

Address

City

## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Be Caffeinated Permanent O Mobile Establishment Name Type of Establishment 14 W. Kent Street O Temporary O Seasonal Chattanooga Time in 03:00 PM AM / PM Time out 03:20: PM AM / PM

02/09/2024 Establishment # 605302439 Embargoed 0 Inspection Date

Purpose of Inspection **K**Routine O Follow-up O Complaint O Preliminary O Consultation/Other

Number of Seats 36 Risk Category О3 Follow-up Required 级 Yes O No

### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	IN-in compliance OUT-not in compliance NA-not applicable NO-not observe							0
	Compliance Status					cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	糕	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	$\mathbb{R}^{\mathbb{C}}$	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	5
ī	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	滋	0		0	Hands clean and properly washed		0	
7	氮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction		0	
	IN	OUT	NA	NO	Protection from Contamination			
13	0	0	1		Food separated and protected		0	4
14	0	X	0		Food-contact surfaces: cleaned and sanitized		0	5
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

		cos	R	WT				
	IN OUT NA NO Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods							
16		0	黨	0	Proper cooking time and temperatures	0	0	5
17	0	Ö	3%	0	Proper reheating procedures for hot holding	0	0	۰
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	X	0	Proper cooling time and temperature	0	0	
19	0	0	文	0	Proper hot holding temperatures	0	0	
20	凝	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	*
22	0	0	×	0	Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory			
23	0	0	×		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	80	0			Toxic substances properly identified, stored, used	0	0	9
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

#### s to control the introduction of pathogens, chemicals, and physical objects into foods.

		OUT=not in compliance COS=con	ected or	3-6(50	άu
		Compliance Status	COS		_
	OUT	Safe Food and Water			_
28	0	Pasteurized eggs used where required	0	0	г
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	-
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	1
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	
34	0	Thermometers provided and accurate	0	0	г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	1
37	0	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	г
39	0	Wiping cloths; properly used and stored	0	0	г
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils		_	
41	0	In-use utensils; properly stored	0	0	г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	
44	10	Gloves used properly	- 0	0	

pecti		R-repeat (violation of the same code provision Compliance Status	COS	R	W
	OUT	Utensils and Equipment	1		
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	
47	0	Nonfood-contact surfaces clean	0	0	-
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	
49	0	Plumbing installed; proper backflow devices	0	0	- 7
50	0	Sewage and waste water properly disposed	0	0	- 2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	_
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	٠
53	0	Physical facilities installed, maintained, and clean	0	0	-
54	0	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items	Т		
55	0	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	٧
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 100	0	
58		Tobacco products offered for sale	0	0	١ ١
59		If tobacco products are sold, NSPA survey completed	0	0	

ten (10) days of the date of th

02/09/2024

EED 7:

Signature of Person In Charge

Date Signature of Environmental Health Specialist

02/09/2024

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

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629 ) 4232098110 Please call ( to sign-up for a class.

Date

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



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H-Cf3	hire	hmont.	100	ormation

Establishment Name: Be Caffeinated
Establishment Number #: 605302439

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 comp sink	chlorine	0						

Equipment Temperature							
Description	Temperature ( Fahrenheit)						
Walk in	41						

Food Temperature		
Description	State of Food	Temperature ( Fahrenheit)
Walk in-milk	Cold Holding	41
Milk-2 dr reach in	Cold Holding	41
Cheesecake-2 dr in store	Cold Holding	41
Chream cheese-2 dr merch	Cold Holding	41

Observed Violations
Total # 1
Repeated # ()
14: Upon arrival the three compartment sink and sani bucket are testing at 0ppm.
This was corrected during inspection. Maintain sanitizer at 100ppm chlorine.

<sup>\*\*\*</sup>See page at the end of this document for any violations that could not be displayed in this space.

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



### Establishment Information

Establishment Name: Be Caffeinated Establishment Number: 605302439

### 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
- 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 food observed today.
- 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:

### Additional Comments

See last page for additional comments.

<sup>\*\*\*</sup>See page at the end of this document for any violations that could not be displayed in this space.

<sup>\*\*\*</sup>See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Be Caffeinated	
Establishment Number: 605302439	
Comments/Other Observations (cont'd)	
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Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information

Establishment Infor	Calabra de Araba		
stablishment Name: Be stablishment Number #;	e Caffeinated		
stabilishment (vumber #.	605302439		
ources			
ource Type:	Food	Source:	Bordon, rembrandts
ource Type:	Water	Source:	Water is from approved source
ource Type:		Source:	
ource Type:		Source:	
ource Type:		Source:	
Additional Comme	nts		
ife vac unit delivere	ed today.		