TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

5	ACRN .	Ł,	15		FOOD SER	VICE ESTA		131		-		131	LO						
N.	iii iii	744	S. Car																
Eet	shiel	hmen	t Nar		Penn Station Subs										Fermer's Merket Food Unit Sermanent O Mobile	g			
	iress				5241 Hwy 153					_	Тур	xe of E	Establi	ishme	O Temporary O Seasonal				
		,			Hixson	Time in	03	۲·U	0 F	- 					ut 03:10; PM AM / PM				
City								5.0			-			me o	UE 00.10; 111 AM/PM				
		on Da			09/30/2021 Establishmen				-		-	d 0			l				
Puŋ	pose	of In	spec	tion	O Routine	O Complaint			O Pro	elimin	ary		C	Cor	nsuitation/Other			01	
Risi	k Cat	tegor		a rat	O1 X2	O3	behr		04	at c	-	onb			up Required O Yes 🗮 No d to the Centers for Disease Conti	Number of S		81	
															control measures to prevent illne				
		(14)	urik de	alona											INTERVENTIONS such item as applicable. Deduct points for c	ategory or subcate	morry.)		
IN	⊨in c	ompii			OUT=not in compliance NA=not applicat										spection R=repeat (violation of the	e same code provisio	xn)		
	-	our	NA	100	Compliance Status Supervision		cos	R	WT						Compliance Status Cooking and Reheating of Time/		cos	R	WT
	in E	001	NA	NO	Person in charge present, demonstrate	es knowledge, and	0		-		IN	OUT	NA	NO	Control For Safety (TCS)				
1		-	NA	NO	performs duties Employee Healt	h	0	0	5		凉 0	0	0		Proper cooking time and temperatures Proper reheating procedures for hot hold	ina	0	응	5
	26	0			Management and food employee awar	reness; reporting		0	5	-	IN	оит		NO	Cooling and Holding, Date Marking			-	
3	8	O OUT	NA	NO	Proper use of restriction and exclusion Good Hygienic Pract		0	0	·	19	0	0	0		a Public Health Centre Proper cooling time and temperature	61	0		
4	X	0	nuA.	0	Proper eating, tasting, drinking, or toba	ecco use		0	5	19	0	0	0		Proper hot holding temperatures		0	0	
5	高 IN		NA		No discharge from eyes, nose, and mo Preventing Contamination		0	0	-		14	8	8	0	Proper cold holding temperatures Proper date marking and disposition		0	읭	5
6	×			_	Hands clean and properly washed No bare hand contact with ready-to-ea	t foods or approved	_	0	5	22	0	0	×	0	Time as a public health control: procedur	res and records	0	0	
7	邕	0	0	0	alternate procedures followed		0	0	_		IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and	under etc.d		-	
	IN	OUT	NA	_	Handwashing sinks properly supplied a Approved Source	accessible			-	23		0	黛		food		0	0	4
	黨		0		Food obtained from approved source Food received at proper temperature		8	0			IN	OUT	NA	NO					
11	×	0			Food in good condition, safe, and unac Required records available: shell stock		0	0	5	24		0			Pasteurized foods used; prohibited foods	s not offered	0	0	•
12	0	0	X	0	destruction Protection from Contar		0	0		25	IN O	OUT	NA	NO	Chemicals Food additives: approved and properly u	cod	0	0	
13	X	0	0	- NO	Food separated and protected			0			嵐	0		·	Toxic substances properly identified, sto	red, used	ŏ		5
	_	0	0		Food-contact surfaces: cleaned and sa Proper disposition of unsafe food, return		0		5		IN		NA	NO	Conformance with Approved P Compliance with variance, specialized pr		_		
15	黛	0			served		0	0	2	27	0	0	8		HACCP plan		0	0	5
				Goo	d Retail Practices are prevention	re measures to co	ntro	l the	intr	oduc	tion	of p	atho	geni	s, chemicals, and physical object	s into foods.			
				011	T=not in compliance	COS=corre			э г .\				3		R-repeat (violation of the sam	(acisto any size)			
			_		Compliance Status	003-0016		R		É					Compliance Status		COS	R	WT
	8		Past		Safe Food and Water d eggs used where required		0	0	1	4	_	UT K	ood a	nd no	Utensils and Equipment onfood-contact surfaces cleanable, proper	ly designed,	0	0	1
_	9 10				ice from approved source btained for specialized processing met	hods	8	0	2			~ 0			and used		-	\rightarrow	
		OUT	_		Food Temperature Contro				_	4	_	_			ng facilities, installed, maintained, used, te ntact surfaces clean	st strips	0	0	1
3	11	0	cont		oling methods used; adequate equipme	nt for temperature	0	0	2	4	_	UT	omoo	G-COI	Physical Facilities		0		1
	2				properly cooked for hot holding thawing methods used		8	0	1	4	_	-			5 water available; adequate pressure stalled; proper backflow devices		8	응	2
	4	0	<u> </u>		eters provided and accurate		ō	ō	1	5	0 0	o s	iewag	e and	i waste water properly disposed		0	0	2
	5	OUT	Ease	10000	Food identification erly labeled; original container; required	i monorie available	0	0	1	5	_	_			es: properly constructed, supplied, cleane use properly disposed; facilities maintaine		0 0	0	1
-		OUT	- 000	, prop	Prevention of Feed Contamin		Ľ	-	-	5	_	_			ilities installed, maintained, and clean			8	1
3	6	0	Inse	cts, ro	dents, and animals not present		0	0	2	5		-			entilation and lighting; designated areas us	sed	0	0	1
3	7	0	Cont	amina	ition prevented during food preparation,	, storage & display	0	0	1		0	UT			Administrative Items				
-	8	0	Pers	onal o	leanliness		0	0	1	5					nit posted		0		0
	9 0				ths; properly used and stored ruits and vegetables		8	0	1	5	6 (0 [N	lost re	cent	Compliance Status		O YES		-
		OUT			Proper Use of Utensils										Non-Smokers Protection			-	
4	1	0	Uten	sils, e	nsils; properly stored quipment and linens; properly stored, d		0	0	1	5	8	T	obacc	o pro	with TN Non-Smoker Protection Act oducts offered for sale		<u>Ж</u> О	0	0
	3 4				/single-service articles; properly stored ed properly	, used		8		5	9]	lf	tobac	co pr	roducts are sold, NSPA survey completed		0	0	
															Repeated violation of an identical risk factor				
man	ner a	nd po		most	recent inspection report in a conspicuous n	nanner. You have the rig	the to r	eques							ie. You are required to post the food service e filing a written request with the Commissioner				
repo	et. T	5	sectio	>	14-703, 58-14-706, 68-14-708, 68-14-709, 68-1						-1		а		A			_ ·	
_			1	-	+1	09/3	30/2	_			(JR.	H	-	I	C)9/3	0/2	_
Sig	natu	re of	Pers	on In	Charge			[Date	Sig	natu	ire of	Envir	onme	ental Health Specialist				Date

Signature of Person In Charge

SCORE

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

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Establishment Name: Penn Station Subs Establishment Number #: 605223979

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	Sanitizer Type	PPM	Temperature (Fahrenheit)								

Equipment Temperature								
Decoription	Temperature (Fahrenheit)							

ecoription	State of Food	Temperature (Fahrenheit

otal # 4 epeated # 0 3: 5: 9:	Observed Violations		
epeated # 0 3: 5: 9:	Total # 1		
3: 5: 9:	Repeated # 0		
5: 9:			
9:	JJ.		
	+5:		
3:	19:		
	53:		

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Establishment Name: Penn Station Subs Establishment Number : 605223979

Comments/Other Observations	

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.

Establishment Information

Establishment Name: Penn Station Subs

Establishment Number : 605223979

Comments/Other Observations (cont'd)

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

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Sources		
Source Type:	Source:	

Additional Comments