TENNESSEE DEPARTMENT OF HEALTH

| FOOD SERVICE ESTA | | | | | | | | | | | | | sco | RE | | | | | | |
|--------------------|---|---------|----------|---|---|--|-------------------|----------|---------|------------|-----------------------------|----------------|------------|------------------|---------|--|---------------------|------------|----|----|
| Establishment Name | | | | | | | Turn | e el | Eetabli | shme | O Farmer's Market Food Unit | 10 | | $\left(\right)$ |) | | | | | |
| Addre | Address | | | 3500 John A. Merritt O Temporary O Seasonal | | | | | | | | | | / | | | | | | |
| City | | | | 1 | Nashville | | Time in | 01 | L:5 | 5 F | M | A | //P | M Tir | ne o | ut 02:25; PM AM/PM | | | | |
| Inspec | ction | Dat | be | Ō | 04/16/20 | 24 Establishmen | 60524638 | | | | | - irgoe | | | | | | | | |
| - | | | pectio | - 7 | Routine | O Follow-up | O Complaint | | | - O Pro | | - | - | | Cor | nsuitation/Other | | | | _ |
| | Risk Category O1 第2 O3 O4 Follow-up Required O Yes K No Number of Seats | | | | | | | eats | 33 | | | | | | | | | | | |
| | | | ak Fa | | | | | | | | | | | y repo | rtec | to the Centers for Disease Cont | rol and Preven | tion | _ | |
| | | | - | 8 C(| ontributing fac | | | | | | | | | | | control measures to prevent illus INTERVENTIONS | ess or injury. | | | |
| | | (11 | ic desig | La M | ed compliance stat | | | | | | | | | | | ach liem as applicable. Deduct points for | category or subcate | gory.) | | |
| IN-ir | n can | ıpia | nce | | | nce NA=not applicab pliance Status | le NO=not observe | d COS | R | | S=cor | recter | d on-e | site duri | ng ins | spection R=repeat (violation of th Compliance Status | | on) COS | R | WT |
| | N O | UΤ | NA I | w0 | | Supervision | | | | | | IN | ουτ | NA | NO | Cooking and Reheating of Time/ | Temperature | | | |
| 1 8 | 8 0 | 0 | | _ | Person in charge p performs duties | present, demonstrate | s knowledge, and | 0 | 0 | 5 | 16 | 0 | 0 | <u>×</u> | 0 | Control For Safety (TCS) Proper cooking time and temperatures | Foods | 0 | 0 | |
| | | | NA | NO | | Employee Healt | | ~ | | | | | | X | | Proper reheating procedures for hot hok | - | 00 | ŏ | 5 |
| 2 3 | _ | 5 | | - r | | food employee awar riction and exclusion | mess, reporting | 0 | 0 | 5 | | IN | ουτ | NA | NO | Cooling and Holding, Date Marking a Public Health Contr | | | | |
| | NO | | NA I | | | od Hygionic Pract | | | | | | 0 | | × | | Proper cooling time and temperature | | 0 | 0 | |
| 4 X | | 8 | | | | ting, drinking, or toba reyes, nose, and mo | | 0 | 0 | 5 | | 0)23 | | <u>実</u> 0 | 0 | Proper hot holding temperatures Proper cold holding temperatures | | 0 | 응 | 5 |
| 1 | NO | | NA I | | Prevent Hands clean and p | ing Contamination | by Hands | | 0 | _ | 21 | * | 0 | 0 | | Proper date marking and disposition | | 0 | 0 | ° |
| _ | - | ŏ | _ | 0 | No bare hand cont | tact with ready-to-eat | foods or approved | ō | ŏ | 5 | 22 | | 0 | 0 | | Time as a public health control: procedu | | 0 | ٥ | |
| 8 8 | R | 0 | - | | alternate procedur Handwashing sink | s properly supplied a | nd accessible | 0 | 0 | 2 | 23 | _ | 001 | NA X | NO | Consumer advisory provided for raw and | | 0 | 0 | 4 |
| | N O | | NAII | _ | Food obtained from | Approved Source m approved source | • | 0 | 0 | _ | | | - | na | NO | food Highly Susceptible Popula | ations | <u> </u> | - | - |
| | 5 0 | 5 | 0]; | \sim | Food received at p | proper temperature dition, safe, and unad | ultorated | | 0 | 5 | 24 | 0 | 0 | 83 | | Pasteurized foods used; prohibited food | s not offered | 0 | 0 | 5 |
| 12 (| _ | _ | × | 0 | Required records a | available: shell stock | | ŏ | ŏ | | H | IN | OUT | NA | NO | Chemicals | | | _ | |
| 1 | N O | UΤ | NA | NO | | ction from Contan | ination | | | | 25 | 0 | 0 | X | | Food additives: approved and properly u | | 0 | 0 | 5 |
| 13 C | | 허 | 8 | | Food separated an Food-contact surfa | nd protected aces: cleaned and sa | nitized | 8 | 8 | | 26 | <u>実</u> IN | OUT | NA | | Toxic substances properly identified, sto Conformance with Approved F | | 0 | 0 | - |
| 15 8 | _ | 0 | _ | | Proper disposition served | of unsafe food, retur | ned food not re- | 0 | 0 | 2 | 27 | 0 | 0 | 贸 | | Compliance with variance, specialized p HACCP plan | rocess, and | 0 | 0 | 5 |
| | | | _ | _ | | | | | | | _ | | _ | | | | | | _ | |
| | | | | iool | d Retail Practic | ces are preventiv | e measures to co | | | | | | _ | | geni | s, chemicals, and physical object | s into foods. | | | |
| | | | | OUT | not in compliance | | COS=corre | | | during | | | ICE | 3 | | R-repeat (violation of the san | ne code provision) | | | |
| | 0 | UT | | _ | | pliance Status Food and Water | | COS | R | WT | | 10 | υτI | | | Compliance Status Utensils and Equipment | | COS | R | WT |
| 28 29 | - (| 0 | | | d eggs used where ice from approved | e required | | 0 | 8 | 1 | 4 | | 0 F | | | infood-contact surfaces cleanable, proper and used | rly designed, | 0 | 0 | 1 |
| 30 | | 0 | | | btained for special | ized processing meth | | ő | ŏ | 1 | 4 | 6 (| - F | | | g facilities, installed, maintained, used, te | est strips | 0 | 0 | 1 |
| - 14 | - | UT O | Proper | 000 | | mperature Contre t; adequate equipment | | 0 | | | 4 | 7 0 | _ | | | ntact surfaces clean | | - | 0 | 1 |
| 31 | | | control | | - | | | 0 | 0 | 2 | | _ | UT | let on d | | Physical Facilities | | | | _ |
| 32 | _ | | | | properly cooked fo hawing methods u | | | ő | 0 | 1 | 4 | _ | _ | | | f water available; adequate pressure stalled; proper backflow devices | | 0 | 0 | 2 |
| 34 | _ | O UT | Therm | ome | ters provided and | accurate d identification | | 0 | 0 | 1 | | _ | _ | | | waste water properly disposed s: properly constructed, supplied, cleane | d | | 0 | 2 |
| 35 | _ | _ | Food p | rope | | al container; required | records available | 0 | 0 | 1 | 5 | _ | _ | | | use properly disposed; facilities maintaine | | ō | ō | 1 |
| | 0 | σ | | | Prevention | of Food Contamina | ition | | | | 5 | 3 (| o | Physica | il faci | ilities installed, maintained, and clean | | 0 | 0 | 1 |
| 36 | 0 | 0 | insects | , roc | dents, and animals | s not present | | 0 | 0 | 2 | 5 | 4 (| o / | Adequa | te ve | entilation and lighting; designated areas u | sed | 0 | ٥ | 1 |
| 37 | 0 | o | Contar | ninat | tion prevented dur | ing food preparation, | storage & display | 0 | 0 | 1 | | 0 | υτ | | | Administrative items | | | | |
| 38 39 | _ | | | | leanliness | and stored | | 0 | 0 | | | | | | | nit posted inspection posted | | 0 | 0 | 0 |
| 40 | (| 0 | | | hs; properly used uits and vegetable | 5 | | ő | õ | | Ľ | × 1 (| <u>, 1</u> | 1004.16 | VOIL | Compliance Status | | YES | | WT |
| 41 | | UT 0 | n-use | uten | Proper sils; properly store | r Use of Utensils Id | | 0 | 0 | 1 | 5 | , | - 2 | Complia | ance | Non-Smokers Protection with TN Non-Smoker Protection Act | Act | × | 01 | |
| 42 | - (| 0 | Utensil | 5, e¢ | quipment and liner | ns; properly stored, d cles; properly stored, | | 0 | 0 0 | 1 | 5 | 8 | | Tobacc | o pro | ducts offered for sale oducts are sold, NSPA survey completed | | 0 | 0 | ٥ |
| | | | | | single-service are ind properly | cres, property stored, | 0300 | | 8 | | L 30 | × | 1 | 1008C | uo pe | volvos are solo, tvorin satvey completed | 4 | | 9 | |

te to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit in a conspicuous ce establish ner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of thir rt. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-715, 68-14-716, 4-5-329. atto

| 04/16/2024 |
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24 Nucle Vary ment

04/16/2024

| Signature of Person In Charge | Date | Signature of Environmental Health Specialist | |
|-------------------------------|--|---|---------|
| | ** Additional food safety information can be found on ou | r website, http://tn.gov/health/article/eh-foodservic | ce **** |

Date

| PH-2267 (Rev. 6-15) | Free food safety training cla | RDA 629 | | |
|---------------------|-------------------------------|--------------|-------------------------|---------|
| rrs2201 (new. 0-10) | Please call (|) 6153405620 | to sign-up for a class. | 104 025 |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

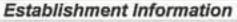
Establishment Name: Starbucks Establishment Number #: 605246384

| Warewashing Info | | | | | | | | | |
|--------------------|----------------|-----|--------------------------|--|--|--|--|--|--|
| Machine Name | Sanitizer Type | PPM | Temperature (Fahrenheit) | | | | | | |
| 3 compartment sink | QA | | | | | | | | |

| Equipment Temperature | | | | | | |
|---------------------------|--------------------------|--|--|--|--|--|
| Description | Temperature (Fahrenheit) | | | | | |
| Prep cooler | 36 | | | | | |
| Prep cooler | 35 | | | | | |
| Sandwich prep cooler | 36 | | | | | |
| Backstock reach-in fridge | 32 | | | | | |

| Food Temperature | | | | | | | |
|--------------------|---------------|-------------------------|--|--|--|--|--|
| Description | State of Food | Temperature (Fahrenheit | | | | | |
| Milk (prep cooler) | Cold Holding | 35 | | | | | |
| Vilk (prep cooler) | Cold Holding | 33 | | | | | |
| | | | | | | | |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Name: Starbucks

Establishment Number : 605246384

Comments/Other Observations

1: (IN): ANSI Certified Manager present.

- 2: Copy available on site
- 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: No employees observed washing hands during inspection.

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 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: No raw animal products stored/cooked on site.
- 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: Establishment does not cool tcs foods
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: Proper cold holding temperatures were observed (= 41 F)
- 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.

Establishment Information

Establishment Name: Starbucks

Establishment Number: 605246384

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Starbucks

Establishment Number # 605246384

| Sources | | | | |
|--------------|------|---------|------------------|--|
| Source Type: | Food | Source: | Starbucks, sysco | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |

Additional Comments