inspection posted	0	0	v
40	0	Washing fruits and vegetables	0	0	1	11	Compliance Status		YES	NO	WT	
	OUT	Proper Use of Utensils				1 [Non-Smokers Protection Act					
41		In-use utensils; properly stored	0	0	1	1 C	57 58		Compliance with TN Non-Smoker Protection Act	X	0	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1][58		Tobacco products offered for sale	0	0	0
43		Single-use/single-service articles; properly stored, used	0	0	1][59		If tobacco products are sold, NSPA survey completed	0	0	
44	0	Gloves used properly	0	0	1] ,						

n ten (10) days of the date of th

03/06/2024 Date Signature of Environmental Health Sp Signature of Person In Charge

03/06/2024 Date

**** 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) 9315601182 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Establishment Information



ı	Establishment Name: Backroads Coffee TN	
ı	Establishment Number ≠ 605324131	
ı	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 twenty-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.	
	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 into areas where smoking is prohibited.	
ı	Smoking observed where smoking is prohibited by the Act.	

Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)					
3 comp sink (not set up)	Chlorine							

Equipment Temperature							
Description	Temperature (Fahrenheit)						
RIC	39						

Food Temperature					
State of Food	Temperature (Fahrenheit				
	State of Food				

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Backroads Coffee TN

Establishment Number: 605324131

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2: IN

- 3: (IN) There are no food workers observed working with specific reportable symptoms or illnesses.
- 4: (N.O.) No food workers present.
- 5: (N.O.) No food workers present at the time of inspection.

6: NO

- 7: (NO) No food workers present during the inspection.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: See 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.
- 14: (IN) All food contact surfaces of equipment and utensils cleaned and sanitized using approved methods.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: NO
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: NO
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 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.
- 26: (IN) All poisonous or toxic items are properly identified, stored, and used.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.

57:

58:

Additional Comments

See last page for additional comments.

^{***}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: Backroads Coffee TN	
Establishment Number: 605324131	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Name: Backroads Coffee TN	Establishment Inform	nation			
Source Type: Food Source: Kroger Source Type: Water Source: City Source Type: Source: Source Type: Source: Source Type: Source: Source Type: Source:		ickroads Coffee TN			
Source Type: Food Source: Kroger Source Type: Water Source: City Source Type: Source: Source Type: Source: Source: Source Type: Source:	Establishment Number #:	605324131			
Source Type: Food Source: Kroger Source Type: Water Source: City Source Type: Source: Source Type: Source: Source: Source Type: Source:	100				
Source Type: Water Source: City Source Type: Source: Source Type: Source: Source Type: Source:	Sources				
Source Type: Source Type: Source Type: Source: Source:	Source Type:	Food	Source:	Kroger	
Source Type: Source: Source Type: Source:	Source Type:	Water	Source:	City	
Source Type: Source:	Source Type:		Source:		
	Source Type:		Source:		
Additional Comments	Source Type:		Source:		
	Additional Comme	nts			