

Establishment Name

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Subway #32212 Remanent O Mobile Type of Establishment

9413 Apison Pike, STE 114 O Temporary O Seasonal Address Ooltewah

Time in 10:40 AM AM / PM Time out 11:20: PM AM / PM City 08/04/2021 Establishment # 605174963 Embargoed 0 Inspection Date

KRoutine O Follow-up O Complaint O Preliminary O Consultation/Other Purpose of Inspection

Number of Seats 42 Risk Category О3 Follow-up Required 级 Yes O No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

status (IN, OUT, NA, NO) for each nu

IN-in compliance OUT-not in compliance NA-not applicable NO-not observed								0	
	Compliance Status								
	IN	OUT	NA	NO	Supervision				
1	×	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	
	IN	OUT	NA	NO	Employee Health				
2	-MC	0			lanagement and food employee awareness; reporting		0		
3	×	0			Proper use of restriction and exclusion	0	0	5	
	IN	OUT	NA	NO	Good Hygienic Practices				
4	30	0		0	Proper eating, tasting, drinking, or tobacco use	0	0		
5	200	0		0	No discharge from eyes, nose, and mouth	0	0	0	
	IN	OUT	NA	100.00	Proventing Contamination by Hands				
6	×	0		0	Hands clean and properly washed	0	0		
7	鉱	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	
8	XX.	0			Handwashing sinks properly supplied and accessible	0	0	2	
Ť	IN	OUT	NA	NO	Approved Source		_		
9	200	0			Food obtained from approved source	0	0		
10	0	0	0	×	Food received at proper temperature	0	0		
11	X	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	0	0	窳		Food separated and protected	0	0	4	
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5	
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	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	寒	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	٠
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as 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	200	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 food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25		0	X		Food additives: approved and properly used	0	0	5
26	0	100			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 HACCP plan	0	0	5

to control the introduction of pathogens, chemicals, and physical objects into foods.

PRACTICES

			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	Г
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	Ľ
	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	1
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	:
37	0	Contamination prevented during food preparation, storage & display	0	0	1
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	ļ
	OUT	Proper Use of Utensils			
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	

ecti	OF 1	R-repeat (violation of the same code provision) Compliance Status	cos	R	W
	OUT	Utensils and Equipment	1000		
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	- 2
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	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	П		
55	0	Current permit posted	0	0	_
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	100	0	
58		Tobacco products offered for sale	0	0	
59		If tobacco products are sold, NSPA survey completed	0	0	

st recent inspection report in a conspicuous manner. You have the right to request a hearing regn ten (10) days of the date of th 14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

1 e

Signature of Person In Charge

08/04/2021 Date Signature of Environmental Health Specialist 08/04/2021

**** 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.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Subway #32212
Establishment Number #: 605174963

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	8 anitizer Type	PPM	Temperature (Fahrenheit)			
Triple sink	QA					

Equipment Temperature						
Description	Temperature (Fahrenheit)					
Walk in cooler	35					
Reach in cooler by cashier	37					

Food Temperature					
Description	State of Food	Temperature (Fahrenheit)			
Ham	Cold Holding	36			
Turkey	Cold Holding	37			
Tuna	Cold Holding	36			
Cut leafy greens	Cold Holding	37			
Sliced tomatoes	Cold Holding	36			
Meatballs	Hot Holding	147			
Sliced tomatoes (walk in)	Cold Holding	36			
Sliced peppers (reach in)	Cold Holding	36			
Teryaki chicken	Cold Holding	36			
Turkey (walk in)	Cold Holding	37			

Observed Violations							
Total # 1							
Repeated # 0							
26: QA coming out of triple sink nozzle at 400ppm +. PIC is watering down QA							
with bring ppm closer to 200. QA dispenser needs immediate attention.							
The same product and the same same and the same same same same same same same sam							
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Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 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: (NA) Shell stock not used and parasite destruction not required at this establishment.
- 13: No raw animal products present at facility during time of inspection.
- 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: (NA) No raw animal foods served.
- 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: (NO) Time as a public health control is not being used during the inspection.
- 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.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.

57:

58:

Additional Comments

See last page for additional comments.

^{***}See page at the end of this document for any violations that could not be displayed in this space.

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

Establishment Name: Subway #32212				
Establishment Number: 605174963				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				
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Establishment Information

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Establishment Name: Subway #32212								
Establishment Number #:	605174963							
Sources								
Source Type:	Food	Source:	Reinhart					
Source Type:	Water	Source:	Public					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Comme	nts							
Recommended usin	g CL as sanitizer in trip	le sink at 50ppm until QA tripl	e sink dispenser is repaired.					