

Purpose of Inspection

KRoutine

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

72

Establishment Name

Address

City

Chattanooga

Time in 02:45 PM AM / PM Time out 03:45; PM AM / PM

Inspection Date

Little Caesars #1

Type of Establishment © Mobile

O Temporary O Seasonal

O Complaint

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

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered Item. For Items marked OUT, mark COS or R for each Item as applicable. Deduct points for category or subcategory.

O Preliminary

O Consultation/Other

12	IN-in compliance OUT-not in compliance NA-not applicable NO-not observed				id		0	
					Compliance Status	COS	R	WT
	IN	оит	NA	NO	Supervision			
1	0	異			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	- MC	0			Management and food employee awareness; reporting	0	0	-
3	寒	0			Proper use of restriction and exclusion	0	0	•
	IN	OUT	NA	NO	Good Hygienic Practices			
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	
		OUT	NA	300.00	Preventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed	0	0	
7	鼷	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
		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	黨		Food separated and protected	0	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	2

O Follow-up

	Compliance Status							WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	×	0	Proper cooking time and temperatures	0	0	5
17	0	0	3%	0	Proper reheating procedures for hot holding	0	0	٥
	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	Proper hot holding temperatures	0	0	
20	243	0	0		Proper cold holding temperatures	0	0	5
21	0	26	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	0	25.			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

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

		OUT=not in compliance COS=com	ected or	1-6/10	đư
		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	氮	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	Г
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	
37	0	Contamination prevented during food preparation, storage & display	0	0	1
38	245	Personal cleanliness	0	0	г
39	126	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	Г
43	250	Single-use/single-service articles; properly stored, used	0	0	г
44	0	Gloves used properly	0	0	

pect	on	R-repeat (violation of the same code provision		-	140	
		Compliance Status	cos	R	W	
	OUT	Utensiis and Equipment	_	_	_	
45	0	Food and norfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1	
46	題	Warewashing facilities, installed, maintained, used, test strips	0	0	1	
47	0	Nonfood-contact surfaces clean	0	0	1	
	OUT Physical Facilities					
48	0	Hot and cold water available; adequate pressure	0	0	-	
49	0	Plumbing installed; proper backflow devices	0	0	- 2	
50	0	0	Sewage and waste water properly disposed	0	0	- 2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0		
52	×	Garbage/refuse properly disposed; facilities maintained	0	0	٠	
53	2%	Physical facilities installed, maintained, and clean	0	0	-	
54	0	Adequate ventilation and lighting; designated areas used	0	0	1	
	OUT	Administrative Items				
55	0	Current permit posted	0	0	П	
56	0	Most recent inspection posted	0	0		
		Compliance Status	YES	NO	W	
		Non-Smokers Protection Act	\top		_	
57		Compliance with TN Non-Smoker Protection Act	- X	0		
58 Tobacco products offered for sale O O		0				
59		If tobacco products are sold, NSPA survey completed	0	0		

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 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 post the most recent inspection 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 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

Signature of Person In Charge

08/01/2022 Signature of Environmental Health Specialist

08/01/2022

Date

**** 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



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Establishment Name: Little Caesars #1
Establishment Number # | 605253471

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 (Fahrenhelt)					
Triple Sink	QA	300						

Equipment Temperature					
Description	Temperature (Fahrenheit)				
All refrigeration @ 41*F or below. Product temperatures taken from					

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Pepperoni (pizza make machine)	Cold Holding	39
Sausage	Cold Holding	38
Ham	Cold Holding	38
Chicken Wings (walk in)	Cold Holding	38
Chicken Wings	Hot Holding	141
-		

bserved Violations
otal # 11
epeated # ()
Active managerial control over foodborne illness risk factors not provided. Jultiple, repeat priority items marked out of compliance during inspection. ecommend maintaining daily checklist on cleaning and sanitizing of food and on-food contact surfaces to properly maintain cleanliness. 4: Adequate cleaning/sanitizing frequency not provided. Numerous surfaces rty throughout kitchen/prep/storage areas. Recommend detailed cleaning egiment to properly maintain cleanliness. 1: Datemarking not provided for opened, RTE, chicken wings in walk in cooler nit. 6: Toxic item stored with food products by pizza make station and by hand
asin.
1: Frozen foods "soft" to the touch in upright freezer unit. Check unit for proper peration. Products should be at 0° F or below and firm to the touch. 3: Employee hair not properly restrained. 9: Soiled wiping cloths not properly stored. 3: Single service products stored on floor. Must be 6" off floor.
6: Backsplash dirty at triple sink.
2: Drain plug missing from dumpster. Liquid noted draining from dumpster and noted draining from du
3: Floors dirty in walk in cooler unit. Walls dirty around triple sink. Mop sink biled/dirty.

^{***}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: Little Caesars #1
Establishment Number: 605253471

Comments/Other Observations

- 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: (IN): Observed employees washing hands as needed.
- 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 products obtained from approved sources.
- 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: (NA) No raw animal products served/stored at establishment.
- 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: (N.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.
- 19: (IN) TCS foods holding at 135*F or above. See food temperatures listed above.
- 20: (IN)TCS foods holding at 41*F or below. See food temperatures listed above.
- 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.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.
- 57: (IN) Establishment does not allow smoking inside facility.
- 58: (IN): Tobacco products not sold at establishment.

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.

stablishment Information	
stablishment Name: Little Caesars #1	
stablishment Number: 605253471	
Comments/Other Observations (cont'd)	
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dditional Comments (cont'd)	
See last page for additional comments.	

Establishment Information							
	ittle Caesars #1						
Establishment Number #:	605253471						
Sources							
Source Type:	Food	Source:	Approved sources noted				
Source Type:	Water	Source:	Public				
Source Type:		Source:					
Source Type:		Source:					
Source Type:		Source:					
Additional Comme	ents						