

Establishment Name

Inspection Date

Purpose of Inspection

Address

# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Type of Establishment

Permanent O Mobile

O Yes 疑 No

O Temporary O Seasonal

SCORE

Signal Mtn. City

517 Subs

**K**Routine

Time in 12:40 PM AM / PM Time out 01:30: PM AM / PM

08/10/2022 Establishment # 605167605 Embargoed 0

O Complaint

O Follow-up

1238 TAFT HWY Suite 184

O Preliminary O Consultation/Other

Risk Category О3 Follow-up Required

Number of Seats 50

#### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	<b>e</b> in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	id		С
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	盔	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	$\exists x$	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	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	
	IN	OUT	NA	NO	Proventing 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 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	
11	×	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	黨		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- 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	Proper cooking time and temperatures	0	0	5
17	0	0	0	333	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		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	<b>X</b>		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 HACCP plan	0	0	5

### s, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	W
	OUT	Caro rocc and comes	_		_
28	0	Pasteurized eggs used where required	0	0	1
29	0		0	0	12
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control		_	
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	2
32	0	Plant food properly cooked for hot holding	0	0	1
33	0	Approved thawing methods used	0	0	,
34	0	Thermometers provided and accurate	0	0	1
	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	r
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	Γ.
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	,
43	0		0	0	r
44		Gloves used properly	0	0	

pecti		R-repeat (violation of the same code provision)  Compliance Status	COS	R	W
	OUT	Utensiis and Equipment	000		
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	0	-:
49	0	Plumbing installed; proper backflow devices	0	0	-:
50	0	Sewage and waste water properly disposed	0	0	- 3
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	١.
53	2%	Physical facilities installed, maintained, and clean	0	0	-
54	0	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items			
55	0	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	_ '
		Compliance Status	YES	NO	8
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 100	0	
58		Tobacco products offered for sale	0	0	١.
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request a h in (10) days of the date of the

08/10/2022

Date Signature of E nvironmental Health Specialist 08/10/2022 Date

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

#### TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Esta	ablis	hment	Inform	nation

Establishment Name: 517 Subs

Establishment Number # | 605167605

NSPA Survey –	To be completed	d 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 ( Fahrenhelt)
Three compartment sink	Chlorine	100	

Equipment Temperature				
Description	Temperature (Fahrenheit)			

Food Temperature		
Description	State of Food	Temperature ( Fahrenheit
Sliced tomatoes-walk in	Cold Holding	41
Deli roast beef-walk in	Cold Holding	40
Deli turkey-walk in	Cold Holding	40
Tuna salad-cold drawer	Cold Holding	34
Deli turkey-small prep	Cold Holding	40
Deli roast beef-small prep	Cold Holding	40
Meat balls	Hot Holding	160
Sliced tomatoes-large prep	Cold Holding	38
Macaroni salad-merch unit	Cold Holding	40

Observed Violations
Total # 1
Repeated # 0
53: Several ceiling tiles are missing behind prep area. Also, cove base (between
floor and wall) is missing in several areas throughout kitchen- by small prep unit,
by mens restroom, in back by freezer. Replace missing cove base and ceiling
tiles. Note: ceiling tiles are removed as part of minor electrical work.

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

# TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



### Establishment Information

Establishment Name: 517 Subs Establishment Number: 605167605

## 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: (IN) Observed proper handwashing by employees.
- 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: (IN) 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: No raw animal product in kitchen
- 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: Soups properly cooling in walk in
- 19: (IN) Hot holding temperatures are held at 135F or above
- 20: (IN) Cold holding temperatures are held at 41F or below
- 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:

## 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.

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stablishment Name: 517 Subs		
Establishment Number: 605167605		
Comments/Other Observations (cont'd)		
Additional Comments (cont'd)		
See last page for additional comments.		

Establishment Information

Establishment Infor	Charles III and III		
Establishment Name: 5 Establishment Number #			
Establishment Number #;	605167605		
Sources			
Source Type:	Food	Source:	Gordon
Source Type:	Water	Source:	Water is from approved source
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

**Additional Comments**