# **TENNESSEE DEPARTMENT OF HEALTH**

			No.				ICE ESTA									ON REPORT	SCO			
Esta	abisi	hmen	t Nan		Bojangles' #965 O Fermer's Market Food Unit Type of Establishment O Mobile									Farmer's Market Food Unit Ø Permanent O Mobile	10		$\left[ \right]$			
Add	ress				9375 Dayton Pike O Temporary O Seasonal											/				
City	city Sodd				Soddy Daisy Time in 09:10 AM AM / PM Time out 09:30: AM AM / PM															
					05/11/20	22_Establishment#						- ro								
		on Da				O Follow-up				-					<u></u>				_	
			spect		Routine		O Complaint			O Pre	imin	ary				nsuitation/Other			70	
Risi	(Cat	tegon R			O1	Daration practices	O3	behr		04	at c	omm	onh			up Required O Yes 🕅 No I to the Centers for Disease Control	Number of S		10	_
																control measures to prevent illness				
			rix day	slavet	ed compliance stat											INTERVENTIONS ach litem as applicable. Deduct points for cate	mory or subcate			
IN	⊨in c	ompili				nce NA=not applicable										pection R=repeat (violation of the sa				
					Com	pliance Status		cos	R	WT			_	_	_	Compliance Status		cos	R	WT
		-	NA	NO	Parson in charpe	Supervision present, demonstrates	mouladae and			_		IN	ουτ	NA	NO	Cooking and Reheating of Time/Ter Control For Safety (TCS) For				
1	0	0		110	performs duties		Niomeoge, and	0	0	5		0	0			Proper cooking time and temperatures		8	읽	5
2	0		NA		Management and	Employee Health food employee awaren	ess; reporting	0	0		۳	0				Proper reheating procedures for hot holding Cooling and Holding, Date Marking, a		01	0	
3	0	0			Proper use of rest	riction and exclusion		0	0	5			OUT		NO	a Public Health Control				
4	IN O		NA			od Hygionic Practic ting, drinking, or tobacc		0	0	_		8	-	0		Proper cooling time and temperature Proper hot holding temperatures		8	읭	
5	0	0		0	No discharge from	eyes, nose, and mout	h	ŏ	ŏ	5	20	0	0	0		Proper cold holding temperatures		0	0	5
6	0		NA	and the second sec	Hands clean and	ing Contamination I properly washed	by Hands	0	0		21	0	0 0	0		Proper date marking and disposition		_	0 0	
7	0	0	0	0	No bare hand con alternate procedu	tact with ready-to-eat fo	ods or approved	0	0	5	<i>"</i>		OUT	-		Time as a public health control: procedures and rec Consumer Advisory		9	9	_
	0		NA			s properly supplied and	d accessible	0	0	2	23	_	0	0		Consumer advisory provided for raw and un	ndercooked	0	0	4
9	0	0	NA			Approved Source m approved source		0	0				OUT	NA		food Highly Susceptible Populatio	ens		_	
			0	0		proper temperature sition, safe, and unadult	terated	8	8	5	24	0	0	0		Pasteurized foods used; prohibited foods no	ot offered	0	0	5
	ō	ō	0	0	Required records	available: shell stock ta		ō	ō			IN	OUT	NA	NO	Chemicals				
			NA			ction from Contamin	nation				25	0	0	0	_	Food additives: approved and properly used	d	8	0	5
13 14	응	0	응		Food separated a Food-contact surf	nd protected aces: cleaned and sanit	tized	8	8	4	26		O OUT	NA		Toxic substances properly identified, stored Conformance with Approved Pro-		0	0	-
$\rightarrow$	0	0	_		Proper disposition	of unsafe food, returne		0	0	2	27	0	0	0		Compliance with variance, specialized proce HACCP plan		0	0	5
					served															
				Goo	d Retail Practi	ces are preventive	measures to co	ontro	l the	intro	duc	tion	of p	atho	jens	, chemicals, and physical objects in	nto foods.			
				011	T=not in compliance		COS=corre			<b>1/1</b>			ICE	5		R-repeat (violation of the same of	vela non-ision \			
				00	Com	pliance Status	003-0016		R		Ē					Compliance Status		COS	R	WT
2	8	OUT	Past	eurize	d eggs used when	Food and Water e required		0	0	1		_	υτ D	ood ar	id no	Utensils and Equipment nfood-contact surfaces cleanable, properly d	designed.			
	9 0	0	Wate	er and	ice from approved		de	0	0	2	4					and used		0	•	1
	·	OUT				mperature Control				_	4		-			g facilities, installed, maintained, used, test s	strips	0	0	1
3	1	0	Prop		oling methods used	t; adequate equipment	for temperature	0	0	2	4	_	∧ C UT	Vonfoor	5-cor	Physical Facilities		0	0	1
	2		Plant	food	properly cooked for			_	0			8 (	o F			water available; adequate pressure		0		2
_	3 4	_			thawing methods u eters provided and			8	0		4	_				talled; proper backflow devices waste water properly disposed		0	응	2
	_	OUT				didentification		Ľ		_		_	_			s: properly constructed, supplied, cleaned			ŏ	1
3	5	-	Food	l prop	erly labeled; origin	al container; required re	cords available	0	0	1	5		•  •	Sarbag	e/refi	use properly disposed; facilities maintained		0	0	1
-		007	1000			of Food Contaminat	ion	-		-	5	_				ities installed, maintained, and clean		_	<u> </u>	1
36 O Insects, rodents, and animals not present		0	0	2	5	-	-	vaequa	te ve	ntilation and lighting; designated areas used	1	0	이	1						
3	_					ing food preparation, st	torage & display	0	0	1			UT			Administrative items				
_	8 9	-	-		leanliness ths: properly used	and stored		8	0	1	5					nit posted inspection posted		8	8	0
_	0	0		<u> </u>	ruits and vegetable	6		ŏ	õ		Ľ					Compliance Status		YES		WT
4	_	OUT	In-us	e uter	Prope nsils; properly store	r Use of Utensils Id		0	0	1	5	7	-	Somplia	ince	Non-Smokers Protection Act with TN Non-Smoker Protection Act	t	आ	01	
- 4	23	0	Uten	sils, e	quipment and liner	ns; properly stored, drie cles; properly stored, u		0	0	1	5	8	1	obacc	o pro	ducts offered for sale oducts are sold, NSPA survey completed		8	0	٥
_					ed properly	ores, property stored, u	200		8		6	a 🗌	1	TODBCI	lo pr	outros are solu, rear-re survey completed		0	91	

are 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 ner 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 the rt. T.C.A. sections 68-14-703, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-6-329.

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05/11/2022

05/11/2022

Signature	of	Person	In Charge	
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AN THE WAY

Date Signature of Environmental Health Specialist

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

PH-2267 (Rev. 6-15)	Free food safety training ck		nth at the county health department.	RDA 629
P192201 (1094. 0=10)	Please call (	) 4232098110	to sign-up for a class.	nur des

#### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



#### Establishment Information

Establishment Name: Bojangles' #965 Establishment Number #: 605244749

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 (Fahrenheit)					
Sanitizer bucket	QA	200						
Triple sink	QA	200						

Equipment Temperature	
Description	Temperature (Fahrenheit)

Food Temperature Description	State of Food	Temperature (Fahrenheit)
Sausage gravy	Hot Holding	155
Hashbrown	Hot Holding	145
Sausage patty	Hot Holding	156
Sliced tomatoes	Cold Holding	40
Raw chicken	Cold Holding	38
Coleslaw	Cold Holding	39

Observed Violations
Total # 1 Repeated # 0
Repeated # 0
56:

#### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



#### Establishment Information

Establishment Name: Bojangles' #965 Establishment Number : 605244749

#### Comments/Other Observations

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.

\*\*\*See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

## Establishment Information

Establishment Name: Bojangles' #965

Establishment Number : 605244749

Comments/Other Observations (cont'd)

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

## Establishment Information

Establishment Name: Bojangles' #965 Establishment Number #: 605244749

Sources				
Source Type:	Food	Source:	Mclane	
Source Type:	Water	Source:	Public	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

### Additional Comments