

Establishment Name

Inspection Date

Address

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Mean Mug Coffeehouse North Permanent O Mobile Type of Establishment 205 Manufacturer's Rd Suite 109 O Temporary O Seasonal Chattanooga

Time in 02:00 PM AM / PM Time out 02:50; PM 04/03/2023 Establishment # 605252276 Embargoed 0

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

Number of Seats 49 Risk Category О3 04 Follow-up Required 级 Yes O No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

s (IH, OUT, HA, HO) for e

| IIN | in ¢ | ompli | ance | | OUT=not in compliance NA=not applicable NO=not observe | ed | | CC | S=00 | rrecte | d on-si | te duri | ing ins | pection |
|-----|------|-------|------|----|---|-----|---|--------|------|--------|---------|---------|---------|---|
| | | | | | Compliance Status | COS | R | WT | | | | | | Complia |
| | IN | оит | NA | NO | Supervision | | | | Г | IN | оит | NA | NO | Cooking and I |
| 1 | 盔 | 0 | | | Person in charge present, demonstrates knowledge, and performs duties | 0 | 0 | 5 | 16 | 0 | 0 | 0 | 300 | Proper cooking tim |
| | IN | OUT | NA | NO | Employee Health | | - | | 17 | _ | ŏ | ō | 8 | Proper reheating p |
| 2 | 700 | 0 | | | Management and food employee awareness; reporting | 0 | О | \neg | | | | | | Cooling and Ho |
| 3 | 寒 | 0 | | | Proper use of restriction and exclusion | 0 | 0 | 5 | | IN | ОUТ | NA | NO | a P |
| | IN | OUT | NA | NO | Good Hygienic Practices | | | | 18 | 100 | 0 | 0 | 0 | Proper cooling time |
| 4 | X | 0 | | | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | 5 | 15 | 1 | 0 | 0 | 0 | Proper hot holding |
| 5 | * | 0 | | 0 | No discharge from eyes, nose, and mouth | 0 | 0 | 0 | 20 | 0 | 100 | 0 | | Proper cold holding |
| | IN | OUT | NA | NO | Preventing Contamination by Hands | | | | 21 | 120 | 0 | 0 | 0 | Proper date markin |
| 6 | 100 | 0 | | 0 | Hands clean and properly washed | 0 | 0 | | 22 | 0 | 0 | × | 0 | Time as a public he |
| 7 | 왮 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved alternate procedures followed | 0 | 0 | 5 | | IN | _ | NA. | NO | C C |
| 8 | × | 0 | | | Handwashing sinks properly supplied and accessible | 0 | 0 | 2 | 1 | - | | | - NO | Consumer advisor |
| | IN | OUT | NA | NO | Approved Source | | | | 23 | 0 | 0 | × | | food |
| 9 | 窓 | 0 | | | Food obtained from approved source | 0 | 0 | | | IN | OUT | NA | NO | Highly : |
| 10 | 0 | 0 | 0 | 38 | Food received at proper temperature | 0 | 0 | 1 | | | | 6-2 | | Barata de la facilità del facilità del facilità de la facilità de |
| 11 | × | 0 | | | Food in good condition, safe, and unadulterated | 0 | 0 | 5 | 24 | 0 | 0 | × | | Pasteurized foods |
| 12 | 0 | 0 | × | 0 | Required records available: shell stock tags, parasite destruction | 0 | 0 | | | IN | оит | NA | NO | |
| | IN | OUT | NA | NO | Protection from Contamination | | | | 25 | 0 | 0 | 3% | | Food additives: ap |
| 13 | × | 0 | 0 | | Food separated and protected | 0 | 0 | 4 | 26 | 窦 | 0 | | | Toxic substances |
| 14 | X | 0 | 0 | | Food-contact surfaces: cleaned and sanitized | 0 | 0 | 5 | | IN | OUT | NA | NO | Conformano |
| 15 | Ħ | 0 | | | Proper disposition of unsafe food, returned food not re- served | 0 | 0 | 2 | 27 | 0 | 0 | × | | Compliance with vi HACCP plan |

| | | | | | Compliance Status | COS | R | 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 | 300 | 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 | 寒 | 0 | 0 | 0 | Proper hot holding temperatures | 0 | 0 | 1 |
| 20 | 0 | 黨 | 0 | | Proper cold holding temperatures | 0 | 0 | 5 |
| 21 | * | 0 | 0 | 0 | Proper date marking and disposition | 0 | 0 | 1 |
| 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 | × | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| | IN | оит | NA | NO | Chemicals | | | |
| 25 | 0 | 0 | X | | Food additives: approved and properly used | 0 | 0 | 5 |
| 26 | 菜 | 0 | | | Toxic substances properly identified, stored, used | 0 | 0 | • |
| | IN | OUT | NA | NO | Conformance with Approved Procedures | | | |
| 27 | 0 | 0 | × | | Compliance with variance, specialized process, and HACCP plan | 0 | 0 | 5 |

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

| | | | GOO | | |
|----|-----|--|-----|---|---|
| | | OUT=not in compliance COS=con | | | |
| | | Compliance Status | cos | R | W |
| | OUT | Caro i con amo i i mori | | | _ |
| 28 | 0 | Pasteurized eggs used where required | 0 | 0 | 1 |
| 29 | 0 | | 0 | 0 | |
| 30 | 0 | Variance obtained for specialized processing methods | 0 | 0 | 1 |
| | 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 | r |
| 33 | 0 | Approved thawing methods used | 0 | 0 | 7 |
| 34 | 0 | Thermometers provided and accurate | 0 | 0 | Г |
| | OUT | Food Identification | | | |
| 35 | 0 | Food properly labeled; original container; required records available | 0 | 0 | ŀ |
| | OUT | Prevention of Food Contamination | | | |
| 36 | 0 | Insects, rodents, and animals not present | 0 | 0 | : |
| 37 | 0 | Contamination prevented during food preparation, storage & display | 0 | 0 | ŀ |
| 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 | | | Π |
| 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 | | 0 | 0 | r |
| - | | | | | |

| pecti | on | 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 | |
| 47 | 凝 | 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 | - 7 |
| 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 | Т | | |
| 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 | - 100 | 0 | |
| 58 | | Tobacco products offered for sale | 0 | 0 | ١ ١ |
| 59 | | If tobacco products are sold, NSPA survey completed | 0 | 0 | |

You have the right to request a h in (10) days of the date of the 8-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320

04/03/2023

04/03/2023

Signature of Person In Charge

Date Signature of Environmental Health Specialist

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) 4232098110 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Mean Mug Coffeehouse North

Smoking observed where smoking is prohibited by the Act.

Establishment Number #: |605252276

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.

| Warewashing Info | | | |
|-------------------|----------------|-----|---------------------------|
| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenhelt) |
| Dishwasher | Chlorine | 50 | |
| Sanitizer buckets | QA | 150 | |
| Triple Sink | | 200 | |

| | quipment Temperature | | | | | |
|-------------|-------------------------|--|--|--|--|--|
| Description | Temperature (Fahrenheit | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| Description | State of Food | Temperature (Fahrenheit |
|---------------------|---------------|--------------------------|
| Sliced tomato | Cold Holding | 46 |
| Mix salad | Cold Holding | 47 |
| Sausage patty | Cold Holding | 36 |
| Tomato under grill | Cold Holding | 36 |
| Milk walk in cooler | Cold Holding | 39 |
| Cooked Eggs | Hot Holding | 156 |
| Grits | Hot Holding | 160 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| Observed Violations |
|---|
| Total # 2 |
| Repeated # () |
| 20: Low boy cooler next to grill not holding TCS at proper temperature. TCS |
| foods need be held at 41°F or below. PIC moved TCS foods to walk in cooler. |
| 47: Fume has build up of dust and debris. |
| 47. Fullic has build up of dust and debris. |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |

[&]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: Mean Mug Coffeehouse North

Establishment Number: 605252276

Comments/Other Observations

- 1: (IN): PIC has Active Managerial Control of food systems in FSE. (IN): ANSI Certified Manager present.
- 2: Policy available
- 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 employees practice proper handwashing techniques.
- 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: Approved 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: Cooking not observed during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Did not observe any cooling procedures for TCS foods during inspection.
- 19: See food temperatures.
- 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.
- 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:

***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.

| stablishment Name: Mean Mug Coffeehouse North | | | | |
|---|--|--|--|--|
| Establishment Number: 605252276 | | | | |
| | | | | |
| Comments/Other Observations (cont'd) | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Additional Comments (cont'd) | | | | |
| | | | | |
| See last page for additional comments. | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Establishment Information

| Establishment Information Establishment Name: Mean Mug Coffeehouse North Establishment Number # 605252276 | | | | |
|---|-------|---------|--------------------|--|
| | | | | |
| Sources | | | | |
| Source Type: | Food | Source: | US Foods | |
| Source Type: | Water | Source: | Tennessee American | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Additional Comme | nts | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |