



TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

94

Establishment Name Forbidden City Type of Establishment ☒ Permanent ☐ Mobile
 Address 2273 Gunbarrel Rd. ☐ Temporary ☐ Seasonal
 City Chattanooga Time in 01:50 PM AM / PM Time out 02:25 PM AM / PM
 Inspection Date 03/15/2022 Establishment # 605215299 Embargoed 0
 Purpose of Inspection ☐ Routine ☒ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other
 Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☐ Yes ☒ No Number of Seats 298

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance					OUT=not in compliance					NA=not applicable					NO=not observed					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)				
Compliance Status															COS	R	WT												
	IN	OUT	NA	NO	Supervision																								
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Person in charge present, demonstrates knowledge, and performs duties										<input type="checkbox"/>	<input type="checkbox"/>	5												
	IN	OUT	NA	NO	Employee Health																								
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Management and food employee awareness, reporting										<input type="checkbox"/>	<input type="checkbox"/>	5												
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper use of restriction and exclusion										<input type="checkbox"/>	<input type="checkbox"/>													
	IN	OUT	NA	NO	Good Hygienic Practices																								
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use										<input type="checkbox"/>	<input type="checkbox"/>	5												
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	No discharge from eyes, nose, and mouth										<input type="checkbox"/>	<input type="checkbox"/>													
	IN	OUT	NA	NO	Preventing Contamination by Hands																								
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Hands clean and properly washed										<input type="checkbox"/>	<input type="checkbox"/>	5												
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed										<input type="checkbox"/>	<input type="checkbox"/>													
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Handwashing sinks properly supplied and accessible										<input type="checkbox"/>	<input type="checkbox"/>	2												
	IN	OUT	NA	NO	Approved Source																								
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Food obtained from approved source										<input type="checkbox"/>	<input type="checkbox"/>	5												
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature										<input type="checkbox"/>	<input type="checkbox"/>													
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Food in good condition, safe, and unadulterated										<input type="checkbox"/>	<input type="checkbox"/>													
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Required records available: shell stock tags, parasite destruction										<input type="checkbox"/>	<input type="checkbox"/>													
	IN	OUT	NA	NO	Protection from Contamination																								
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food separated and protected										<input type="checkbox"/>	<input type="checkbox"/>	4												
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Food-contact surfaces: cleaned and sanitized										<input type="checkbox"/>	<input type="checkbox"/>	5												
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Proper disposition of unsafe food, returned food not re-served										<input type="checkbox"/>	<input type="checkbox"/>	2												

Compliance Status															COS	R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods												
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time and temperatures										<input type="checkbox"/>	<input type="checkbox"/>	5
17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding										<input type="checkbox"/>	<input type="checkbox"/>	
	IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control												
18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time and temperature										<input type="checkbox"/>	<input type="checkbox"/>	5
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures										<input type="checkbox"/>	<input type="checkbox"/>	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Proper cold holding temperatures										<input type="checkbox"/>	<input type="checkbox"/>	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking and disposition										<input type="checkbox"/>	<input type="checkbox"/>	
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures and records										<input type="checkbox"/>	<input type="checkbox"/>	
	IN	OUT	NA	NO	Consumer Advisory												
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Consumer advisory provided for raw and undercooked food										<input type="checkbox"/>	<input type="checkbox"/>	4
	IN	OUT	NA	NO	Highly Susceptible Populations												
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Pasteurized foods used; prohibited foods not offered										<input type="checkbox"/>	<input type="checkbox"/>	5
	IN	OUT	NA	NO	Chemicals												
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Food additives: approved and properly used										<input type="checkbox"/>	<input type="checkbox"/>	5
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>			Toxic substances properly identified, stored, used										<input type="checkbox"/>	<input type="checkbox"/>	
	IN	OUT	NA	NO	Conformance with Approved Procedures												
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Compliance with variance, specialized process, and HACCP plan										<input type="checkbox"/>	<input type="checkbox"/>	5

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES

OUT=not in compliance COS=corrected on-site during inspection R=repeat (violation of the same code provision)					Compliance Status			Compliance Status		
					OUT			OUT		
					Safe Food and Water			Utensils and Equipment		
28					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
29					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	2
30					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
					Food Temperature Control			Physical Facilities		
31					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	2
32					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
33					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
34					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
					Food Identification			Administrative Items		
35					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
					Prevention of Food Contamination			Compliance Status		
36					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	2
37					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
38					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
39					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
40					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
					Proper Use of Utensils			Non-Smokers Protection Act		
41					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
42					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
43					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1
44					<input checked="" type="radio"/>			<input checked="" type="radio"/>	<input type="radio"/>	1

Failure 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 manner 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 this report. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.

Signature of Person In Charge [Signature] Date 03/15/2022 Signature of Environmental Health Specialist [Signature] Date 03/15/2022

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

Establishment Number #: 605215299

Smoking observed where smoking is prohibited by the Act.

Temperature (Fahrenheit)

Temperature (Fahrenheit)

Temperature (Fahrenheit)

38

36

38

41

138

136

138

Observed Violations**Total #** 6**Repeated #** 0

37:

41:

47:

51:

53:

54:

TENNESSEE DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
FOOD INSPECTION DATA



Establishment Information

Establishment Name: Forbidden City

Establishment Number : 605215299

Comments/Other Observations

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***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.

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Establishment Number : 605215299

Comments/Other Observations (cont'd)**Additional Comments (cont'd)*****See last page for additional comments.***

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Sources

Source Type: Source:

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Source Type: Source:

Additional Comments

Violations 6, 13, 19, 20, 21, 22, 26 were corrected today. Observed proper handwashing, food storage appears proper, hot and cold holding temperatures are within range, food is properly date marked, logs and operating procedures reviewed for time as a public health control, and all toxics are properly labeled in spray bottles.