## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

	100	1	AN AN																	O Farmer's Market Food		۱٢	7		
Establishment Name			10									Type of Establishment Set Permanent O Mobile					1	1							
Addr	ess				853	0 Hix	Type of Establishment © Meckle     Type of Establishment © Meckle     O Temporary © Seasonal     AM / PM     Stablishment #   O Complaint   O Temporary © Seasonal     Stablishment #   O Complaint   O Preliminary   O Consultation/Other     Stablishment #   O Complaint   O Preliminary   O Consultation/Other     Stablishment #   O Complaint   O Preliminary   O Consultation/Other     Colspan="2">Complaint   O Presention practices and employee behaviors most commonly reported to the Centers for Disease Control and Praviate and the Control property and to the same code provide to the Centers for Disease Control and Praviate and the Control property and to the same code proceed on-site during inspection   Compliance Status     Compliance Status   Compliance Status     Compliance Status																		
City					Cha	ttano	oga				Time in	12	<u>2:4</u>	0 F	M	_ A)	/ PN	/ Tir	ne ou	л <u>01:10</u> : <u>РМ</u> А	M / PM				
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-			spect		<b>X</b> Rou			_			Complaint			-		-			Cor	sultation/Other					
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		R																		to the Centers for Dise	ase Control and Pr	evention			
				as c	ontri	puting	Tactor														event niness of inju	ıy.			
		(11	rk der	ignat	ed con	pliance	status														t points for category or s	ubcategor	<b>7.</b> )		
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												GOO	D R	ar.	L PR	ACT	ICES	;							
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4	_				ed proj							0	ŏ	1	-										
																				Repeated violation of an identic e. You are required to post the f					
manr	er a	nd po	st the	most	recent i	nspectio	n report	in a con	spicuous n		have the rig	ht to r	eques							lling a written request with the C					
	$\bigcap$	Y	F								09/0			1			<b>(</b> )		Þ	The second secon		09/	ע. ערגי	1201	21
Sicr	atre	re of	Pere	on In	Charg	e					09/0		-	Date	Si	nati	te of	Envir	onme	ental Health Specialist		09/	031		ate
- 91					- anang	,-		Addition	al food e	afety inform	ation can	be fo								ealth/article/eh-foodservi					
PH 2	267	Revi	6-15)				Ť			<i>P</i>	g classes	s are	avai	ilable	eac	h ma				inty health department.				RDA 6	120
1192	-01	wev.	~ 10)				- 1			ase call (		) 42	232	098	3110	n				o for a class.				1	123

PH-2267 (Rev. 6-15)	Free food safety training ck	RD		
1192201 (Nev. 0-10)	Please call (	) 4232098110	to sign-up for a class.	nde te

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



#### Establishment Information

Establishment Name: Subway #17034 Establishment Number #: 605100781

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)						
3 sink	Quat	300							

quipment l'emperature									
Description	Temperature ( Fahrenheit)								

Food Temperature					
Description	State of Food	Temperature (Fahrenheit)			
Tuna	Cold Holding	36			
Ham	Cold Holding	38			
Turkey	Cold Holding	40			
Cut toms	Cold Holding	41			
Shred lettuce	Cold Holding	41			
Cut spinach	Cold Holding	40			
Meatballs	Hot Holding	154			
Meatballs	Hot Holding	143			

	_
Observed Violations	
Total #	
Repeated # 0	
	_

45: Rusted shelves in reach in cooler.

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



#### Establishment Information

Establishment Name: Subway #17034

Establishment Number : 605100781

#### Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 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: Observed good hand washing

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: Approved

- 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: (NA) No raw animal foods served.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See recorded food temperatures
- 20: See recorded food temperatures
- 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: Subway #17034

Establishment Number : 605100781

Comments/Other Observations (cont'd)

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

# Establishment Information

Establishment Name: Subway #17034 Establishment Number # 605100781

Sources				
Source Type:	Water	Source:	Public	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

# Additional Comments