TENNESSEE DEPARTMENT OF HEALTH

				FOOD SERV	ICE ESTA	BL	SH	IM	IN	F 11	NS	PEC	TI	ON REPO	DRT		ļ		sco	RE				
ana -			Sushi City													ket Food Un	it.	1	.0		ſ	١		
Estat		imen	t Nan		6921 Lee H						_	Тур	be of	Establi	shme	ent		O Mobile			. U			
Address			Chattanooga	-		10	<u>, ∙ ∩</u>								-	O Seaso	I							
City									2.0						me o	ut <u>12:40</u> ;		AM /	PM					
Inspe	ctio	n Da	te			22 Establishment #	60531054	0		_	Embi		d L						L					
Purpo	se	of In	spect	ion	Routine	O Follow-up	O Complaint			O Pr	əlimir	ary		0	Cor	nsultation/Other	r							
Risk (Cat				01	paration practices	03	haha		04	-	0.000	aanb			up Required		Yes 💢		Nur	nber of Se	ats	12	0
				as c	ontributing fact	tors in foodborne il	iness outbreak	s. P	ublic	c He	alth	Inte	rven	tions	are	control mea	sures	to preve	ent illne	ess or in	ijury.			
		(11-	rir dae	denet	ed compliance statu	FOODBOR	NE ILLNESS Ri												olata fa <i>r</i> c	alasary o	r aubcataa			
IN-i	n co	mpii		- A Carlo		nce NA=not applicable	NO=not observe									spection		repeat (viol						
					Com	pliance Status		cos	R	WT		_	_	_				e Status		-		cos	R	WT
	_		NA	NO	Person in chase n	Supervision resent, demonstrates k	noulados and			_		IN	001	NA	NO	Cooking an Cor		for Safety			ture			
		0	NA	-	performs duties	-	nomeage, and	0	0	5		1 <u>2</u> 0		8		Proper cooking Proper reheating				lea.		8	흿	5
27	X.		nea	NO	Management and f	Employee Health food employee awarene	ess; reporting	0	0		۲	IN			NO	Cooling and						-	-	_
		٥				iction and exclusion		0	0	5			001					lic Healt		ol		_		
4 2		001	NA			od Hygionic Practice ing. drinking. or tobacco		0	0			0	0		0.0	Proper cooling Proper hot hole						8	윙	
5 2	X		NA	0	No discharge from	eyes, nose, and mouth ing Contamination b		0	0	5		100	0	0		Proper cold ho Proper date ma						0	8	5
		0		0	Hands clean and p	roperly washed		0	0			12	-	_		Time as a publ				res and re		ŏ	ŏ	
	ĸ	0	0	0	No bare hand cont alternate procedure	act with ready-to-eat fo es followed	ods or approved	0	0	5			OUT	-			Cor	nsumer A	dvisory			-	-	_
8)	N I	0 001	NA		Handwashing sink	s properly supplied and Approved Source	accessible	0	0	2	23	×	0	0		Consumer adv food	risory p	provided fo	r raw and	i underco	oked	0	0	4
		0	~		Food obtained from Food received at p			0	0			IN	ουτ	-	NO	Hig	hiy Su	sceptible	Popula	rtions		_	-	
11 2	×	ŏ			Food in good cond	ition, safe, and unadult		ŏ	ŏ	5	24	0	0	X		Pasteurized fo	ods us	ed; prohibi	ted foods	s not offer	red	٥	٥	5
		0	0	~	destruction	available: shell stock tag		0	0			IN	ουτ					Chemic	ais					
13 3			NA	NO	Protect Food separated an	ction from Contamin of protected	ation	0	0	4		0	8	X		Food additives Toxic substance						8	읭	5
14 3			ŏ		Food-contact surfa	ces: cleaned and sanit		ŏ	ŏ			ÎN	OUT	-	NO			with App				-		
15 }	8	0			Proper disposition served	of unsafe food, returned	d food not re-	0	0	2	27	0	0	窝		Compliance wi HACCP plan	ith vari	ance, spec	ialized pr	rocess, ar	nd	0	0	5
_		_		Gas	d Rotali Practic	es are preventive	management to co	-		Inte	-	tion		anth o	_	chemicale		nhunical	oblact	a lata fa	a da	_	_	
				900	a Retail Practic	es are preventive	measures to co	GOC					_		yena	, chemicals,	, and	pnysical	object	a into it	ods.			
				001	F=not in compliance		COS=corre	cted o	n-site	during				30		ŀ	R-repea	t (violation	of the sam	ne code pro				
_		OUT	_			Food and Water		COS	R	WT			UT					ce Statu d Equipm				cos	R	WT
28	-	0			d eggs used where	required		0	0	1	4		0			onfood-contact s				1y design	ed,	0	0	1
29 30					ice from approved btained for specials	source ized processing method	ts	8	00	2	\vdash	+	- 1			and used						_	-	-
	-	OUT	Deese			mperature Control						_	-			g facilities, insta ntact surfaces c		naintained,	, used, te	st strips		0	0	1
31		0	contr		ning methods used,	; adequate equipment f	or temperature	0	0	2	H	0	UT			Ph	ysical	Facilitie						1
32 33					properly cooked for thawing methods us			8	00							f water available stalled; proper b			sure			8	읭	2
34	_		<u> </u>		ters provided and a			ŏ	ŏ	1		_				i waste water pr						ŏ	허	2
	-	OUT				Identification					-		_			es: properly con						•	<u> </u>	1
35	_		Food	prop		I container; required re		0	0	1			-	-		use properly dis				d		0	의	1
36	-	OUT O	Insec	ts. ro	Prevention o dents, and animals	of Food Contamination	en	0	0	2		-	-			ilities installed, r entilation and lig				sed		8	8	1
37	+	0				ing food preparation, st	mana & disclau	0	0	1	F	-	UT I					ative iter				-	-	
38	_	-			leanliness	-groos preparation, se	vielle e rustriek	0	0	1	6		_	Current	Dern	nit posted						0	0	
39		-			ths; properly used a	and stored		ŏ		1		_			-	inspection post	ed					ŏ	ŏ	0

On file	05/03/2022	KALDI	05/03/2022
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date
	**** Additional food safety information can be found on our	website, http://tn.gov/health/article/eh-foodservice ****	

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59

iture 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 enner 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 thi port. T.C.A. sections 68-14-703, 68-14-708, 68-14-709, 68-14-719, 68-14-715, 68-14-716, 4-5-329.

YES NO WT

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Compliance Status

Compliance with TN Non-Smoker Protection Act. Tobacco products offered for sale

If tobacco products are sold, NSPA survey completed

Non-Smokers Protection Act

Free food safety training classes are available each month at the county health department. Please call () 4232098110 to sign-up for a class.		,		
	-2267 (Rev. 6-15)			RDA 629

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O Washing fruits and vegetables

44 O Gloves used properly

 OUT
 Proper Use of Utensils

 41
 O
 In-use utensils; properly stored

 42
 O
 Utensils, equipment and linens; properly stored, dried, handled

 43
 O
 Single-use/single-service articles; properly stored, used

Proper Use of Utensils

40

PH

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Sushi City Establishment Number #: 605310540

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.	
Smoking observed where smoking is prohibited by the Act.	

Warewashing Info											
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)								
CL dishwasher	CL	50									

Equipment Temperature	
Description	Temperature (Fahrenheit)
Walk in cooler	39
Low boy (prep area)	37
Low boy (proteins prep area)	37
Sushi reach in	38

State of Food	Temperature (Fahrenheit)
Cold Holding	39
Cold Holding	39
Cold Holding	38
Cooking	187
Cooking	191
Cold Holding	38
Cold Holding	38
Hot Holding	159
Cold Holding	38
Cold Holding	40
Cold Holding	39
Cold Holding	38
	Cold Holding Cold Holding Cold Holding Cooking Cooking Cold Holding Cold Holding Cold Holding Cold Holding Cold Holding

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Sushi City

Establishment Number : 605310540

Comments/Other Observations

1: (IN): ANSI Certified Manager present.

- 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: Good 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 from approved sources.

- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (IN) Parasite destruction paperwork available
- 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: See temperatures.

- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See temperatures.
- 20: See temperatures.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: Establishmemt using TILT procedures correctly with sushi rice.
- 23: Advisory located on menu.
- 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.

Establishment Information

Establishment Name: Sushi City

Establishment Number : 605310540

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Sushi City

Establishment Number #: 605310540

Sources				
Source Type:	Water	Source:	Public	
Source Type:	Food	Source:	Sysco	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

Additional Comments