TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Establishment Name			* Mar		The Bread Basket					Fermer's Market Food Unit @ Permanent O Mobile	(Z					
Address 2116 Taft Highway			2116 Taft Highway	Type of Establishment O Mobile							O Temporary O Seasonal		J				
100/000					12	·4	5 F	- M		4/0			ut 01:30: PM AM / PM				
City											d 0		ne o	u <u>91100, 1111</u> AM7PM			
			spect		Routine O Follow-up O Complaint			- O Pr			a =		Cor	nsultation/Other			
		tegor						04		,				up Required O Yes 😰 No Number of S	ioats		
inian.	Con		isk I		ors are food preparation practices and employee b		vior	8 mc				rep	rtec	to the Centers for Disease Control and Preven		_	
				as c	ontributing factors in foodborne illness outbreaks. FOODBORNE ILLNESS RISI			_									
		(11	ırk de	algaat	ed compliance status (IN, OUT, NA, NO) for each numbered item.										gory.		
IN	in c	ompii	ance		OUT=not in compliance NA=not applicable NO=not observed Compliance Status		R)S=co	recte	d on-s	ite duri	ng ins	spection R=repeat (violation of the same code provisi Compliance Status		R	WT
	IN	OUT	NA	NO	Supervision					IN	ουτ	NA	NO	Cooking and Reheating of Time/Temperature			
	×				Person in charge present, demonstrates knowledge, and performs duties	0	0	5		0	0	×		Control For Safety (TCS) Foods Proper cooking time and temperatures	0	0	5
		OUT	NA	NO	Employee Health Management and food employee awareness; reporting	0	0		17	0	0	22		Proper reheating procedures for hot holding Cooling and Holding, Date Marking, and Time as	0	0	
3	×	0			Proper use of restriction and exclusion	0	0	5		IN		NA	NO	a Public Health Control			
		OUT	NA		Good Hygienic Practices Proper eating, tasting, drinking, or tobacco use	0	0		18 19	0	0	<u>×</u>		Proper cooling time and temperature Proper hot holding temperatures	00	0	
5	1	0	NA	0	No discharge from eyes, nose, and mouth Preventing Contamination by Hands	õ	õ	5	20		0	0		Proper cold holding temperatures Proper date marking and disposition	00	0	5
	×		-		Hands clean and properly washed	0	0		22	_	0	×		Time as a public health control: procedures and records	0	0	
	×		0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	-	IN	OUT				Ŭ	-	
		ᅃ	NA	NO	Handwashing sinks properly supplied and accessible Approved Source	0	0	2	23	0	0	麗		Consumer advisory provided for raw and undercooked food	0	0	4
9	黨	0	_		Food obtained from approved source	00	0			IN	OUT		NO	Highly Susceptible Populations			
10			_		Food in good condition, safe, and unadulterated	ŏ	ŏ	5	24	0	0	X		Pasteurized foods used; prohibited foods not offered	0	٥	5
	0	0	×	0	destruction	0	0			IN	OUT		NO	Chemicals			
		OUT O	NA	NO	Protection from Contamination Food separated and protected	0	0	4	25	0 嵐	0	X		Food additives: approved and properly used Toxic substances properly identified, stored, used	0	8	5
14	×	0			Food-contact surfaces: cleaned and sanitized	0	0	5		IN		NA	NO	Conformance with Approved Procedures Compliance with variance, specialized process, and			
15	2	0			served	0	0	2	27	0	0	8		HACCP plan	0	0	5
				Goo	d Retail Practices are preventive measures to con	trol	the	intr	oduc	tion	of p	atho	gens	s, chemicals, and physical objects into foods.			
								ar.				3					
				00	Finot in compliance COS=correct Compliance Status		R		inspe	ction				R-repeat (violation of the same code provision) Compliance Status	COS	R	WT
21		OUT	Pact	0.0526	Safe Food and Water d eggs used where required	~	0	-			UT	ood a	ud no	Utensils and Equipment profood-contact surfaces cleanable, properly designed,			
29)	0	Wate	er and	tice from approved source btained for specialized processing methods	0	8 8	2	4	5				and used	0	٥	1
31		OUT			Food Temperature Control	Ŭ		_	4		_			g facilities, installed, maintained, used, test strips	0	0	1
31	۱	0	Prop		ling methods used; adequate equipment for temperature	0	0	2	4	_	i∭ ∧ UT	lonfoo	d-cor	ntact surfaces clean Physical Facilities	0	0	1
32						0		1	4	_				swater available; adequate pressure	0	8	2
33	_					00	0	1	4	_	_		-	stalled; proper backflow devices waste water properly disposed	0	허	2
	_	OUT			Food Identification				5	_				es: properly constructed, supplied, cleaned		0	1
35	5		Food	i prop		0	0	1	5		- I.			use properly disposed; facilities maintained	0	0	1
3(3	OUT	Insec	ts. ro	Prevention of Feed Contamination dents, and animals not present	0	0	2	5	_	-		_	ilities installed, maintained, and clean entilation and lighting; designated areas used	0	0	1
37	,	0	Cont	amina		0	0	1		0	UT			Administrative Items	_	_	
38						0	0	1	5			ument	pern	nit posted	0	0	_
39	_			<u> </u>	ths; properly used and stored	0	0	1	5	6				inspection posted Compliance Status	<u>6</u> 00	0	WT
40	, _	OUT	_	ning t	Proper Use of Utensils	0	0	1						Non-Smokers Protection Act			wi
41	_	_			sils; properly stored guipment and linens; properly stored, dried, handled		00		5					with TN Non-Smoker Protection Act ducts offered for sale	Ň	읭	0
4	3	0	Sing	e-use	/single-service articles; properly stored, used	0	0	1	5	9				roducts are sold, NSPA survey completed	ŏ		•
	44 O Gloves used property O O I																
Failure 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 manner 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 this																	
repor	4	er.	section	is (6) .	14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716	4.5	320.					K					
01/25					5/2	024	1	N+)1/2	5/2	2024		
Sigr	atu	re of	Pers	on In	Charge		[Date	Si	gnatu	ire of	Envir	onme	ental Health Specialist			Date
	**** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****																

PH-2267 (Rev. 6-15)	Free food safety training	RDA 629		
(Nev. 0-10)	Please call () 4232098110	to sign-up for a class.	hDr 025

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: The Bread Basket Establishment Number #: 605079279

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.	
Smoking observed where smoking is prohibited by the Act.	

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							
Three compartment sink	QA	200								

Equipment l'emperature							
Description	Temperature (Fahrenheit)						
C2 walk in	40						

Food Temperature Description	State of Food	Temperature (Fahrenheit)
Liquid eggs- c2 walk in	Cold Holding	40
Milk-c2 walk in	Cold Holding	40

Observed Violations

Total # 2

Repeated # ()

35: Items individually packaged for retail sale in lobby are not properly label. Label food items as required.

47: Clean dust accumulation from fans in food prep area.

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Comments/Other Observations

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

2: (IN) Employees are aware of the symptoms on the illness policy.

- 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: (IN) Observed proper handwashing by employees.

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: (IN) Food obtained from 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: No raw animal product in facility.
- 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 cooling of TCS foods in facility
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: (IN) Cold holding temperatures are held at 41F or below
- 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.

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Comments/Other Observations (cont'd)

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

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Sources			
Source Type:	Food	Source:	Bakemark
Source Type:	Water	Source:	Water is from approved source
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

Additional Comments