TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

No.						FOOD SER	VICE ESTA	BL	ISH	ME	IN1	r IN	ISF	PEC	TI	ON REPORT	sco	RE		
100		H.H.	T. S. C.													6 S				
Esta	abisi	hmen	t Nan	ne	Arby's #750	C						Turr	o of f	Establi	ie litom o	C Farmer's Market Food Unit @ Permanent O Mobile	9		5	
Address 5420 Brainerd Rd.							1.25	eoit	-510101	ISH ING	O Temporary O Seasonal									
City Chattanooga Time in			02	2:3	4 F	M	AJ	1/P	M Th	me o	ut 03:07:PM AM/PM									
Insp	ectio	n Da	rte		07/19/20	23 Establishment	60504923	3			Emba	irgoe	d <u>1</u>							
Ρυη	pose	of In	spect	ion	Routine	O Follow-up	O Complaint			O Pro	limin	ary		c	Cor	nsuitation/Other				
Risi	Cat	legor			01	3 82	O 3			O 4	_		_			-up Required 邕 Yes O No	Number of S	ieats	68	
		_		as c	ontributing fac	eparation practice tors in foodborne	illness outbreak	s. P	ublic	s mo ; Hea	at co uith i	Inter	ven	tions	are	d to the Centers for Disease Cont control measures to prevent illn	sss or injury.	tion		
		(Me	ırk de	lgnet	ted compliance stat											I INTERVENTIONS such item as applicable. Deduct points for	category or subcate	gery.	1	
IN	⊨in c	ompii			OUT=not in complia	ance NA=not applicable		ed		co						spection R=repeat (violation of th	e same code provisi	on)		14/7
	IN	OUT	NA	NO	Con	Supervision		1005	R		h	IN	010	NA	NO	Compliance Status Cooking and Reheating of Time		005	~	WT
1	黨	0	-		Person in charge performs duties	present, demonstrates	s knowledge, and	0	0	5	16	0	0			Control For Safety (TCS) Proper cooking time and temperatures	Foods	0	0	
2	IN XX		NA	NO		Employee Health					17		ŏ	ŏ	Â	Proper reheating procedures for hot hok		ŏ	00	5
3	Â	0				triction and exclusion	ress, reporting	ŏ	ō	5		IN	ουτ	NA	NO	Cooling and Holding, Date Markin a Public Health Contr				
4	IN	OUT O	NA			ood Hygionic Practi- sting, drinking, or tobac					18 19	00	0 惑	0		Proper cooling time and temperature Proper hot holding temperatures		0		
5		0		0	No discharge from	meyes, nose, and mou	ιth	ŏ	0	5	20	25	0	0		Proper cold holding temperatures		0	0	5
6	IN XX	001	NA		Prevent Hands clean and	ting Contamination properly washed	by Hands	0	0	_		<u>×</u>	0	0	-	Proper date marking and disposition		0		•
7	×	0	0	0		ntact with ready-to-eat	foods or approved	0	ō	5	22	O IN	O	NA		Time as a public health control: procedu Consumer Advisory		0	0	
8	×	0		110		ks properly supplied an		0	0	2	23	0	0	12	no	Consumer advisory provided for raw an		0	0	4
	嵩	0	NA			Approved Source orm approved source		0	0			IN	OUT		NO	food Highly Susceptible Popul	rtions			
10 11	0	00	0	×		proper temperature dition, safe, and unadu	ilterated	8	00	5	24	0	0	Ж		Pasteurized foods used; prohibited food	s not offered	0	0	5
12	0	0	×	0	Required records destruction	available: shell stock t	tags, parasite	0	0			IN	OUT	NA	NO	Chemicals			_	
43		OUT	NA	NO	Prote Food separated a	ection from Contam	ination				25	0 笑	0	X		Food additives: approved and properly of		0		5
	X		ŏ			faces: cleaned and san	nitized	ŏ		5	20	IN		NA	NO	Toxic substances properly identified, sto Conformance with Approved		-	-	
15	X	0			Proper disposition served	n of unsafe food, return	red food not re-	0	0	2	27	0	0	×		Compliance with variance, specialized p HACCP plan	rocess, and	0	0	5
_	_										_	41				s, chemicals, and physical object	- late facts			
				900		ces are preventive	e measures to co			ar/Al					gena	s, chemicals, and physical object	s into foods.			
				00	T=not in compliance		COS=corre	cted o	n-site	during			IGR	•		R-repeat (violation of the sar				
		OUT				Food and Water		COS	R	WT	H	0	UT			Compliance Status Utensils and Equipment		COS	R	WT
2	8 9				ed eggs used when lice from approve				8		4	5 8				onfood-contact surfaces cleanable, prope and used	fly designed,	0	0	1
_	0	0	Varia		obtained for specia	alized processing method		ŏ	ŏ	1	4	5 6				g facilities, installed, maintained, used, to	est strins	0	0	1
		OUT	_	er co		emperature Control d; adequate equipment				_	4		-			ntact surfaces clean		0	0	1
3		0	contr	ol			c for competence	0	0	2		0	UT			Physical Facilities				
-	23				properly cooked fi thawing methods			8	8	1	4	_				d water available; adequate pressure stalled; proper backflow devices		00	윙	2
	4	0	Then		eters provided and	i accurate		0	0	1	5	0 0	o s	ewage	e and	d waste water properly disposed		0	0	2
	_	OUT				d identification	and a second second second			_	5	_				es: properly constructed, supplied, cleane			0	1
3	5	000	F000	prop		al container; required r		0	0	1	5		-	-	·	use properly disposed; facilities maintain ilities installed, maintained, and clean	NG	0	0	1
3	6	-	Insec	ts, ro	dents, and animal			0	0	2	5	_				entilation and lighting; designated areas u	sed	ō	0	1
3	7	22	Cont	amina	ation prevented du	ring food preparation,	storage & display	0	0	1	F	0	υт			Administrative items				
3	8	0	Pers	onal o	leanliness			0	0	1	5		0	Jurrient	t pern	mit posted		0		0
_	9 0			- N	ths; properly used ruits and vegetable			0	8	1	54	5 (D N	fost re	cent	inspection posted Compliance Status		O YES		WT
		OUT			Prope	or Use of Utensils				-						Non-Smokers Protection	Act			
4	12				nsils; properly stor outpment and line	ed ns; properly stored, dri	ied handled	8	<u> </u>	1	5					with TN Non-Smoker Protection Act oducts offered for sale		X	읭	0
- 4	3	0	Singl	e-use	single-service art	ticles; properly stored, un	used	Ō	0	1	5	5				roducts are sold, NSPA survey complete	i i	ŏ		Ť
	4				ed properly				0	_										-
	ice e	stablis	shmen	t perm	nit. Items identified a	as constituting imminent	health hazards shall b	e corre	cted is	mmedi	ately	or ope	ration	is shall	l ceas	Repeated violation of an identical risk factorie. You are required to post the food service	establishment permit	t in a c	onspi	icuous
man repo	nera n. T.	nd po C.A.	st the section	most 15 /8-		port in a conspicuous ma I-14-708, 68-14-709, 68-14-				t a her	ring r	egard	ing th	is repo	rt by f	filing a written request with the Commissione	within ten (10) days	of the	date	of this
	~	Ke	\leq	Ł	A & e		07/1	19/2	023	3		<	<	_	-		()7/1	9/2	2023
Signature of Person In Charge						Date	Sig	natu	re of	Envir	onme	ental Health Specialist				Date				

Signature of	Person I	in Charge
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**** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foo	dservice	****
Free feed cafety training elected are available each month at the county health denote	aant	

PH-2267 (Rev. 6-15)	Free food safety training class	RDA 629		
1192201 (1007. 0-10)	Please call () 4232098110	to sign-up for a class.	104.025

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Arby's #750 Establishment Number #: 605049233

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)				
Triple sink	Quaternary	150					

Equipment Temperature							
Description	Temperature (Fahrenheit)						

Food Temperature Decoription	State of Food	Temperature (Fahrenheit
Shredded lettuce	Cold Holding	38
Sliced tomatoes	Cold Holding	38
Burgers	Cold Holding	37
Sliced meats	Cold Holding	38
Meats cooler	Cold Holding	34

Observed Vielations
Observed Violations

Total # 3

Repeated # ()

19: Meat on slicer 100, piece of beef not very big Probably no heat reaching meat when it gets this small, new one added was 165

37: Cutting board at prep station badly scorred will need to resurface or replace

45: Cutting board scoored not able to clean and sanitize

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Establishment Name: Arby's #750

Establishment Number : 605049233

Comments/Other Observations

1: (IN): ANSI Certified Manager present.

2: Posted

- 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:

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:

- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (NÁ) Shell stock not used and parasite destruction not required at this establishment.
- 13: (IN) All raw animal food is separated and protected as required.
- 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: Not cooking

17: (NO) No TCS foods reheated during inspection.

18: Not cooling

20: Food held below 41

- 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:

***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.

Establishment Information

Establishment Name: Arby's #750

Establishment Number : 605049233

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Arby's #750 Establishment Number #: 605049233

SourcesSource Type:FoodSource:McClainSource Type:Source:Source:Source Type:Source:Source:Source Type:Source:Source:Source Type:Source:Source:

Additional Comments

Do not block soap dispenser for up front sink with bread rack