TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

	FOOD SERVICE ESTABLISHMENT INSPECTION REPORT SCORE																			
Ş			and the second																	
Esta	bīst	imen	t Narr		Kabob-ste	r						-				Farmer's Market Food Unit Permanent O Mobile	U			
Addr	tdress 1408 Gunbarrel Rd											Typ	pe of I	Establi	shme	O Temporary O Seasonal				
City					Chattanoo	ga	Time ir	01	L:1	QF	PM	A	M/P	M Tir	me or	ut 01:40:PM AM/PM				
Insp	ectic	n Da	rte		10/21/20	022 _{Establis}	hment # 60530996					argoe								
			spect		Routine	O Follow-up				O Pr					Cor	nsultation/Other				
Risk	Cat	egon	y		O 1	3 22	03			04				Fo	low-	up Required O Yes 🕱 No	Number of S	eats		
		R	isk F	acto as c	ors are food p ontributing fa	reparation pra	ctices and employee orne illness outbreak	behs s. P	vior	s mo c Hea	et c lith	omn Inte	nonh rven	y repo tions	are	to the Centers for Disease Contro control measures to prevent illnes	i and Prevent s or injury.	tion		
						FOO	DBORNE ILLNESS RI	SK F	ACT	ors	AND	PU	BLIC	HEA	LTH	INTERVENTIONS				
IN	in c	nii) mpii		lgnet		iance NA=not ac			ite m							ach item as applicable. Deduct points for cat pection R=repeat (violation of the s				
_	_	_	_			mpliance Stat	48	Cos	R		Ē		1			Compliance Status			R	WT
-	_	-	NA	NO	Person in charo	Supervisi e present, demon	on strates knowledge, and					IN	ουτ	NA	NO	Cooking and Reheating of Time/Te Control For Safety (TCS) Fo				
	箴 IN	О 00Т	NA	NO	performs duties	Employee H	÷.	0	0	5	16 17	0	8	8		Proper cooking time and temperatures Proper reheating procedures for hot holdin	a	00	8	5
2	X	0				d food employee	awareness; reporting	0		5	Ë	IN	ол		NO	Cooling and Holding, Date Marking,			-	
	実 IN	О 000Т	NA			striction and exclu lood Hygionic F		0	0	-	18	0	0	0	X4	a Public Health Centrel Proper cooling time and temperature		0	0	
4	X	0		0	Proper eating, ta	asting, drinking, or	tobacco use	8	8	5	19		0 0	0		Proper hot holding temperatures		0		
	IN		NA	NO	Preve		ation by Hands					100	lõ		0	Proper cold holding temperatures Proper date marking and disposition		8	ŏ	5
_	皇鼠	0	0			d properly washed ontact with ready-t	to-eat foods or approved	-	0 0	5	22	0	0	×		Time as a public health control: procedures	and records	0	0	
8		0	0	0	alternate proced	dures followed	lied and accessible	0	0	2		IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and u	Indercooked	_	- 1	
	IN	OUT	NA	NO		Approved Se	ource				23	-	O	2	NO	food		0	٥	4
10	õ	ō	0	\geq	Food received a	rom approved sou t proper temperat	ure	0			24	IN O	001	NA	NO	Highly Susceptible Pepulati Pasteurized foods used; prohibited foods n		0	0	5
11 12	8 0	0	22			ndition, safe, and s available: shell	unadulterated stock tags, parasite	0	0	5	H	IN	OUT		NO	Chemicals	or othered	-	-	-
	IN	OUT	NA	-	destruction Pret	tection from Co	ntamination				25	0	0	100		Food additives: approved and properly use	d		ा	
13			0		Food separated Food-contact su	and protected rfaces: cleaned a	nd sanitized	8	0	4	26	<u>実</u> IN		NA	NO	Toxic substances properly identified, store Conformance with Approved Pro		0	0	9
	n N	ō	-				returned food not re-	0	0	2	27	-	0	8		Compliance with variance, specialized pro HACCP plan		0	0	5
				Gaa			athe manufactor to co					tion				, chemicals, and physical objects	into foode			
					e recail Plac	ices are preve				ETA			_		yena	, chemicals, and physical objects	into roous.			
				001	not in complianc		COS=com	ected o	n-site	during						R-repeat (violation of the same		006		LACT.
		OUT			Saf	mpliance Statu e Food and Wat			R			0	UT			Compliance Status Utensils and Equipment		COS	~ 1	
20					d eggs used who ice from approv				0		4	5				nfood-contact surfaces cleanable, properly and used	designed,	0	0	1
30	_	0 OUT		nce o		ialized processing Temperature Co		0	0	1	4	6 (0 V	Narewa	ashin	g facilities, installed, maintained, used, test	strips	0	0	1
31		0	Рторя				ipment for temperature	0	0	2	4	_	_	Vonfoo	d-cor	tact surfaces clean		0	0	1
33		-	Plant		properly cooked	for hot holding		-	0		4	_	UT O∳	lot and	i cold	Physical Facilities water available; adequate pressure		0		2
33	_		<u> </u>		thawing methods eters provided an			0		1		_	_			talled, proper backflow devices waste water properly disposed		0	0	2
		OUT		norme		od identificatio	n	Ľ		_						s: properly constructed, supplied, cleaned			ŏ	1
38	5	0	Food	prop	erly labeled; orig	inal container; req	uired records available	0	0	1	5	2	•	Sarbag	e/refi	use properly disposed; facilities maintained		0	0	1
	_	OUT	Incor			n of Feed Conta	mination				-		_			lities installed, maintained, and clean	4	0	2	1
36	-	-			dents, and anim			0	0	2	F	-	-	vaequa	ne ve	ntilation and lighting; designated areas use	3	0	0	1
37		0			leanliness	uring tood prepar	ation, storage & display	0	0	1	5		ит О (Sument	Dern	Administrative items nit posted		0	0	
39		Ó	Wipin	ig clo	ths; properly use			0	0	1						inspection posted		0	0	0
40	_	O OUT	Wash	ning fr	ruits and vegetat Prop	vies ver Use of Uten	-	0	0	1	\vdash					Compliance Status Non-Smokers Protection Ad		YES	NO	WT
41	1	12			nsils; properly st	bred	ed, dried, handled	8	8			7				with TN Non-Smoker Protection Act ducts offered for sale		8	읭	0
4	3	0	Single	e-use	/single-service a	ens; propeny stor rticles; properly st	tored, used	0	0	1	5	°				oducts offered for sale oducts are sold, NSPA survey completed		ö		Ű
4	_				ed properly	- items within any st	10 days was seen to be seen		0						- to a local sector	Reported adultation of an interview data for the		uler 1		
servi	ce es	tablis	shmen	t perm	sit. Items identified	as constituting im-	minent health hazards shall b	e corre	cted i	mmed	ately	or op	eratio	ns shall	ceas	Repeated violation of an identical risk factor m e. You are required to post the food service est lling a written request with the Commissioner wi	ablishment permit	in a c	onspi	cuous
							. 68-14-711, 68-14-715, 68-14-7				and i	- gard	-90	- repo	/		concern (rol) calle	an dhi		
<	_			~		_	10/2	21/2	022	2		_	/	<u>_</u>	\geq		1	.0/2	1/2	022

Signature of	Person In Charge	
a.g. acara a	e e e e e e e e e e e e e e e e e e e	

	Date	Signature of Envir	onmental Hea	alth Specialist	
					-

Date			
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. Please call () 4232098110 to sign-up for a class. PH-2267 (Rev. 6-15) RDA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Kabob-ster Establishment Number #: 605309964

ISPA Survey – To be completed if #57 is "No"	
ge-restricted venue does not affirmatively restrict access to its buildings or facilities at all times to persons who are venty-one (21) years of age or older.	
ge-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.	
arage type doors in non-enclosed areas are not completely open.	
ents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
moke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	
moking observed where smoking is prohibited by the Act.	<u> </u>

Warewashing Info			
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
Triple sink	Lactic acid	1000	
Dish machine	Chlorine	100	

Equipment l'emperature							
Description	Temperature (Fahrenheit)						

Food Temperature Description	State of Food	Temperature (Fahrenheit	
Raw ground beef	Cold Holding	40	
Sliced tomatoes	Cold Holding	40	
Raw chicken	Cold Holding	40	
Rice	Hot Holding	165	
Hummus	Cold Holding	40	

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Observed Violations
Total # 1 Repeated # ()
Repeated # ()
41: In-use utensils stored in standing water at room temperature.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Kabob-ster

Establishment Number : 605309964

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2: (IN): PIC has knowledge of symptoms and diseases of foodborne illnesses.

- 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: Proper 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 obtained from approved source.

- 10: (NO): No food received during inspection.
- 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: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: Proper hot holding temperatures observed.
- 20: Proper cold holding temperatures observed.
- 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: (NA) Establishment does not serve animal food that is raw or undercooked.
- 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: Kabob-ster

Establishment Number: 605309964

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Kabob-ster

Establishment Number # 605309964

Sources				
Source Type:	Water	Source:	Public	
Source Type:	Food	Source:	US Foods	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

Additional Comments