### **TENNESSEE DEPARTMENT OF HEALTH** FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

63.48

A TATA				FOOD SERVICE ESTABLISHMENT INSPECTION REPORT										SC	SCORE								
12																							
-					RED FISH - KITCHEN Type of Establishment O Mobile										r								
Establishment Name												L	J										
Addr	855									11	<u>ا ، ۲</u>							-	ary O Seaso				
City					Arlington         Time in         11:50, AM         AM / PM         Time out         12:40; PM         AM / PM           07/06/2023         Establishment #         605260522         Embergoed         0         0																		
Inspe							-					_			d C					_ L			
			specti		Routine	,	O Follow-u	1p	O Complaint			O Pr	elimi	nary				nsultation/Other				00	
Risk	Cat				O1	ood prep	aration pr	actices and	O3 employee	beh	vior	04 3 mk	at c	omr	nonh			sh	O Yes 🕱 s for Diseas		Seats ation	00	
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.																							
		(11)	uric des	Ignet	ed compile	ince statu												INTERVENTIO		ints for category or subca	legory.	)	
IN-	in ci	ompi	ance		OUT=not in		ce NA=not a liance Stat		NO=not observ		R		)\$=cc	mecte	id on-s	site dur	ing ins	spection Complia	R=repeat (viola	tion of the same code provis	sion)	R	WT
	IN	ουτ	NA	NO			Supervis							IN	OUT	NA	NO	Cooking and	Reheating of	Time/Temperature			
1	×	0			Person in performs (		resent, demor	nstrates know	ledge, and	0	0	5		3 23	0	0	0	Proper cooking tir		(TCS) Foods atures	0	8	
2			NA	NO	Managem	ent and fo	Employee ood employee	Health awareness; I	reporting	0	0	_	17	0	0	×		Proper reheating		hot holding Marking, and Time as	_	0	9
	×	0			Proper us	e of restri	ction and exc	lusion		0	0	5		IN	OUT	NA	NO		Public Health	h Control			
4	IN K	OUT O	NA	NO O	Proper ea		d Hyglenic ng. drinking, c	Practices or tobacco use	,	0	0			0	0	8	_	Proper cooling tin Proper hot holding			0	0	
	N IN	0	NA	0	No discha	irge from (	eyes, nose, a			ō	0	5	20		0	0		Proper cold holdin Proper date mark	ng temperature	5	8	0	5
-	X	0		_	Hands cle	an and pr	roperly washe			0	-	5		2 22	0	0				procedures and records	0	0	
	×	0	•	0	alternate p	procedure	s followed	plied and aco		0	0			IN	OUT	_	NO		Consumer Ad	raw and undercooked			
	N 家	<u>õ</u>	NA	NO			Approved 8 approved so	Source			0	-	23	3 💢	0	O NA	NO	food	Susceptible		0	0	4
10	K		0		Food rece	eived at pr	oper tempera			°	00	5	24	-	0	88			•	ed foods not offered	0	0	5
-	0	0	×	0		records a		i stock tags, p		6	0	Ť	h	IN	OUT	NA	NO		Chemics	ulo -	H		
	IN S	OUT	NA	NO		Protec	tion from C d protected	ontaminatio	n		0	4	25	0	8	X	<del> </del>	Food additives: a			0	8	5
14	Ň	ŏ	ŏ		Food-cont	tact surfac	ces: cleaned a			ŏ	ŏ	5		IN	OUT	NA	NO	Conformar	ice with App	fied, stored, used roved Procedures	Ľ		
15	2	0			Proper dis served	sposition of	of unsafe food	d, returned foo	d not re-	0	0	2	27	r o	0	黨		Compliance with HACCP plan	variance, speci	alized process, and	0	0	5
				Goo	d Retail	Practice	es are prev	rentive mea	sures to co	ontro	l the	intr	odu	ctio	of p	atho	gens	s, chemicals, a	nd physical	objects into foods.			
															TICE	8							
	_			00	T=not in con	Comp	liance Stat		COS=com	cted o	R R	during WT	insp L					Comp	liance Statu		COS	R	WT
28	-	001		urize	d eggs us		eed and Wa required	iter		0	0	1	E		NUT K	ood a	nd no		and Equipm	ent e, properly designed,	0	0	
29	_				ice from a obtained fo		source red processin	g methods		8	00	2	$\vdash$	+	C			and used	d maintained	used test string	0	0	
		OUT	_	r cor			adequate equ	control uipment for te	mperature									ig facilities, installe ntact surfaces clea		used, wst sinps	0	0	1
31		0	contro	l			hot holding			0	0	2		(	TUC	lat an	d cold	Physi 5 water available; a	cal Facilities		0		0
32		0	Appro	ved	thawing m	ethods us	ed			0	0	1		9	🚊 F	Numbi	ng ins	stalled; proper bac	know devices	ure	0	0	2
34	_	O OUT		nome	eters provid		identificati	on		0	0	1			-			d waste water prop es: properly constr		i, cleaned	00		2
35	_	×	Food	prop	,			quired record	s available	0	0	1			-		·	use properly dispo	-		0	0	1
36	-	OUT X	Insect	5 10			f Food Cont not present	amination		0	0	2		_				ilities installed, ma entilation and lightir			0	0	1
37	+	~ 22	-	-				ration, storag	o & display	0	0	1	F	-	от Г	- and an			istrative item		Ť	_	
38	_		_		leanliness		O 1000 bieba	nation, arriag	e u uspay	6	0	1	5			Jurren	t pern	nit posted		-	0	0	_
39 40	_				ths; proper ruits and v					0	0							inspection posted	iance Status		O YES	0	WT
		OUT				Proper	Use of Uter	nolla				_	b	57		Samuel			mokers Prot	ection Act		_	
41	:	0	Utens	ils, e	quipment a	and linens	s; properly sto	ored, dried, ha	ndled	0	00	1	5	3		obacc	o pro	oducts offered for s	ale		000	š	0
43	_				/single-ser ed properly		les; properly s	sored, used		8	8		Ŀ	NØ	n	10080	.co pr	roducts are sold, N	SPA survey co	An preved	10	0	
																				sk factor may result in revo service establishment perm			
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, 68-14-708, 68-14-709, 68-14-719, 78-14-719, 78-14-7																							
		ر	$\geq$	<	T				07/0			3			(			MSZ			07/0	)6/2	2023
Sign	atur	re of	Perso	n In	Charge							Date	Si	gnat	ure of	Envir	onme	ental Health Spec	ialist				Date
_								<i>P</i>							-		-	ealth/article/eh-		***			
PH-2	267	(Rev.	6-15)				Free 100	a sarety tra	ining classe	s are	ava	nable	ead	n m	onth	at the	: 000	unty health depa	irament.			RC	XA 629

67 (Rev. 6-15)	Free food safety training cia:			
or (nev. o- to)	Please call (	) 9012229200	to sign-up for a class.	
		,		

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



# Establishment Information Establishment Name: RED FISH - KITCHEN Establishment Number #: [605260522

NSPA Survey – To be completed if #57 is "No"	
norreality reaction precedention in	
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.	No
Age-restricted venue does not require each person attempting to gain entry to submit acceptable form of identification.	No
"No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	No
Garage type doors in non-enclosed areas are not completely open.	No
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	No
Smoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.	No
Smoking observed where smoking is prohibited by the Act.	No

Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)					
3 comp sink / dishmachine	QA / CI							

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Walk in cooler	40				
Walk in freezer	21				
Reach in coolers	40				
Reach in cooler	35				

Food Temperature					
Description	State of Food	Temperature (Fahrenheit)			
Soup	Cold Holding	151			
Rice	Hot Holding	155			

#### Observed Violations

Total # 12 Repeated # 0

8: (IN): All handsinks are properly equipped and conveniently located for food employee use.

35: Label all the food containers in kitchen

36: Repair the back exit door and screen to protect outer openings, etc

37: Place all opened food bags in containers with lids , etc

43: Keep the boxes of forks / spoons covered near the front door , keep the to go containers stacked right side down on shelf of cook line , etc

45: Replace the cutting boards , too many grooves in them

46: Provide test strips for 3 comp, sink and dishmachine

47: Clean top area of dishmachine

49: Provide an air gap on the cola fountain ice bin in kitchen

53: Clean the floors , walls , ceiling , cooking equipment , ventahood and filters , etc ,

54: Replace missing light shields in kitchen area.

55: Please post food permits

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



#### Establishment Information

Establishment Name: RED FISH - KITCHEN Establishment Number : 605260522

Comments/Other Observations		
D: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 6: 7: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 8: 9: 1: 7: 8: 9: 1: 7: 8: 9: 1: 7: 8: 9: 1: 7: 8: 9: 1: 7: 8: 9: 1: 7: 8: 9: 1: 7: 7: 7: 8: 9: 1: 7: 7: 8: 9: 7: 7: 7: 8: 9: 7: 7: 7: 7: 7: 7: 7: 7: 7: 7		
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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.

## Establishment Information

Establishment Name: RED FISH - KITCHEN

Establishment Number: 605260522

Comments/Other Observations (cont'd)

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

#### Establishment Information

Establishment Name: RED FISH - KITCHEN

Establishment Number # 605260522

Sources			
Source Type:	Food	Source:	PFG , Sysco , and Fresh Foods , etc
Source Type:		Source:	

## Additional Comments

Please post new permit , know operation of dishmachine , etc , food temps good , no cool process , etc ,