

Establishment Name

Address

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit Remanent O Mobile

Type of Establishment

O Temporary O Seasonal

Chattanooga City

Time in 03:30 PM AM / PM Time out 03:35; PM AM / PM

Inspection Date

10/03/2023 Establishment # 605006751

Embargoed 0

 Routine Purpose of Inspection

∰ Follow-up

Shufords Smokehouse

924 Signal Mtn Rd.

O Complaint

О3

Follow-up Required

O Consultation/Other

O Yes 疑 No

Number of Seats 20

SCORE

Risk Category

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

O Preliminary

10	4 =in c	ompli	ence		OUT=not in compliance NA=not applicable NO=not observe	ed		0
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	氮	0			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	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	•
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	黨	0		0	Hands clean and properly washed	0	0	
7	왮	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
		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	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	×	_	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	寒	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	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	Proper hot holding temperatures	0	0	
20	245	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	0	3%		Food additives: approved and properly used	0	0	5
26	菜	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 pathoge ns, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	WT
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	2
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	2
32	0	Plant food properly cooked for hot holding	0	0	1
33	0	Approved thawing methods used	0	0	1
34	0	Thermometers provided and accurate	0	0	1
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	1
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	2
37	885	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	1
39	0	Wiping cloths; properly used and stored	0	0	1
40	0	Washing fruits and vegetables	0	0	1
	OUT	Proper Use of Utensils	\top		
41	0	In-use utensils; properly stored	0	0	1
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1
43	0	Single-use/single-service articles; properly stored, used	0	0	1
44		Gloves used properly	0	0	1

pecti	on	R-repeat (violation of the same code provision)		
		Compliance Status	COS	R	V
	OUT Utensils and Equipment				
45	0	Food and norfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	
47	0	Nonfood-contact surfaces clean	0	0	П
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	П
49	0	Plumbing installed; proper backflow devices	0	0	
50	0	Sewage and waste water properly disposed	0	0	
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	
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	Г
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	- X	0	Г
58 Tobacco products offered for sale O O		0	П (
59		If tobacco products are sold, NSPA survey completed	- 0	0	

st recent inspection report in a conspicuous manner. You have the right to request a he 88-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. in (10) days of the date of the

10/03/2023

Signature of Person In Charge

Date Signature of Environmental Health Specialist

Date

10/03/2023

**** 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.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information							
Establishment Name: Shufords Smokehouse							
Establishment Number #: [605006751							
NSPA Survey - To be completed if							
Age-restricted venue does not affirmatively re- twenty-one (21) years of age or older.	strict access to its buildings	or facilities at all times to p	ersons who are				
Age-restricted venue does not require each pe	erson attempting to gain ent	ry to submit acceptable for	m of identification.				
"No Smoking" signs or the international "Non-S	Smoking" symbol are not co	nenicuously posted at eve	ny antranca	-			
No officially signs of the international North	smoking symbol are not co	rispicuously posicu at eve	ry emirance.				
Garage type doors in non-enclosed areas are	not completely open.						
Tents or awnings with removable sides or veni	ts in non-enclosed areas an	e not completely removed	or open.				
Smoke from non-enclosed areas is infiltrating	into areas where smoking is	s prohibited.					
Smoking observed where smoking is prohibite	d by the Act.						
<u> </u>							
Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fah	renhelfi			
	Chlorine	100					
Three comp sink	CHIOTHE	100					
Equipment Temperature			I =				
Description			Temperature (Fah	renheit)			
Food Temperature		Abda at Fand					
Description		State of Food	Temperature (Fah	renneit)			

Observed Violations	
Total # 1	
Repeated # ()	
37:	
""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: Shufords Smokehouse	
Establishment Number: 605006751	
Comments/Other Observations	
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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 Name: Shufords Smokehouse				
Establishment Number: 605006751				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				
see hast page for additional commission.				

Establishment Information

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Establishment Name: Shufords Smokehouse							
Establishment Number #: 605006751							
Sources							
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Additional Comments							
Three compartment sink was set up properly during in	nspection.						