

Establishment Name

Address

Risk Category

City

Cheddar's

Chattanooga

2014 Gunbarrel Rd

# TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

SCORE

Remanent O Mobile Type of Establishment

Follow-up Required

O Temporary O Seasonal

Time in 11:30; AM AM / PM Time out 12:30; PM AM / PM

O Yes 疑 No

02/24/2020 Establishment # 605249517 Embargoed 0 Inspection Date

**K**Routine O Follow-up O Complaint O Preliminary O Consultation/Other Purpose of Inspection О3

Number of Seats 380

| 10 | 4≃in c | :ompii | ance |    | OUT=not in compliance NA=not applicable NO=not observe                                    |     |   | c  |  |
|----|--------|--------|------|----|---|-----|---|----|--|
|    |        |        |      |    | Compliance Status   | cos | R | WT |  |
|    | IN     | OUT    | NA   | NO | Supervision   |     |   |    |  |
| 1  | 鼷      | 0      |      |    | Person in charge present, demonstrates knowledge, and<br>performs duties                  | 0   | 0 | 5  |  |
|    | IN     | OUT    | NA   | NO | Employee Health   |     |   |    |  |
| 2  | D)(    | 0      |      |    | Management and food employee awareness; reporting   | 0   | 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  | *      | 0      |      | 0  | No discharge from eyes, nose, and mouth   | 0   | 0 | 0  |  |
|    | IN     | OUT    | NA   | NO | Preventing Contamination by Hands   |     |   |    |  |
| 6  | 100    | 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<br>alternate procedures followed | 0   | 0 | 5  |  |
| 8  | ×      | 0      |      |    | Handwashing sinks properly supplied and accessible  | 0   | 0 | 2  |  |
|    | IN     | 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 | 1  |  |
| 11 | ×      | 0      |      |    | Food in good condition, safe, and unadulterated   | 0   | 0 | 5  |  |
| 12 | 0      | 0      | ×    | 0  | Required records available: shell stock tags, parasite<br>destruction                     | 0   | 0 |    |  |
|    | IN     | OUT    | NA   | NO | Protection from Contamination   |     |   |    |  |
| 13 | ×      | 0      | 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-                                  | 0   | 0 | 2  |  |

| ш  | Compliance Status |     |     |    |   |   | R | WT |
|----|-------------------|-----|-----|----|---|---|---|----|
|    | IN                | OUT | NA  | NO | Cooking and Reheating of Time/Temperature<br>Control For Safety (TCS) Foods |   |   |    |
| 16 |                   | 0   | 0   | 0  | Proper cooking time and temperatures  | 0 | 0 | 5  |
| 17 | 8                 | 0   | 0   | 0  | Proper reheating procedures for hot holding                                 | 0 | 0 | Ů  |
|    | IN                | оит | NA  | NO | Cooling and Holding, Date Marking, and Time as<br>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 | 24                | 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<br>food                  | 0 | 0 | 4  |
|    | IN                | OUT | NA  | NO | Highly Susceptible Populations  |   |   |    |
| 24 | 0                 | 0   | 333 |    | Pasteurized foods used; prohibited foods not offered                        | 0 | 0 | 5  |
|    | IN                | OUT | NA  | NO | Chemicals   |   |   |    |
| 25 | 0                 |     | 巡   |    | Food additives: approved and properly used                                  | 0 | 0 | 5  |
| 26 | 黨                 | 0   |     |    | Toxic substances properly identified, stored, used                          | 0 | 0 | ,  |
|    | IN                | OUT | NA  | NO | Conformance with Approved Procedures  |   |   |    |
| 27 | ×                 | 0   | 0   |    | Compliance with variance, specialized process, and<br>HACCP plan            | 0 | 0 | 5  |

### the introduction of pathog s, chemicals, and physical objects into foods.

|    |     |  | GOO    |   |    |
|----|-----|--|--------|---|----|
|    |     | OUT=not in compliance COS=con  |        |   |    |
|    |     | Compliance Status  | cos    | R | W  |
|    | 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 | _; |
| 30 | 0   | Variance obtained for specialized processing methods                       | 0      | 0 | ١. |
|    | OUT | Food Temperature Control   |        |   |    |
| 31 | 0   | Proper cooling methods used; adequate equipment for temperature<br>control | 0      | 0 | :  |
| 32 | 0   | Plant food properly cooked for hot holding                                 | 0      | 0 | Г  |
| 33 | 0   | Approved thawing methods used  | 0      | 0 | Ι. |
| 34 | 0   | Thermometers provided and accurate   | 0      | 0 | Т  |
|    | 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 |    |
| 37 | 0   | Contamination prevented during food preparation, storage & display         | 0      | 0 | Ī  |
| 38 | 0   | Personal cleanliness   | 0      | 0 | Г  |
| 39 | 0   | Wiping cloths; properly used and stored                                    | 0      | 0 |    |
| 40 | 0   | Washing fruits and vegetables  | 0      | 0 | Г  |
|    | OUT | Proper Use of Utensils   | $\top$ |   |    |
| 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 |    |
| 44 | 10  | Gloves used properly   | 0      | 0 |    |

| pect  | 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,<br>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  | 2   |
| 49  | 2                          | 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  | 1   |
| 52  | 0                          | Garbage/refuse properly disposed; facilities maintained                                  | 0   | 0  | 1   |
| 53  | 0                          | Physical facilities installed, maintained, and clean                                     | 0   | 0  | 1   |
| 54  | 0                          | Adequate ventilation and lighting; designated areas used                                 | 0   | 0  | 1   |
|   | OUT                        | Administrative Items   | Т   |    |     |
| 55  | 0                          | Current permit posted  | 0   | 0  | Г   |
| 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 |                            |  |     | 0  |     |
| 58  |                            | Tobacco products offered for sale  | 0   | 0  | ١   |
| 59  |                            | If tobacco products are sold, NSPA survey completed                                      | - 0 | 0  |     |

cuous manner. You have the right to request a hearing regarding this report by fill ten (10) days of the date of the rilla

02/24/2020

Date Signature of Environmen

02/24/2020

Signature of Person In Charge

Date

\*\*\*\* 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: Cheddar's

Establishment Number #: 605249517

| 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.   | $\neg$ |
| Smoking observed where smoking is prohibited by the Act.  | _      |

| Warewashing Info           |                  |            |                           |  |  |  |  |  |
|----------------------------|------------------|------------|---------------------------|--|--|--|--|--|
| Machine Name               | Sanitizer Type   | PPM        | Temperature ( Fahrenheit) |  |  |  |  |  |
| Sanibucket<br>Dish machine | Quat<br>Chlorine | 300<br>100 |                           |  |  |  |  |  |

| Equipment Temperature |                           |  |  |  |  |  |  |
|-----------------------|---------------------------|--|--|--|--|--|--|
| Description           | Temperature ( Fahrenheit) |  |  |  |  |  |  |
| Walkin                | 38                        |  |  |  |  |  |  |
|                       |                           |  |  |  |  |  |  |
|                       |                           |  |  |  |  |  |  |
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|                       |                           |  |  |  |  |  |  |

| Food Temperature |               |                           |  |  |  |  |
|------------------|---------------|---------------------------|--|--|--|--|
| Description      | State of Food | Temperature ( Fahrenheit) |  |  |  |  |
| Gravy            | Hot Holding   | 189                       |  |  |  |  |
| Broc ched soup   | Hot Holding   | 168                       |  |  |  |  |
| Slaw             | Cold Holding  | 38                        |  |  |  |  |
| Egg              | Cold Holding  | 41                        |  |  |  |  |
| Rice             | Hot Holding   | 200                       |  |  |  |  |
| Mac n chz        | Hot Holding   | 136                       |  |  |  |  |
| Shrimp           | Cold Holding  | 39                        |  |  |  |  |
| Raw chx          | Cold Holding  | 38                        |  |  |  |  |
| Salmon           | Cold Holding  | 38                        |  |  |  |  |
| Pico             | Cold Holding  | 38                        |  |  |  |  |
| Potato           | Hot Holding   | 175                       |  |  |  |  |
| Chicken          | Cooking       | 172                       |  |  |  |  |
| Pasta            | Cold Holding  | 39                        |  |  |  |  |
| Mac n chz        | Cold Holding  | 34                        |  |  |  |  |
| Chx tender       | Hot Holding   | 160                       |  |  |  |  |

| bserved Violations   |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
| otal# 1  |  |  |  |  |  |  |  |
| epeated# ()  |  |  |  |  |  |  |  |
| 49: Drips at multiple faucets.   |  |  |  |  |  |  |  |
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## TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



### Establishment Information

Establishment Name: Cheddar's
Establishment Number: 605249517

### 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: Observed hand washing
- 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: Approved source
- 10: Food in condition
- 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: (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: (IN) All raw animal foods cooked to proper temperatures.
- 17: (IN) All TCS foods are properly reheated for hot holding.
- 18: Using ice baths to cool
- 19: See food temps
- 20: See food temps
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NA) No food held under time as a public health control.
- 23: 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: Using cook chill. Food temp logs maintained.

57:

58:

### Additional Comments

See last page for additional comments.

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

<sup>\*\*\*</sup>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: Cheddar's          |  |
| Establishment Number: 605249517        |  |
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| Comments/Other Observations (cont'd)   |  |
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| Additional Comments (cont'd)           |  |
| See last page for additional comments. |  |
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| Establishment Infor           | mation    |         |        | - |  |  |  |  |
|-------------------------------|-----------|---------|--------|---|--|--|--|--|
| Establishment Name: Cheddar's |           |         |        |   |  |  |  |  |
| Establishment Number #:       | 605249517 |         |        |   |  |  |  |  |
| Sources                       |           |         |        |   |  |  |  |  |
| Source Type:                  | Water     | Source: | Tnam   |   |  |  |  |  |
| Source Type:                  | Food      | Source: | Mclane |   |  |  |  |  |
| Source Type:                  |           | Source: |        |   |  |  |  |  |
| Source Type:                  |           | Source: |        |   |  |  |  |  |
| Source Type:                  |           | Source: |        |   |  |  |  |  |
| Additional Comme              | ents      |         |        |   |  |  |  |  |
|                               |           |         |        |   |  |  |  |  |
|                               |           |         |        |   |  |  |  |  |
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