

Address

Inspection Date

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

	C	O	R	F
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O Farmer's Market Food Unit Your Pie #074 Remanent O Mobile Establishment Name Type of Establishment 1919 Gunbarrel Rd Ste 103 O Temporary O Seasonal Chattanooga Time in 03:45 PM AM / PM Time out 03:55; PM AM / PM

08/10/2021 Establishment # 605261168 Embargoed 0

∰ Follow-up Purpose of Inspection Routine O Complaint O Preliminary O Consultation/Other

Number of Seats 88 Risk Category О3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	4=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observ	ed		C)S=c	ют	ecte	d on-si	te
					Compliance Status	COS	R	WT					
	IN	OUT	NA	NO	Supervisien					Т	IN	оит	N
1	×	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	1	16	0	0	3
	IN	OUT	NA	NO	Employee Health					17	Ö	0	Š
2	300	0			Management and food employee awareness; reporting	0	0		1	\top			ı
3	×	0			Proper use of restriction and exclusion	0	0	5	П		IN	OUT	N
	IN	OUT	NA	NO	Good Hygienic Practices				1	18	0	0	7
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	1	19	0	0	8
5	滋	0		0	No discharge from eyes, nose, and mouth	0	0	0	2	100	245	0	7
	IN	OUT	NA	NO	Preventing Contamination by Hands				2	11	×	0	7
6	巡	0		0	Hands clean and properly washed	0	0		1 4	2	×	0	Г
7	800	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	Ľ	1		OUT	,
8	300	0			Handwashing sinks properly supplied and accessible	0	0	2	ΙĐ	\pm	_		F.
Ť	IN	OUT	NA	NO	Approved Source	_	_	-	2	13	0	0	ð
9	黨	0			Food obtained from approved source	0	0		ı	Ť	IN	OUT	N
10	0	0	0	38	Food received at proper temperature	0	0		l It		$\overline{}$	_	
11	X	0			Food in good condition, safe, and unadulterated	0	0	5	2	14	0	0	1
12	0	0	Ж	0	Required records available: shell stock tags, parasite destruction	0	0			T	IN	оит	١
	IN	OUT	NA	NO	Protection from Contamination				2	:5	0	0	18
13	黛	0	0		Food separated and protected	0	0	4	2	6	黨	0	r
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		T		OUT	N
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	2	27	0	0	8

					Compliance Status	COS	R	WT
	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	寒	0	Proper cooking time and temperatures	0	0	5
17	0	0	3%	0	Proper reheating procedures for hot holding	ō	0	٠
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	×	Proper cooling time and temperature	0	0	
19	0	0	文	0	Proper hot holding temperatures	0	0	
20	243	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	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	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	80	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

the introduction of pathogo s, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Safe Food and Water			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	-
30	0	Variance obtained for specialized processing methods	0	0	١.
	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	1
34	0	Thermometers provided and accurate	0	0	Т
	OUT	Food Identification			
35	×	Food properly labeled; original container; required records available	0	0	Г
	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	
40	0	Washing fruits and vegetables	0	0	
	OUT	Proper Use of Utensils	\top		
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	
44	10	Gloves used properly	- 0	0	

pect	ion	R-repeat (violation of the same code provision)		
		Compliance Status	cos	R	WT
	OUT	Utensils and Equipment			
45	M	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	羅	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	2
49	0	Plumbing installed; proper backflow devices	0	0	2
50	凝	Sewage and waste water properly disposed	0	0	2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	- 1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items			
55	0	Current permit posted	0	0	0
56	0	Most recent inspection posted	0	0	۰
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

cuous manner. You have the right to request a hi (10) days of the date of the Je selection of the sel

08/10/2021

08/10/2021

Signature of Person In Charge

Date Signature of

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 Information							
Establishment Name: Your Pie #074							
Establishment Number #: [605261168							
NODA O T. 1 . 120071 WH. II							
NSPA Survey – To be completed if: Age-restricted venue does not affirmatively rest		facilities at all times to se	mone who are				
twenty-one (21) years of age or older.	nct access to its buildings or	raciities at all times to pe	rsons wno are				
Age-restricted venue does not require each per	son attempting to gain entry	to submit acceptable form	of identification.				
"No Smoking" signs or the international "Non-Si	moking" symbol are not cons	picuously posted at every	entrance.				
Garage type doors in non-enclosed areas are n	ot completely open.						
Tents or awnings with removable sides or vents	in non-enclosed areas are r	not completely removed or	ropen.				
Smoke from non-enclosed areas is infiltrating in	ito areas where smoking is p	rohibited.					
Smoking observed where smoking is prohibited	by the Act.						
Warewashing Info	- 4	1	1				
Machine Name	Sanitizer Type	PPM	Temperature (Fah	renhelt)			
			L				
Equipment Temperature							
Description			Temperature (Fahr	enhelt)			
			L				
Food Temperature							
Description		State of Food	Temperature (Fahr				
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bserved Violations	
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epeated # 0	
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Establishment Information	
Establishment Name: Your Pie #074	
Establishment Number: 605261168	
Lotabilo III et il 1003201100	
Comments/Other Observations	
Comments/Other Observations	
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See last page	for additional	comments.
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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: Your Pie #074 Establishment Number: 605261168 Comments/Other Observations (cont'd) Additional Comments (cont'd) See last page for additional comments.	Establishment Information	
Establishment Number: 605261168 Comments/Other Observations (cont'd) Additional Comments (cont'd)		
Additional Comments (cont'd)	Establishment Number: 605261168	
Additional Comments (cont'd)		
Additional Comments (cont'd)	Comments/Other Observations (cont'd)	
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	Additional Comments (cont'd)	
see last page for additional comments.		
	see last page for additional comments.	

Establishment Information	
Establishment Name: Your Pie #074	
Establishment Number # 605261168	
Sources	
Source Type:	Source:
Additional Comments	