

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE SCORE

100

Be Caffeinated

| Stablishment Name | Type of Establishment | Type of Establis

Risk Category O1 製2 O3 O4 Follow-up Required O Yes 製 No Number of Seats 36

isk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Preventio as contributing factors in foodborne illness outbreaks. Public Health Interventions are control measures to prevent illness or injury.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Ī	IN-ir	n co	mplii	ance		OUT=not in compliance NA=not applicable	NO=not observe	ed	cc	05	corrected on-	site dur	ing ins	pection	R*repeat (violation of the same code provi-	sion)			Ξ
ľ						Compliance Status		COS	R WT] [Comp	oliance Status	COS	R	WT	Γ
I	10	N (оит	NA	NO	Supervision				П	IN OUT	NA.	NO		nd Reheating of Time/Temperature				
r		-0.	_			Parenn in charge property demonstrates in	moudadae and			11				Con	rtrol For Safety (TCS) Foods				

					Compliance Status	COS	R	WT
	IN	OUT	NA	NO	Supervision			
1	盔	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	$\exists x$	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	0
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed	0	0	
7	拟	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	X				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	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	×	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	SER	0			Proper disposition of unsafe food, returned food not re-	0	0	2

					Compliance status	000	P.	** 1
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	20	Proper cooking time and temperatures	0	0	5
17	0	0	0	200	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	0	×	Proper cooling time and temperature	0	0	
19	0	0	0	文	Proper hot holding temperatures	0	0	
20	25	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	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0		X		Food additives: approved and properly used	0	0	
26	×	0			Toxic substances properly identified, stored, used	0	0	,
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES												
OUT=not in compliance COS=corrected on-site during								m	R-repeat (violation of the same code provision)			
Compliance Status COS R WT							Compliance Status			COS	R	WT
OUT Safe Food and Water								OUT	Utensils and Equipment			
28	_	Pasteurized eggs used where required		0	1		45	0	Food and nonfood-contact surfaces cleanable, properly designed,	0	0	1
29		Water and ice from approved source	0				-10		constructed, and used	Ľ	_	_
30		Variance obtained for specialized processing methods	0 0 1		46	0	Warewashing facilities, installed, maintained, used, test strips	0	l٥l	1		
	OUT		_	_	_	ч.		-		-	_	-
31		Proper cooling methods used; adequate equipment for temperature	0	lo	2	Ш	47		Nonfood-contact surfaces clean	0	0	1
	_	control	-	-	_	Ш		OUT	Physical Facilities			
32	0	Plant food properly cooked for hot holding	0	0	1]	48	0	Hot and cold water available; adequate pressure		0	2
33	0	Approved thawing methods used	0	0	1]	49	0	Plumbing installed; proper backflow devices	0	0	2
34	0	Thermometers provided and accurate	0	0	1	1	50	0	Sewage and waste water properly disposed	0	0	2
	OUT	Food Identification					51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
35	0	Food properly labeled; original container; required records available	0	0	1	1	52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
	OUT	Prevention of Feed Contamination				1	53	0	Physical facilities installed, maintained, and clean	0	0	1
36	0	Insects, rodents, and animals not present	0	0	2		54	0	Adequate ventilation and lighting; designated areas used	0	0	1
37	0	Contamination prevented during food preparation, storage & display	0	0	1	1		OUT	Administrative Items			
38	0	Personal cleanliness	0	0	1	1.	55	0	Current permit posted	0	ा	_
39	0	Wiping cloths; properly used and stored	0	0	1	1	56	0	Most recent inspection posted	0	0	۰
40	0	Washing fruits and vegetables	0	О	1	٦.	\Box		Compliance Status	YES	NO	WT
	OUT	Proper Use of Utensils				1			Non-Smokers Protection Act			
41	0	In-use utensils; properly stored	0	0	1	1	57		Compliance with TN Non-Smoker Protection Act	X	0	\Box
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1	_	58		Tobacco products offered for sale	0	0	0
43		Single-use/single-service articles; properly stored, used	0		1		59		If tobacco products are sold, NSPA survey completed	0	0	
44	0	Gloves used properly	0	0	1							

Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service 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 manner and permit may recent inspection report in a conspicuous manner. You have the request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this service.

Date Signature of Environmental Health Specialist

10/04/2021

10/04/2021

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

PH-2267 (Rev. 6-15)

Free food safety training classes are available each month at the county health department.

Please call () 4232098110 to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information						
Establishment Name:	Be Caffeinated					
Establishment Number	• 1605302430					

ı	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.	
ı	Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	
ı	"No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	
I	Garage type doors in non-enclosed areas are not completely open.	
I	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.	
I	Smoking observed where smoking is prohibited by the Act.	

Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						
Triple sink	Chlorine	100							

Equipment Temperature								
Description	Temperature (Fahrenheit)							

Food Temperature						
Description	State of Food	Temperature (Fahrenheit)				
Dairy	Cold Holding	38				
Dairy in walk in cooler	Cold Holding	38				

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): 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: Proper handwashing 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: 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: (N.O.) No cooling of TCS foods during inspection.
- 19: (NO) TCS food is not being held hot during inspection.
- 20: Proper cold holding temperatures observed.
- 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.

^{***}See page at the end of this document for any violations that could not be displayed in this space.

^{***}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)	
Additional Comments (cont'd)	
See last page for additional comments.	
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Establishment Information

Establishment Inform	nation		
	e Caffeinated		
Establishment Number #	605302439		
Sources			
Source Type:	Food	Source:	Walmart, Vibrant Meals
Source Type:	Water	Source:	Public
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	
Additional Comme	nts		