TENNESSEE DEPARTMENT OF HEALTH PVICE ESTABLISHMENT INSPECTION REPORT DOE

AND A DECEMBER OF					FOOD SERV	ICE ESTA	BL	ISH	IME	IN	T II	NS	PEC	TI	ON REPORT	SCO	RE		_	
V		11	A. S.		Scooter's Cof	foo										O Fermer's Market Food Unit	10)	ſ	١
Establishment Name						_	Ty	pe of	Establ	ishme	ent Permanent O Mobile		J \		J					
Address 1526 N Mt Juliet Rd											O Temporary O Seasonal									
City					2:1	<u>4 F</u>	M	_ A	M/P	M Ti	me o	ut 02:46:PM AM/PM								
Insp	etio	n Da	te		07/31/2023	Establishment #	60531677	0		_	Emba	argoe	ed C)						
Purp	ose	of In	spect		0-0	O Follow-up	O Complaint			O Pro	Mimir	hary	_	c	Cor	nsuitation/Other				
Risk	Cat	egon	,		2001	02	O 3			O 4				Fo	ollow-	up Required O Yes 💢 No	Number of Si	eats		
		R														to the Centers for Disease Cont control measures to prevent illne		tion		
					one marcing factor								_			INTERVENTIONS	nee or mjury.			
		(14	rk de	algna		(IN, OUT, NA, NO) for ea	ch numbered iten	n. For		mark	ed 00	л, н	ark C	OS or I	t for e	ach item as applicable. Deduct points for e				
IN	in co	ompili	ance		OUT=not in compliance Compli	NA=not applicable ance Status	NO=not observe		R		S=co	rrecte	id on-t	site dur	ing ins	spection R=repeat (violation of the Compliance Status			R	WT
	IN	ουτ	NA	NO		Supervision			· · ·			IN	ουτ	NA	NO	Cooking and Reheating of Time/	Temperature		_	
1	8	0			Person in charge pres performs duties	sent, demonstrates kn	owledge, and	0	0	5	16	0	0	×	0	Control For Safety (TCS) I Proper cooking time and temperatures	foods	0	0	-
2			NA	NO	E	Employee Health d employee awarenes	s: reporting	0	o		17				ò	Proper reheating procedures for hot hold		8	Ö	5
		ō			Proper use of restricti		is, reporting	ŏ	ŏ	5		IN	ουτ	NA	NO	Cooling and Holding, Date Marking a Public Health Contr				
	_		NA			Hygionic Practicos			_			0	-	1 1 1		Proper cooling time and temperature		0	0	
		00			Proper eating, tasting No discharge from ey		use	0	8	5		8		8	0	Proper hot holding temperatures Proper cold holding temperatures		0	응	
	IN	OUT	NA	NO	Preventing	Contamination by	Hands					X			0	Proper date marking and disposition		ŏ	ŏ	•
_		0	0	0	Hands clean and prop No bare hand contact	peny washed t with ready-to-eat foor	ds or approved	0	0	5	22	-	0	100		Time as a public health control: procedu	res and records	0	0	
8			-	-	alternate procedures Handwashing sinks p	followed roperly supplied and a	ccessible	-	0	2		_	_	NA ST	NO	Consumer Advisory Consumer advisory provided for raw and		_		
	IN	OUT O	NA	NO		pproved Source		0			23	O IN	0		NO	food Highly Susceptible Popula		0	0	4
10	0	0	0	20	Food received at prop	per temperature		0	াত		24	_	0	-	- NO	Pasteurized foods used; prohibited foods		0	0	5
11 12	_	0	*	0		n, safe, and unadulter illable: shell stock tags		0	0	5	F	IN	007	-	NO	Chemicals	THOL GHELEY	-	-	Ÿ
			NA	-	destruction Protection	on from Contamina	tion	-		_	25	0		25		Food additives: approved and properly u	sed	0	তা	
13	2	0	0		Food separated and p	protected			0	_	26	嵐	0		·	Toxic substances properly identified, sto	red, used	õ	õ	5
14	-	0	0			s: cleaned and sanitiz unsafe food, returned		0	0	5		IN	001	_	NO	Conformance with Approved P Compliance with variance, specialized p		_		_
15	2	0			served			0	0	2	27	0	0	8		HACCP plan		0	0	5
				Goo	d Retail Practices	are preventive m	easures to co	ntro	l the	intro	oduc	tion	of	patho	gens	, chemicals, and physical object	s into foods.			
								GOO	D R	ar/Al	L PR	LACT	TICE	8						
	_			00	T=not in compliance Complia	ance Status	COS=corre	cted o	R R	during WT	inspe	iction				R-repeat (violation of the sam Compliance Status		COS	R	WT
	_	OUT			Safe Fe	od and Water			<u> </u>			0	TUC			Utensils and Equipment				
20					ed eggs used where re lice from approved so				8	2	4	5				infood-contact surfaces cleanable, proper and used	ly designed,	0	0	1
30		0 OUT	Varia	ince (btained for specialized	d processing methods perature Control		0	0	1	4	6	0	Narew	ashin	g facilities, installed, maintained, used, te	st strips	0	0	1
31		0	Prop	er co	oling methods used; a		r temperature	0	0	2	4	7	0	Vonfoo	d-cor	ntact surfaces clean		0	0	1
3:		-	contr		properly cooked for he	ot bolding		-	0			_	TUC O	iot and	1 cold	Physical Facilities I water available; adequate pressure		0	0	2
33	-	0	Appr	oved	thawing methods used	d		0	0	1	4	9	ŌF	Plumbi	ng ins	stalled; proper backflow devices		0	0	2
34		O OUT	Then	mom	eters provided and acc	ourate fentification		0	0	1			-			waste water properly disposed es: properly constructed, supplied, cleane	4	0	0	2
35	_		Food	prop	erly labeled; original o		ords available	0	0	1	-	_				use properly disposed; facilities maintaine		ŏ	0	1
		OUT				Food Contamination		-		-			-		·	ilities installed, maintained, and clean		0	0	1
36	;	0	Insec	ts, ro	dents, and animals no	ot present		0	0	2	5	4	o /	Adequa	ste ve	entilation and lighting; designated areas us	sed	0	0	1
37	·	0	Cont	amina	ation prevented during	food preparation, stor	age & display	0	0	1		0	τυς			Administrative items			_	
38	:	0	Pers	onal o	leanliness			0	0	1			0	Ourrent	t pern	nit posted		0	0	0
39	_				ths; properly used and ruits and vegetables	d stored		00			5	6	0	Most re	cent	Compliance Status		O YES		WT
		OUT			Proper U	se of Utensils										Non-Smokers Protection				
41	_				nsils; properly stored equipment and linens;	properly stored, dried	handled	0	8	1	5	7				with TN Non-Smoker Protection Act ducts offered for sale		8	0	0
4		0	Singl	e-use	a/single-service articles ed properly			0	8	1	5	9				oducts are sold, NSPA survey completed		õ	0	
						a within two data areas	ar rapidt in average			_	a deside		ability	mand -	e e e e e e e e e e e e e e e e e e e	Repeated violation of an identical risk factor	may pands in some	-	1	
servi		tablis	hmen	t perm	nit. Items identified as co	onstituting imminent hea	Ith hazards shall b	e corre	cted is	mmedi	ately	or op	eratio	ns shal	l ceas	e. You are required to post the food service a	establishment permit	in a c	onspi	icuous
repor		CA.			recent inspection report 14-703, 68-14-706, 68-14-7						ang i	1	1	A		fling a written request with the Commissioner	mount can (10) days	OF UN	U.S.O	ज वर्षाड
	\sim	0	Ċ	2	SPE		07/3	31/2	023	3			Ķ	H.	Ħ	7 /	0)7/3	1/2	023
Sign	atur	e of	Pers	on In	Charge				[Date	Si	Init	ure of	Invir	onme	ental Health Specialist				Date

****	Additional food safety	information can be found on our website	http://tn.gov/health/article/eh-foodservice ****
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PH-2267 (Rev. 6-15)	Free food safety training c	RDA 629		
(19220) (1001. 0-10)	Please call () 6154445325	to sign-up for a class.	104 025

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Scooter's Coffee Establishment Number #: [605316770

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 comp sink	QA	300									

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Atosa ric	38				
Atosa rif	-2				
Atosa ric	39				
Atosa Rif	0				

Food Temperature							
Description	State of Food	Temperature (Fahrenheit)					
Milk	Cold Holding	40					
Ice cream base	Cold Holding	41					
Half and half	Cold Holding	39					
Breakfast burrito	Cold Holding	38					
Sausage egg biscuit	Cold Holding	41					

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Scooter's Coffee

Establishment Number: 605316770

Comments/Other Observations

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

- 2: Discussed policy with pic
- 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: Employee washed hands after taking orders

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 info

- 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: Coffee shop only heats up for immediate service prepackaged food items
- 17: (NA) No TCS foods reheated for hot holding.
- 18: Establishment does not cool any food
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: See food temps
- 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: Scooter's Coffee

Establishment Number: 605316770

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Scoter's Coffee Establishment Number #: 605316770

Sources				
Source Type:	Food	Source:	Harvest	
Source Type:	Water	Source:	City	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

Additional Comments