

Risk Category

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TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

	Snow Daze				O Fermer's Market Food Unit			1 4) (
Establishment Name	OOFO Dellassi Didas Da	Type of E	stablishment	O Permanent	O Mobile		┖╵	/ \	
Address	9050 Belleau Ridge Dr.				 Temporary 	O Seasonal	ı —		
City	Ooltewah	Time in 01:	30 PM AM/PN	/ Time out	02:45 PM	AM / PM			
Inspection Date	08/25/2021 Establishment #	605258044	Embargoed						
Purpose of Inspection	Routine O Follow-up	O Complaint	O Preliminary	O Consult	Itation/Other				

Follow-up Required

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS T, HA, HO) for each numbered item. For Items marked OUT, mark COS or R for each item as applicable. status (IN, OUT, NA, NO) for each numbered Item. For Items m

10	¥ =in c	omplii	ance		OUT=not in compliance NA=not applicable NO=not observ	ed		0	05=0
					Compliance Status	COS	R	WT	ΙC
	IN	OUT	NA	NO	Supervision				П
1	盔	٥			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	-
	IN	OUT	NA	NO	Employee Health				Ιŀ
2	$\mathbb{R}^{\mathbb{C}}$	0			Management and food employee awareness; reporting	0	0		ΙГ
3	×	0			Proper use of restriction and exclusion	0	0	5	П
	IN	OUT	NA	NO	Good Hygienic Practices	\Box			1 17
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0		1 17
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	l °	2
	IN	OUT	NA	NO	Preventing Contamination by Hands				1 17
6	黨	0		0	Hands clean and properly washed	0	0		[2
7	鼷	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	H
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2	1 7
	IN	OUT	NA	NO	Approved Source				Ľ
9	黨	0			Food obtained from approved source	0	0		
10	0	0	0	×	Food received at proper temperature	0	0	1	ΙŒ
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	ΙĽ
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0		
	IN	OUT	NA	NO	Protection from Contamination				1 [2
13	0	0	窳		Food separated and protected	0	0	4	1 2
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	[2

02

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					Compliance Status	COS	R	WT	
	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods				
16	0	0	×	0	Proper cooking time and temperatures	0	0	5	
17	0	0	300	0	Proper reheating procedures for hot holding	8	0	٠	
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control				
18		0	X	0	Proper cooling time and temperature	0	0		
19	0	0	文	0	Proper hot holding temperatures	0	0		
20	0	0	200		Proper cold holding temperatures	0	0	5	
21	0	0	380	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	×		Pasteurized foods used; prohibited foods not offered	0	0	5	
	IN	OUT	NA	NO	Chemicals	Chemicals			
25	0	0	3%		Food additives: approved and properly used	0	0	5	
26	2	0			Toxic substances properly identified, stored, used	0	0	9	
	IN	OUT	NA	NO	Conformance with Approved Procedures				
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5	

O Yes 🕱 No

R=repeat (violation of the same code provision)

s, chemicals, and physical objects into foods.

		OUT=not in compliance COS=con	ected or	1-site	du
		Compliance Status	cos		_
	OUT	Safe Food and Water		_	_
28	0	Pasteurized eggs used where required	0	0	г
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	<u> </u>
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	
34	0	Thermometers provided and accurate	0	0	г
	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	Г
39	0	Wiping cloths; properly used and stored	0	0	Ε.
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	Г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	Г
44	10	Gloves used properly	0	0	

pecti	on	R-repeat (violation of the same code provision		_	
		Compliance Status	cos	R	W
	OUT	Utensils and Equipment	_	_	_
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	- 2
50	0	Sewage and waste water properly disposed	0	0	- 2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	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	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 3%	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	0	

ture to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishm vice establishment permit, Items identified as constituting imminent health hazards shall be corrected immediately or operation ner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing rega art. 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. ithin ten (10) days of the date of th

08/25/2021

08/25/2021

Signature of Person In Charge

Date Signature of Environmental Health Specialist

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



Establishment Name: Snow Daze							
Establishment Number #: 605258044							
person attempting to gain entr	y to submit acceptable form	of identification.					
i-Smoking" symbol are not cor	nspicuously posted at every	entrance.					
re not completely open.							
ents in non-enclosed areas are	not completely removed o	r open.					
g into areas where smoking is	prohibited.						
ited by the Act.							
Sanitizer Type	PPM	Temperature (Fait	renhelt)				
Chlorine	50						
		Temperature / Eab	ranhalf)				
		•					
	State of Food	Temperature (Fah	renhelt)				
	if #57 is "No" estrict access to its buildings of person attempting to gain entransmoking symbol are not content completely open. ents in non-enclosed areas are ginto areas where smoking is ted by the Act.	if #57 is "No" estrict access to its buildings or facilities at all times to pe person attempting to gain entry to submit acceptable form i-Smoking" symbol are not conspicuously posted at every e not completely open. ents in non-enclosed areas are not completely removed o g into areas where smoking is prohibited. ted by the Act. Sanitizer Type PPM	if #57 is "No" estrict access to its buildings or facilities at all times to persons who are person attempting to gain entry to submit acceptable form of identification. in-Smoking" symbol are not conspicuously posted at every entrance. ie not completely open. ents in non-enclosed areas are not completely removed or open. g into areas where smoking is prohibited. ited by the Act. Sanitizer Type PPM Temperature (Fair Chlorine 50				

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Snow Daze
Establishment Number: 605258044

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 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: Proper hand washing observed.
- 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: Source approved.
- 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 food present.
- 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: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: (N.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: (NA) Establishment does not cold hold TCS foods.
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 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.

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

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Snow Daze				
Establishment Number: 605258044				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				
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Establishment Information

Establishment Information								
Establishment Name: Snow Daze								
Establishment Number # 605258044								
Sources								
Source Type:	Source:							
Source Type:	Source:							
Source Type:	Source:							
Source Type:	Source:							
Source Type:	Source:							
Additional Comments								