#### TENNESSEE DEPARTMENT OF HEALTH VICE ESTABLISHMENT INSPECTION REPO

ALC: NO						FOOD SER	VICE ESTA	BL	ISH	IME	ENT	r II	NS	PEC	TIC	ON REPORT	sco			
Oaks Coffee House			Type of Establishment     O Fermer's Market Food Unit     E Permanent O Mobile																	
	iress				2916 Silve	erdale Rd.					_	Тур	ce of	Establi	shme	O Temporary O Seasonal				<i>」</i>
City					Chattanoo	a	Time is	01	0.1	0 F	PM			ы. т.		ut 01:45; PM AM / PM				
						023 Establishmer									THE OL					
		of In	spec	tion	MRoutine	O Follow-up	O Complaint			- O Pr				-	0.000	nsultation/Other				
				uon	O 1	SE2	03			04	earrar	ary					Number of S		12	8
ROSI	k Cat	legon R			ors are food p	reparation practic	es and employee		vior	8 mo				y repo	rtec	to the Centers for Disease Cont	rol and Preven			
				<b>as</b> (	contributing fa						_					control measures to prevent illne	iss or injury.			
		(11	ırk de	alga	ted compliance st											INTERVENTIONS ach itom an applicable. Deduct points for e	alogory or subcate	gory.)		
IN	⊧in c	ompli	ance			iance NA=not applicat mpliance Status	ile NO=not observ	ed COS	R		)S=co	recte	d on-	site duri	ng ins	pection R=repeat (violation of the Compliance Status			R	WT
	IN	OUT	NA	NO		Supervision						IN	001	r NA	NO	Cooking and Roheating of Time/	Temperature			
1	鼠	0		_	Person in charg performs duties	e present, demonstrate	s knowledge, and	0	0	5	16	0	0	0	×	Control For Safety (TCS) I Proper cooking time and temperatures	Foods	0	0	
,	IN XX		NA	NO		Employee Healt nd food employee awar		0			17		ŏ			Proper reheating procedures for hot hold		00	õ	5
3	Â	ō				estriction and exclusion	erress, reporting	ŏ	ŏ	5		IN	ou	r na	NO	Cooling and Holding, Date Marking a Public Health Contr				
			NA			Bood Hygienic Pract					18	-	0	_		Proper cooling time and temperature		0	0	
4	XX	0		0	No discharge fro	asting, drinking, or toba om eyes, nose, and mo	uth	0	0	5		25	0	0		Proper hot holding temperatures Proper cold holding temperatures		0	00	5
6	IN X	001	NA			nting Contamination d properly washed	by Hands	0	0	_		*				Proper date marking and disposition			0	Ť
7	X	0	0	0		ontact with ready-to-eat	foods or approved	0	0	5	22	-	0	r NA	-	Time as a public health control: procedu Consumer Advisory	res and records	0	0	
	X		NA		Handwashing si	inks properly supplied a Approved Source		0	0	2	23	0	0	_		Consumer advisory provided for raw and food	d undercooked	0	0	4
9	黨	0			Food obtained fr	rom approved source	•		0			IN	OUT	NA	NO	Highly Susceptible Popula	rtions			
	0		0	2		at proper temperature indition, safe, and unad	ulterated	8	8	5	24	0	0	X		Pasteurized foods used; prohibited foods	s not offered	0	0	5
12	0	0	×	0	Required record destruction	is available: shell stock	tags, parasite	0	0			IN	out	r na	NO	Chemicais			_	
43	IN S	OUT O	NA	NO		tection from Contan	sination				25	0	8			Food additives: approved and properly u Toxic substances properly identified, sto		0	읽	5
	X	ŏ			Food-contact su	urfaces: cleaned and sa		ŏ	ŏ	5	20	IN	001	-	NO	Conformance with Approved P	rocedures		_	
15	篾	0			Proper disposition served	on of unsafe food, retur	ned food not re-	0	0	2	27	0	0	×		Compliance with variance, specialized p HACCP plan	rocess, and	0	٥	5
				Go	d Retail Prac	tices are preventiv	e measures to co	ontro	l the	intr	oduc	tion	of	patho	gens	, chemicals, and physical object	a into foods.			
								GOO					_							
				01	Tenot in complianc	e mpliance Status	COS=corre	icted o		during						R-repeat (violation of the sam Compliance Status	ne code provision)	cos	R	WT
	_	OUT			Saf	e Food and Water			<u> </u>			0	TUK	_		Utensils and Equipment			~	
2	8 9	0	Wate	er an	ed eggs used who d ice from approv	ed source		0	00	2	4	5				nfood-contact surfaces cleanable, proper and used	1y designed,	0	٥	1
3	0	O OUT		ince		ialized processing met Temperature Contro		0	0	1	4	6 (	0	Warewa	ashin	g facilities, installed, maintained, used, te	st strips	0	٥	1
3	11	0	Prop			ed; adequate equipmer		0	0	2	4	_	1 О Т	Nonfoo	d-cor	tact surfaces clean		0	0	1
_	2		Plan	t food	d properly cooked				0	1	4	8 (	0			Physical Facilities water available; adequate pressure		0		2
	3 4		<u> </u>		thawing methods eters provided an			8	0	1	4	_	_			stalled; proper backflow devices waste water properly disposed		00	8	2
		OUT				od identification		Ľ		<u> </u>	5		-			s: properly constructed, supplied, cleane	d	ŏ	ŏ	1
3	5	0	Food	i proj	perly labeled; orig	inal container; required	records available	0	0	1	5	2	0	Garbag	e/refi	use properly disposed; facilities maintaine	d	0	0	1
			Inco			n of Feed Contamin	ation				5	-	-			lities installed, maintained, and clean		0	0	1
_	6	-			odents, and anim	,		0	0	2	P	+	-	Adequa	ne ve	ntilation and lighting; designated areas us	sed	0	0	1
	7	0				during food preparation,	storage & display	0	0	1		-	UT			Administrative Items		_		
-	8 9	-	-		cleanliness oths; properly use	ed and stored		0	0	1	5	_	_		-	nit posted inspection posted		0	0	0
4	0		Was		fruits and vegetat	bles		0	0				_			Compliance Status		YES	NO	WT
4	1			e ute	nsils; properly st	per Use of Utensils ored		0	0	1	5	7	-	Complia	ance	Non-Smokers Protection / with TN Non-Smoker Protection Act	AGT	X	0	_
<ul> <li>42 O Utensils, equipment and linens; properly stored, dried,</li> <li>43 O Single-use/single-service articles; properly stored, user</li> </ul>				0	0	1	5	8				ducts offered for sale oducts are sold, NSPA survey completed		0	0	0				
	4				ersingle-service a sed properly	nucles, property stored,			8		<u></u>	-		0080	oo pr	ousces are sold, rear A survey completed		0	-	
																Repeated violation of an identical risk factor				
man	ervice 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 namer 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																			
repo	n. T.	t. T.C.A. sections 68-14-703, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.																		
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Cil	
Signature of Person In Charge	

04/24/2023	
Date	Signature of Environmental Health Specialist

2023

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 clas	RDA 629		
(Net: 0-15)	Please call (	) 4232098110	to sign-up for a class.	

#### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



#### Establishment Information

Establishment Name: Oaks Coffee House Establishment Number #: [605262064

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 wenty-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.	
Sarage 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)				
Sani bucket	Qa	200					
Triple sink	Qa	200					
Dish machine			162				

Equipment l'emperature							
Description	Temperature (Fahrenheit)						

Food Temperature				
Decoription	State of Food	Temperature (Fahrenheit		
Milk RI	Cold Holding	39		
Eggs RI	Cold Holding	40		
Sausage RI	Cold Holding	38		
Milk LB	Cold Holding	38		
Milk LB2	Cold Holding	39		

#### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



#### Establishment Information

Establishment Name: Oaks Coffee House

Establishment Number : 605262064

#### Comments/Other Observations

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

- 2: Illness policy present.
- 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 hand washing properly.

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: Food is from an 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 TCS foods cooking during the inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: No TCS foods cooling during the inspection.
- 19: (NO) TCS food is not being held hot during inspection.
- 20: Please see 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.

## Establishment Information

Establishment Name: Oaks Coffee House

Establishment Number : 605262064

Comments/Other Observations (cont'd)

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

#### Establishment Information

Establishment Name: Oaks Coffee House

Establishment Number # 605262064

Food	Source:	Performance
Food	Source:	Publix
	Source:	
	Source:	
	Source:	
		Food Source: Source: Source:

### Additional Comments