# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

663

		FOOD SER	VICE ESTA	BL	ISI	IM	EN'	TI	NSI	PEC	TIC	DN REPORT	SCO	RE		
PAULT C															7	
Establishment Name Mellow Mushroom O Fermer's Merket Food Unit Permanent O Mobile							/									
Address 2318 Lifestyle Way 0 Seasonal																
City Chattanooga Time in 02:22 PM AM / PM Time out 03:02; PM AM / PM																
Inspection Date	11/09/2	022 Establishment	60521977	0			Emb	argoe	e C	)						
Purpose of Inspect		O Follow-up	O Complaint			_	elimir				Cor	nsultation/Other				
Risk Category	<b>O</b> 1	882	03			<b>O</b> 4				Fo	low-	up Required O Yes 貿 No	Number of Se	eats	25	7
												to the Centers for Disease Contro control measures to prevent illner	ol and Prevent	ion		
		FOODBOR	INE ILLNESS RI	SK F	ACT	ors	AND	D PU	BLIC	HEA	LTH	INTERVENTIONS				
IN=in compliance	OUT=not in com				llem							ach Item as applicable. Deduct points for ca pection R=repeat (violation of the				
	c	ompliance Status	10 10 000		R	WT	ĨĒ	_	1			Compliance Status	1		R	WT
IN OUT NA		Supervision	inculates and		_			IN	ουτ	NA	NO	Cooking and Reheating of Time/T Control For Safety (TCS) Fo				
1 嵐 0	performs dutie	-	knowledge, and	0	0	5	16		0			Proper cooking time and temperatures		8	0	5
2 X O		Employee Health ind food employee awaren	ess; reporting	0	0		17	-	0			Proper reheating procedures for hot holdin Ceeling and Holding, Date Marking,		0	0	
3 岌 0	Proper use of	restriction and exclusion		0	0	5		IN	OUT		NO	a Public Health Contro				
IN OUT NA	NO Proper eating	Good Hygienic Practic tasting, drinking, or tobacc		0	0			0	0	8		Proper cooling time and temperature Proper hot holding temperatures		8		
5 嵐 0	O No discharge f	rom eyes, nose, and mout	h	ŏ		5	20	25	0	0		Proper cold holding temperatures		0	0	5
IN OUT NA 6 赏 O		enting Contamination I nd properly washed	by Hands	0	0			1		-		Proper date marking and disposition		0		-
7 20 0	o No bare hand	contact with ready-to-eat for	oods or approved	ō	o	5	22	-	0	0		Time as a public health control: procedure	is and records	٥	0	
8 🐹 0	Handwashing	dures followed sinks properly supplied an	d accessible		0	2	23		0	NA	NO	Consumer Advisory Consumer advisory provided for raw and	undercooked	0	0	-
IN OUT NA 9 🕱 O		Approved Source from approved source		0	0			IN	OUT		NO	food Highly Susceptible Populat	tions	~	-	_
10 0 0 0	S Food received	at proper temperature		0	0		24	-	0	80		Pasteurized foods used; prohibited foods		0	0	5
11 💢 0	Download const	ondition, safe, and unadul ds available: shell stock ta		0	0	5	Ē	-	-	-			IN OICE	~	~	
12 O O 😹 IN OUT NA	destruction	stection from Contami		0	0		-	IN	001	NA		Chemicals	4	0		
13 2 0 0		d and protected	sation	0	0	4	20	0	6			Food additives: approved and properly us Toxic substances properly identified, store		0		5
14 炭 0 0		urfaces: cleaned and sani		0	0	5		IN	OUT	NA	NO	Conformance with Approved Pr		_	_	
15 🔅 O Proper disposition of unsafe food, returned food not re- served Served Compliance with variance, specialized process, and HACCP plan						٥	0	5								
	Good Retail Pra	stices are preventive	measures to co	ontro	l the	int:	odu	ction	n of p	patho	gens	, chemicals, and physical objects	into foods.			
				GOO	DD R	ETA	IL PR	LACT	fice:	5						
	OUT=not in complian	ce Impliance Status	COS=com		R		; inspe	ection				R-repeat (violation of the same Compliance Status		cos	R	WT
OUT	51	fe Food and Water						0	TUK	_		Utensils and Equipment				
	urized eggs used w and ice from appro			8	00	1	4	5				nfood-contact surfaces cleanable, properly and used	/ designed,	0	0	1
30 O Varia		cialized processing metho Temperature Control	ds	Ō	0	1	4	6	18 V	Narew	ashin	g facilities, installed, maintained, used, tes	t strips	0	0	1
		sed; adequate equipment	for temperature	0	0	2	4	7	•	Vonfoo	d-cor	tact surfaces clean		0	0	1
contro	-	d fac hat half a a	-					_	TUK		e e e l e	Physical Facilities		~		
	food properly cooke ved thawing methor			8	8	1	_	_	-			water available; adequate pressure talled; proper backflow devices		8	허	2
	nometers provided a			0	0	1						waste water properly disposed			0	2
35 O Food		ood identification	and a second above		0			_				<ul> <li>properly constructed, supplied, cleaned</li> <li>properly dispaced, facilities, maintained</li> </ul>			0	1
35 O Food		ginal container; required re on of Food Contaminat		0	0	1			-	-		use properly disposed; facilities maintained ities installed, maintained, and clean	,	0	0	1
	s, rodents, and anir			0	0	2	. –	_	_			ntilation and lighting; designated areas use	ed	ŏ	ŏ	1
37 O Conta	mination prevented	during food preparation, s	torage & display	0	0	1		4	TUK			Administrative items				
	nal cleanliness			0	0	1					-	nit posted		0	0	0
	g cloths; properly us ing fruits and veget			8	0		5	6	0 1	vlost re	cent	Compliance Status		O YES		WT
OUT	Pro	per Use of Utensils				-						Non-Smokers Protection A	ct			
	utensils; properly s ils_equipment and l	tored inens; properly stored, drie	d bandled	8	0			7 8				with TN Non-Smoker Protection Act ducts offered for sale		8	읭	0
43 O Single	-use/single-service	articles; properly stored, une		0	0	1	Ŀ	š				oducts onered for sale oducts are sold, NSPA survey completed		ŏ	ŏ	Ť
44 O Gloves used properly O O 1																
service establishmen	permit. Items identifie	d as constituting imminent h	ealth hazards shall b	e com	icted i	immed	liately	or op	eratio	ns shal	ceas	Repeated violation of an identical risk factor r e. You are required to post the food service es	tablishment permit	in a c	onspi	icuous
		report in a conspicuous mar 68-14-708, 68-14-709, 68-14-7				st a he	aring	regard	ting th	vis repo	rt by f	iling a written request with the Commissioner v	within ten (10) days	of the	date	of this

am	11/09/2022		11/09/2022				
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 ****							
	Erectional colory training classes are available	each month at the county health department					

	Erec feed cofety training els	acces are available cash me	nth at the county health department.	
PH-2267 (Rev. 6-15)	Free food safety training ck	RDA 629		
( in the set of the se	Please call (	) 4232098110	to sign-up for a class.	1001020
		,	<b>V</b> 1	

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



#### Establishment Information

Establishment Name: Mellow Mushroom Establishment Number #: 605219770

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature ( Fahrenheit)				
Dish machine Triple sink	Chlorine QA	50 0					

Equipment l'emperature								
Description	Temperature (Fahrenheit)							

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Sliced cooked onions	Cold Holding	40
Chicken wings	Cold Holding	40
Raw steak	Cold Holding	40
Mac and cheese	Hot Holding	145
Sliced tomatoes	Cold Holding	40
Cut leafy greens	Cold Holding	40
Marinera sauce	Hot Holding	150
Crumbled sausage	Cold Holding	40
Sliced chicken	Cold Holding	40
Meatball	Cold Holding	40
Chicken wing in walk in cooler	Cold Holding	37
Diced ham	Cold Holding	40

#### Observed Violations

Total # 3

Repeated # ()

41: In-use utensils stored in standing water. Must be stored dry, in hot water, or in running well.

45: Cutting board heavily scorred.

46: No QA test strips.

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



## Establishment Information

Establishment Name: Mellow Mushroom

Establishment Number : 605219770

#### Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2: (IN): PIC has knowledge of symptoms and diseases of foodborne illnesses.

- 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 handwashing 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: 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: (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: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: Proper hot holding temperatures observed.
- 20: Proper cold holding temperatures observed.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 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: Mellow Mushroom

Establishment Number : 605219770

Comments/Other Observations (cont'd)

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

## Establishment Information

Establishment Name: Mellow Mushroom

Establishment Number # 605219770

Sources			
Source Type:	Water	Source:	Public
Source Type:	Food	Source:	PFG
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	

# Additional Comments