TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

	2	<u>.</u>	B																	
8		1	Sec.																	
Esta	blish	imen	t Nar		Mean Mu	ug Coffeehou	se North					-				Farmer's Market Food Unit Ø Permanent O Mobile	9		Ì	
Addr	955				205 Man	ufacturer's R	d Suite 109					TY	xe of t	Establi	shme	O Temporary O Seasonal				
City					Chattano	oga	Time k	02	·1	0 F	- M		4/0			ut 02:50: PM AM / PM				
,		_			10/07/2	2022									ne or					
Insp							ment # 60525227			-						L				
			spec	tion	鼠 Routine	O Follow-up	O Complaint			O Pro	olimin	ary		c	Cor	nsultation/Other			40	
Risk	Cat			-	01	3 22	03	haha		04	-		annh			up Required O Yes 🐹 No I to the Centers for Disease Control	Number of Se		49	
																control measures to prevent illness				
				-1	-		BORNE ILLNESS R									INTERVENTIONS ach liam as applicable. Deduct points for cate	and an automated			
IN	in co	mpīi				npliance NA=not app										pection R=repeat (violation of the sar				
	_,	_				Compliance Statu	8	COS	R				_	_	_	Compliance Status			R	WT
\rightarrow	-		NA	NO	Deseas in sha	Supervisio						IN	ουτ	NA	NO	Cooking and Reheating of Time/Tem Control For Safety (TCS) Foo				
		0			performs dutie	15	trates knowledge, and	0	0	5		0	0	0		Proper cooking time and temperatures		8	0	5
2			NA	NO	Management	Employee He and food employee a		0	о	_	17	0	0	0		Proper reheating procedures for hot holding Ceeling and Holding, Date Marking, a		0	0	
	×	0			Proper use of	restriction and exclusion	sion	0	0	5		IN	OUT	NA	NO	a Public Health Control				
			NA		0	Good Hygienic Pr						×	0	0		Proper cooling time and temperature		8		
5		0		0		. tasting, drinking, or t from eyes, nose, and		ő	0	5	20	No.	0	0		Proper hot holding temperatures Proper cold holding temperatures		0	0	5
	IN	001	NA			renting Centamina and properly washed	tion by Hands	0	0			*		0		Proper date marking and disposition		_	0	*
_	<u>z</u>	ō	0	ō	No bare hand	contact with ready-to	-eat foods or approved	ō	ō	5	22	-	0	×		Time as a public health control: procedures a	and records	٥	٥	
8	20	0		-		edures followed sinks properly suppli	ed and accessible		0	2	23	IN XX	OUT	NA		Consumer Advisory Consumer advisory provided for raw and un	dercooked	0	0	-
	IN P		NA	NO	Food obtained	Approved South from approved source		0	0	_	F	in in	OUT	-	NO	food Highly Susceptible Populatio		<u> </u>	-	-
10	0	0	0	20	Food received	d at proper temperatu	re	0	0		24		0	83		Pasteurized foods used; prohibited foods not		0	0	5
11 12	_	0	×	0		condition, safe, and u ords available: shell st		0	0 0	5	-	IN	OUT		NO	Chemicals	. cilitate	-	-	
	_	-	NA	-	destruction Pr	rotection from Con	tamination	Ľ		_	25	0	0	200		Food additives: approved and properly used		0	न	
13	2	0	0			ed and protected	4 10 4		0		26	嵐	0		·	Toxic substances properly identified, stored,	used	õ	ō	5
14	_	_	0	l.		surfaces: cleaned an ition of unsafe food, r				5		IN O	001	NA	-	Conformance with Approved Proc Compliance with variance, specialized proce		0		5
15	~	•			served			v	<u> </u>	-	21	•	Ŭ	~		HACCP plan		•	0	0
				Goo	d Retail Pra	ctices are preve	ntive measures to c	ontro	the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects in	to foods.			
													1CE	3						
—				00	T=not in complia	nce compliance Status	COS=com		R		inspe	ction				R-repeat (violation of the same co Compliance Status		cos	R	WT
	_	OUT			8	afe Food and Wate						0	UT			Utensils and Equipment				
21	_				d eggs used w lice from appro			8	0	1	4	5 (nfood-contact surfaces cleanable, properly d and used	esigned,	0	0	1
30)				obtained for sp	ecialized processing		ŏ	ŏ	ĩ	4	6 (-			g facilities, installed, maintained, used, test st	trips	0	0	1
31	-	0	Prop	er co			ment for temperature	0	0	2	4	7 1		lonfoo	d-cor	tact surfaces clean		0	0	1
		-	cont		erecet: each	of fac hat halfes						_	UT		f oold	Physical Facilities		~	~	
33	_				thawing metho	ed for hot holding ds used		18	0	1	4	_	-			I water available; adequate pressure stalled; proper backflow devices		8	허	2
34		-	Ther	mom	eters provided			0	0	1	5					waste water properly disposed			0	2
	-	OUT				Food identification	1			_	5	1	0 T	oilet fa	scilitie	es: properly constructed, supplied, cleaned		0	0	1
35			Food	i prop	,		ired records available	0	0	1	5		-	-		use properly disposed; facilities maintained		0	0	1
_	-	OUT				ion of Feed Contan	nination				5	-	-			lities installed, maintained, and clean		_	0	1
30	\$	٥	Insec	ots, ro	dents, and ani	mais not present		0	0	2	5	4 (0 A	dequa	ne ve	ntilation and lighting; designated areas used		0	0	1
37	<u> </u>	_				d during food preparat	tion, storage & display	0	0	1			UT			Administrative items				
38					leanliness	sed and stored		0	0	1	5					nit posted inspection posted		0	0	0
40	_				ruits and veget				6		f	. 1 .	<u>o 14</u>	-4-94 110		Compliance Status				WT
		OUT			Pr	oper Use of Utens	lla									Non-Smokers Protection Act			-	
4					nsils; properly :		d diad bandlad		8		5					with TN Non-Smoker Protection Act		8	읭	0
43	_					linens; properly store articles; properly sto				1	5	5				ducts offered for sale oducts are sold. NSPA survey completed		8		0
4					ed properly	, property and			ŏ		2							-	-1	
																Repeated violation of an identical risk factor may				
servi	ce 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 are 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																			

rt. T.C.A. sections 68-14-703, 68-14-704, 48-1-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

CMAL	10/07/2022	/	
Signature of Person In Charge	Date	Signature o	

2	LC)/()7	/2	0	22

SCORE

vironmental Health Specialist

Date

**** Additional food safety information can be found on our website, http://tn.gow/health/article/eh-foodservice ****

PH-2267 (Rev. 6-15)	Free food safety training ck	asses are available each mo	RDA 629	
(192201 (1004. 0-10)	Please call () 4232098110	to sign-up for a class.	hor acs

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Mean Mug Coffeehouse North Establishment Number # 605252276

ISPA Survey – To be completed if #57 is "No"	
ge-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are wenty-one (21) years of age or older.	
ge-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.	
iarage type doors in non-enclosed areas are not completely open.	
ents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
moke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	
moking observed where smoking is prohibited by the Act.	_

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)				
Sani bucket	QA	200					
Three comp sink	QA	200					
Dishmachine		100					

Equipment l'emperature							
Description	Temperature (Fahrenheit)						

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Sliced tomatoes-prep top	Cold Holding	36
Quiche-2 dr reach in	Cold Holding	36
Grits	Hot Holding	154
Eggs	Hot Holding	146
Sausage-cold drawers	Cold Holding	41
Milk-walk in	Cold Holding	41
Pooled eggs-walk in	Cold Holding	41
Milk-front reach in	Cold Holding	41

Observed Violations

Total # 1

Repeated # ()

47: Ventilation filters have accumulated debris. Clean on a more routine basis to prevent contamination.

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): ANSI Certified Manager present.
- 2: (IN): An employee health policy is 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: (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: (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: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Grits prepared one hour ago cooling at 75F
- 19: (IN) Hot holding temperatures are held at 135F or above
- 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: On menu
- 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.

Establishment Information

Establishment 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 Name: Mean Mug Coffeehouse North Establishment Number # 605252276

Sources						
Source Type:	Food	Source:	US Foods			
Source Type:	Food	Source:	Poss			
Source Type:	Water	Source:	Water is from approved source			
Source Type:		Source:				
Source Type:		Source:				

Additional Comments