

Cafe Taz  
72 Fisher Street  
Millville, Ma 01529

<u>Inspection Number</u>	EEC85	<u>Date</u>	8/29/23	<u>Time In/Out</u>	9:57 AM 10:36 AM	<u>Inspection Type</u>	Pre-Opening	<u>Client Type</u>	Mobile	<u>Inspector</u>	K.Donahue
<u>Permit Number</u>	70-2023	<u>Risk</u>		<u>Variance</u>		<u>Rating</u>	Excellent	<u>Score</u>	99	<u>Priority</u>	0
								<u>Pf</u>	0	<u>Core</u>	1

### Foodborne Illness Risk Factors and Public Health Interventions

IN = in compliance OUT= out of compliance N/O = not observed N/A = not applicable COS = corrected on-site during inspection Repeat Violations Highlighted in Yellow

Supervision	IN	OUT	NA	NO	COS	Protection from Contamination (Cont'd)	IN	OUT	NA	NO	COS
1. PIC present, demonstrates knowledge, and performs duties	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Food separated and protected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Certified Food Protection Manager	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. <span style="color: red;">Food-contact surfaces; cleaned &amp; sanitized</span>	<span style="color: red;">1</span> <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health						Time/Temperature Control for Safety					
3. Management, food employee and conditional employee knowledge, responsibilities and reporting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17. Proper disposition of returned, previously served,	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Proper use of restriction and exclusion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Proper cooking time & temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Procedures for responding to vomiting and diarrheal events	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Proper reheating procedures for hot holding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices						Consumer Advisory					
6. Proper eating, tasting, drinking, or tobacco use	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20. Proper cooling time and temperature	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. No discharge from eyes, nose, and mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21. Proper hot holding temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands						Highly Susceptible Populations					
8. Hands clean & properly washed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. Proper cold holding temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. No bare hand contact with RTE food or a pre-approved	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23. Proper date marking and disposition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Adequate handwashing sinks supplied and accessible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24. Time as a Public Health Control; procedures & records	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source						Conformance with Approved Procedures					
11. Food obtained from approved source	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25. Consumer advisory provided for raw/undercooked food	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Food received at proper temperature	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	26. Pasteurized foods used; prohibited foods not offered	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Food in good condition, safe & unadulterated	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27. Food additives: approved & properly used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Required records available: shellstock tags, parasite	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28. Toxic substances properly identified, stored & used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<span style="background-color: yellow;">Repeat Violations Highlighted in Yellow</span>						29. Compliance with variance/specialized process/HACCP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Good Retail Practices

Safe Food and Water	IN	OUT	NA	NO	COS	Proper Use of Utensils	IN	OUT	NA	NO	COS
30. Pasteurized eggs used where required	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Water & ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	44. Utensils, equip. & linens: property stored, dried & handled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	45. Single-use/single-service articles: properly stored & used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control						Utensils, Equipment and Vending					
33. Proper cooling methods used; adequate equip. for temp.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	47. All contact surfaces cleanable, properly designed,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	48. Warewashing facilities: installed, maintained & used; test	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Thermometers provided & accurate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	49. Non-food contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification						Physical Facilities					
37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	50. Hot & cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination						Physical Facilities					
38. Insects, rodents & animals not present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Contamination prevented in prep, storage & display	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	52. Sewage & waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	53. Toilet facilities: properly constructed, supplied, & cleaned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used & stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	54. Garbage & refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Washing fruits & vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	55. Physical facilities installed, maintained & clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						56. Adequate ventilation & lighting; designated areas use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						60. 105 CMR 590 violations / local regulations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Official Order for Correction: Based on an inspection today, the items marked "OUT" indicated violations of 105 CMR 590.000 and applicable sections of the 2013 FDA Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If you are subject to a notice of suspension, revocation, or non-renewal



K. Donahue



Natasha Deschenes  
- Expires

Follow Up Required:  Y      Follow Up Date: \_\_\_\_\_

# FOOD SAFETY INSPECTION REPORT

Page Number

2

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EEC85

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9:57 AM  
10:36 AM

Inspector  
K.Donahue

## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

- -

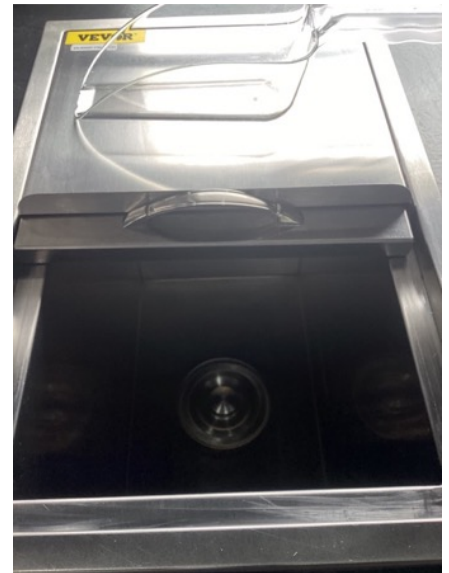
Code:

## Protection From Contamination

### Food-contact surfaces, cleaned & sanitized

#### 16 4-602.11 (E)(1-3) Food-Contact Surfaces and Utensils - -

- C** Please clean inside of ice storage bin before use Code: *Surfaces of utensils and equipment contacting food that is not TCS food shall be cleaned: at any time when contamination may have occurred; at least every 24 hours for iced tea dispensers and consumer self-service utensils such as tongs, scoops, or ladles; and, before restocking consumer self-service equipment and utensils such as condiment dispensers and display containers.*



## Notes

# FOOD SAFETY INSPECTION REPORT

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## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

### Notes

88

Notes - -

N Allergen signage - General Notes.



88

Notes - -

N - General Notes.



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## Inspection Report (Continued)

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**88**      **Notes - -**

**N**      Spec plates for trailer - General Notes.



**88**      **Notes - -**

**N**      Water tank - General Notes.



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## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

### 88 Notes - -

N Potable water for coffee - General Notes.



### 88 Notes - -

N Cappuccino machine - General Notes.



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## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

### 88 Notes - -

N Equipment - General Notes.



### 88 Notes - -

N Equipment - General Notes.





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## Inspection Report (Continued)

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### 88 Notes - -

N Inverter - General Notes.



### 88 Notes - -

N Equipment - General Notes.



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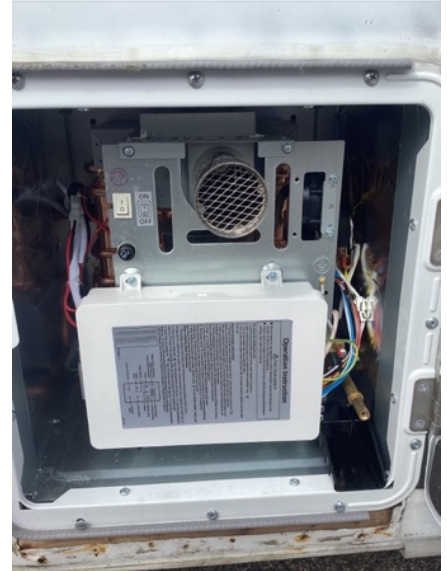
Inspector  
K.Donahue

## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

**88**      **Notes - -**

**N**      Water heater - General Notes.



**88**      **Notes - -**

**N**      Water intake valve - General Notes.





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## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

**88**

**Notes - -**

**N** - General Notes.



## List 1

IN= In Compliance    **OUT** = Out of Compliance    NA = Not Applicable    NO= Not Observed

<input type="checkbox"/> PIC on -site?	IN
<input type="checkbox"/> PIC informed employees in verifiable manner of disease reporting	IN
<input type="checkbox"/> Employees using barrier (I.e gloves, tongs, etc) when handling RTE foods?	IN
<input type="checkbox"/> Employees wearing clean uniform/proper hair restraints/fingernails maintained?	IN
<input type="checkbox"/> Hand washing sinks have soap, paper towels, 100 water and trash bin?	IN
<input type="checkbox"/> Wiping cloths stored properly and staff knowledgable on testing	IN
<input type="checkbox"/> Soap and sanitizing solutions at concentration and test strips available?	IN
<input type="checkbox"/> Thermometers in all temperature holding units and available for testing food?	IN
<input type="checkbox"/> Test strips and irreversible temp. devices used to confirm proper sanitization?	IN
<input type="checkbox"/> Food deliveries are from approved sources, safely stored and transported?	IN
<input type="checkbox"/> Clean-up of vomit and diarrheal events procedures and kit available?	IN

## List 2

IN= In Compliance    **OUT** = Out of Compliance    NA = Not Applicable    NO= Not Observed

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	"A copy of the last inspection report is available upon request."	IN
	Allergen Awareness Poster	IN
	Allergen Notice on menu and/or menu board	IN
	Current Town of Uxbridge Food Permit posted	NA
	Certified Food Protection Manager certificate posted	IN
	Allergen Awareness certificate posted	IN
	Handwashing signage	IN

## Temperatures

Area	Equipment	Product	Notes	Temps
Establishment	Reach-In Cooler			36 °F
				°F

Temperatures in RED identify items in the temperature danger zone. See the report notes for specific details.

## Notes

All equipment is new NSF certified. All surfaces are smooth and easily cleanable. Water lines and fixtures are all new and properly affixed. Water temp is at 113