

### TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

1	$\cap \cap$
┸	00

SCORE

O Farmer's Market Food Unit Dubs BBQ (Mobile) O Permanent MMobile Establishment Name Type of Establishment 221 Timber Knoll Drive O Temporary O Seasonal Address Chattanooga Time in 02:00 PM AM / PM Time out 03:00; PM AM / PM City 11/05/2021 Establishment # 605310480 Embargoed 0 Inspection Date **E**Routine O Follow-up O Complaint O Preliminary O Consultation/Other Purpose of Inspection Risk Category О3 04 Follow-up Required O Yes 疑 No

# FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	<b>¢</b> ≐in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	d		0
Compliance Status COS R V							WT	
	IN	OUT	NA	NO	Supervision			
1	盔	0		Person in charge present, demonstrates knowledge, and performs duties		5		
	IN	OUT	NA	NO	Employee Health			
2	TXC	Management and food employee awareness; reporting O		0				
3	×	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	*	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	·
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	١ ٥
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	0	0		300	Hands clean and properly washed	0	0	
7	氮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8 X O			Handwashing sinks properly supplied and accessible	0	0	2		
	IN	OUT	NA	NO	Approved Source			
9	窓	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	1
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	黛	0	0		Food separated and protected	0	0	4
14	X	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	×	0			Proper disposition of unsafe food, returned food not re-	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	黨	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	X	Proper cooling time and temperature	0	0	
19	0	0	0	文	Proper hot holding temperatures	0	0	
20		0	0		Proper cold holding temperatures	0	0	5
21	0	0	0	200	Proper date marking and disposition	0	0	
22	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	8	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 pathogens, chemicals, and physical objects into foods.

			G00		
		OUT=not in compliance COS=corr			
	OUT	Compliance Status Safe Food and Water	cos	K	w
00	-		-		
28	0	Pasteurized eggs used where required	0	0	Ľ
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	Ŀ
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	:
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	
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	1
37	0	Contamination prevented during food preparation, storage & display	0	0	
38	0	Personal cleanliness	0	0	Г
39	0	Wiping cloths; properly used and stored	0	0	Г
40	0	Washing fruits and vegetables	0	0	
	OUT	Proper Use of Utensils			Т
41	0	In-use utensils; properly stored	0	0	Г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	Г
44	10	Gloves used properly	0	0	

pecti	on	R-repeat (violation of the same code provision		_				
		Compliance Status	cos	R	W			
	OUT Utensils and Equipment							
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1			
46	0	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	Sewage and waste water properly disposed	0	0	2			
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0				
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1			
53	0	Physical facilities installed, maintained, and clean	0	0	-			
54	0	Adequate ventilation and lighting; designated areas used	0	0	'			
	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						
57		Compliance with TN Non-Smoker Protection Act	- 3%	0				
58		Tobacco products offered for sale	0	0	١ (			
59		If tobacco products are sold, NSPA survey completed	0	0				

most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by ns 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. ithin ten (10) days of the date of th

11/05/2021



11/05/2021

Date

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

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



Establishment Information				
Establishment Name: Dubs BBQ (Mob	ile)			
Establishment Number #:  605310480				
NSPA Survey - To be completed if				
Age-restricted venue does not affirmatively rest twenty-one (21) years of age or older.	trict access to its buildings o	r facilities at all times to	persons who are	
Age-restricted venue does not require each per	rson attempting to gain entry	to submit acceptable for	orm of identification.	
"No Smoking" signs or the international "Non-S	moking" symbol are not con	spicuously posted at ev	ery entrance.	
Garage type doors in non-enclosed areas are r	not completely open.			
Tents or awnings with removable sides or vents	s in non-enclosed areas are	not completely remove	d or open.	
Smoke from non-enclosed areas is infiltrating in	nto areas where smoking is	prohibited.		
Smoking observed where smoking is prohibited	by the Act.			
Warewashing Info				
Machine Name	Sanitizer Type	PPM	Temperature ( Fah	renhelt)
5				
Equipment Temperature				
Description			Temperature ( Fahr	renheit)
Food Temperature				
Description		State of Food	Temperature ( Fahr	renhelt)
1				

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

Establishment Information



Establishment Name: Dubs BBQ (Mobile)	
Establishment Number: 605310480	
Comments/Other Observations	
1: 2: 3: 4: 5: 6: 7: 8: 9: 10: 11: 12: 13:	
3:	
4:	
5:	
6:	
7:	
8: 8:	
ອ. 1∩·	
10. 11 <sup>.</sup>	
12:	
13:	
14:	
15: 16:	
16: 17:	
17. 18·	
19:	
20:	
21:	
22:	
17: 18: 19: 20: 21: 22: 23: 24: 25: 26: 27:	
24. 25·	
26·	
27:	
57: 58:	
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.

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

Establishment Name: Dubs BBQ (Mobile)		
Establishment Number: 605310480		
Comments/Other Observations (cont'd)		
Additional Comments (cont'd)		
See last page for additional comments.		

Establishment Information

Establishment Information						
Establishment Name: Dubs BBQ (Mobile)						
Establishment Number # 605310480						
TO SECOND						
Sources						
Source Type:	Source:					
Source Type:	Source:					
Source Type:	Source:					
Source Type:	Source:					
Source Type:	Source:					
Additional Comments						
Hard copy inspection on file						