TENNESSEE DEPARTMENT OF HEALTH

CALCON DE LA CALCON						FOOD SER	VICE ESTA	BL	ISH	ME	INT	r IN	IS	PEC	TI	ON REPORT	sco			
Esta	ablist	imen	t Nan		CREMA							Tur	lo of	Establi	ie home	Farmer's Market Food Unit @ Permanent O Mobile	10			
Add	ress				226 Duke St Type of Establishment O Temporary O Seasonal									/						
City					Nashville		Time in	01	L:4	0 F	M	AJ	M/P	M Th	me o	ut 02:15: PM AM / PM				
		n Da	te		04/11/20	24 Establishment		_				_								
			spect		Routine	O Follow-up	O Complaint	-		- O Pre			-		0 Co	nsuitation/Other				_
		egon			281	02	03			04		,				up Required O Yes 🕱 No	Number of S	aats	0	
1.00			isk F	acto	ors are food p	reparation practice	s and employee		vior	s mo				y repo	orte	to the Centers for Disease Conti	rol and Prevent		-	
				as c	ontributing fa											control measures to prevent illne	iss or injury.			
		(iin	rk der	ignet	ed compliance st											ach item as applicable. Deduct points for o	alegory or subcate	gory.)		
IN	⊨in c	ompīi	108			iance NA=not applicable mpliance Status	NO=not observe		R		S=co	recte	d on-t	site duri	ing int	spection R=repeat (violation of the Compliance Status		n) COS	R	WT
	IN	OUT	NA	NO		Supervision					F	IN	ουτ	NA	NO	Cooking and Reheating of Time/				
1	鬣	0			Person in charge performs duties	e present, demonstrates	knowledge, and	0	0	5	16	0		×		Control For Safety (TCS) I Proper cooking time and temperatures	Foods	0	0	_
			NA	NO		Employee Health	ere mention	0			17					Proper reheating procedures for hot hold		00	ŏ	5
	区区	8				d food employee awarer striction and exclusion	less; reporting	0	0	5		IN	ουτ	r na	NO	Cooling and Holding, Date Marking a Public Health Contro				
	IN	_	NA			lood Hygienic Practic						0	0	1.0		Proper cooling time and temperature		0	0	
4	区区	8				isting, drinking, or tobaco m eyes, nose, and mou		0	8	5		20		80	0	Proper hot holding temperatures Proper cold holding temperatures		8	8	
	IN 高	OUT O	NA	NO	Prever	ting Contamination		0	0		21	0	0	0		Proper date marking and disposition		0	0	°
7	2	ŏ	0	ō	No bare hand co	intact with ready-to-eat f	oods or approved	ō	ŏ	5	22	-	0	r NA		Time as a public health control: procedur	res and records	0	0	_
8	25	0			alternate proced Handwashing sir	nks properly supplied an	d accessible	0	0	2	23	N O	001	_	NO	Consumer advisory provided for raw and	undercooked	0	0	4
	IN 高		NA		Food obtained fr	Approved Source om approved source		0	o		-	IN	OUT		NO	food Highly Susceptible Popula	rtions	-	-	
	<u>。</u> ※	8	0	*		t proper temperature ndition, safe, and unadu	terated	0	8	5	24	0	0	88		Pasteurized foods used; prohibited foods	s not offered	0	0	5
	0	ō	×	0		s available: shell stock t		o	ō			IN	ουτ	NA	NO	Chemicais			_	
	IN	OUT	NA	NO	Prot	ection from Contami	nation				25	0	0	X		Food additives: approved and properly u		8	<u> </u>	5
	×	8	<u></u>		Food separated Food-contact su	faces: cleaned and san	tized	8	8	5	26	N N	001		NO	Toxic substances properly identified, sto Conformance with Approved P		0	0	_
15	×	0			Proper disposition served	on of unsafe food, return	ed food not re-	0	0	2	27	0	0	×		Compliance with variance, specialized pr HACCP plan	rocess, and	0	0	5
	_	_		-							_								_	_
				Goo	d Retail Pract	ices are preventive									gen	s, chemicals, and physical objects	s into foods.			
				00	P=not in compliance		COS=corre	cled o	n-site	a () during			ICE	3		R-repeat (violation of the sam			_	
		OUT				npliance Status e Food and Water		COS	R	WT		0	UT			Compliance Status Utensils and Equipment		COS	R	WT
2	8 9	8	Paste Wate	eurize r and	d eggs used whe ice from approve	ere required		8	8	1	4	5 (infood-contact surfaces cleanable, proper and used	1y designed,	0	0	1
_	0				btained for speci	alized processing metho emperature Control	ds	ŏ	8	ĩ	4	6 0	. 1			g facilities, installed, maintained, used, te	st strips	0	0	1
3	1		Prop	er coo		ed; adequate equipment	for temperature	0	0	2	4	7 0	0	Nonfoo	d-cor	ntact surfaces clean		0	0	1
	2	-	contr Plant		properly cooked	for hot holding		0			4	_	UT D	Hot and	t cold	Physical Facilities i water available; adequate pressure		0	0	2
3	3	0	Appr	oved	thawing methods	used		0	0	1	4	9 (ŌF	Plumbir	ng int	stalled; proper backflow devices		0	0	2
3	4	OUT	Then	nome	eters provided an	d accurate od identification		0	0	1	5		-			i waste water properly disposed es: properly constructed, supplied, cleane	d	0	0	2
3	5	0	Food	prop	erly labeled; origi	nal container; required r	ecords available	0	0	1	5			Garbag	e/ref	use properly disposed; facilities maintaine	d	0	0	1
		OUT				of Food Contaminat	ion						-			ilities installed, maintained, and clean		0	0	1
	6	-			dents, and anima			0	0	2	5	+	-	Adequa	ve ve	entilation and lighting; designated areas us	sed	0	0	1
3	_					uring food preparation, s	torage & display	0	0	1		_	UT			Administrative Items			-	
	8 9	-			leanliness ths; properly use	d and stored		0	0	1		_			-	nit posted inspection posted		0	0	0
_	0			<u> </u>	ruits and vegetab			0			F	-	_			Compliance Status Non-Smokers Protection		YES		WT
4	1	0			nsils; properly sto	red	4 6		2	1	5					with TN Non-Smoker Protection Act	- Mit	ह्य	0	_
	2 3	0	Uten: Singl	sils, e e-use	quipment and lin /single-service a	ens; properly stored, drie rticles; properly stored, u	id, handled ised	0	0	1	5	8				iducts offered for sale roducts are sold, NSPA survey completed		0	0	0

spection 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 14-705, 5-17-76, 6-14-71, 68-14-715, 68-14-715, 68-14-716, 4-5-320. 04/11/2024 04/11/2024 Date Signature of Environmental Health Specialist

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O Gloves used properly

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•••• ,	Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****	
	For a final and the balance of the second second second second second should be addressed	

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PH-2267 (Rev. 6-15)	Free food safety training clas	RDA 629		
(Nev. 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

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Establishment Name: CREMA Establishment Number #: 605261076

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)				
3 compartment sink	Steramine	200					

Equipment Temperature	
Description	Temperature (Fahrenheit)
Hoshizaki Reach in cooler Coffee syrups	41
Reach in cooler 2 Milks	40

escription	State of Food	Temperature (Fahrenheit



Establishment Name: CREMA

Establishment Number : 605261076

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Employee knowledgeable of foodborne illness symptoms with none reported sick.
- 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: Not observed.

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 shelled eggs.

- 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.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: See temp.
- 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection.
- 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: CREMA

Establishment Number: 605261076

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: CREMA

Establishment Number #: 605261076

Sources				
Source Type:	Water	Source:	Municipal	
Source Type:	Food	Source:	Dozen bakeries	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

Additional Comments