

Establishment Name

Address

Inspection Date

Risk Category

City

Sing It Or Wing It

412 Market St., STE 101

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Remanent O Mobile Type of Establishment O Temporary O Seasonal

Follow-up Required

Chattanooga Time in 01:00 PM AM/PM Time out 01:45: PM AM/PM

06/15/2022 Establishment # 605213730 Embargoed 0

Purpose of Inspection **K**Routine O Follow-up O Complaint O Preliminary O Consultation/Other О3

04

Number of Seats 152 O Yes 疑 No

SCORE

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

12	N≃in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe)d		¢	OS=come
					Compliance Status	cos	R	WT	
	IN	OUT	NA	NO	Supervision				
1	×	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16
	IN	OUT	NA	NO	Employee Health				17
2	ЭK	0			Management and food employee awareness; reporting	0	0		
3	寒	0			Proper use of restriction and exclusion	0	0	5	
	IN	OUT	NA	NO	Good Hygienic Practices				18
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19
5	26%	0		0	No discharge from eyes, nose, and mouth	0	0	l °	20
	IN	OUT	NA	NO	Preventing Contamination by Hands				21
6	巡	0		0	Hands clean and properly washed	0	0		22
7	鼷	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2	23
	IN OUT NA NO Approved Source						23		
9	黨	0			Food obtained from approved source	0	0		
10	0	0	0	×	Food received at proper temperature	0	0		24
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	24
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0		
	IN	OUT	NA	NO	Protection from Contamination				25
13	黛	0	0		Food separated and protected	0	0	4	26
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5	
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27

					Compliance Status	cos	R	WT
	IN OUT NA NO Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods							
16	0	0	0	寒	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	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	0	寒	Proper hot holding temperatures	0	0	
20	24	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	333		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	3%		Food additives: approved and properly used	0	0	5
26	80	0			oxic substances properly identified, stored, used		0	9
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	X		Compliance with variance, specialized process, and HACCP plan	0	0	5

s to control the introduction of pathogens, chemicals, and physical objects into foods.

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	W
	OUT	Caro rocc and comes	_		_
28	0	Pasteurized eggs used where required	0	0	1
29	0		0	0	12
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control		_	
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	2
32	0	Plant food properly cooked for hot holding	0	0	1
33	0	Approved thawing methods used	0	0	,
34	0	Thermometers provided and accurate	0	0	Ī
	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	r
39	0	Wiping cloths; properly used and stored	0	0	_
40	0	Washing fruits and vegetables	0	0	ļ .
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	Γ.
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	,
43	0		0	0	r
44		Gloves used properly	0	0	

pecti	on	R-repeat (violation of the same code provision		-	140				
		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	4				
47	黨	Nonfood-contact surfaces clean	0	0	•				
	OUT	Physical Facilities							
48	0	Hot and cold water available; adequate pressure	0	0	-:				
49	0	Plumbing installed; proper backflow devices	0	0	-:				
50	0	Sewage and waste water properly disposed	0	0	- 2				
51	0	Toilet facilities: properly constructed, supplied, cleaned		0	_				
52	0	Garbage/refuse properly disposed; facilities maintained	0	0					
53	3%	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	- 100	0					
58		Tobacco products offered for sale	0	0	0				
59		If tobacco products are sold, NSPA survey completed	0	0					

er and post the most recent inspection report in a conspicuous manner. You have the right to request a h t. 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, 4-5-320. hin ten (10) days of the date of th

06/15/2022

06/15/2022

Signature of Person In Charge

Signature of Environmental Health Specialist

Date

RDA 629

**** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15)) 4232098110 Please call (to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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Establishment Name: Sing It Or Wing It
Establishment Number # 605213730

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)					
Dish Machine	Chlorine	50						

Equipment Temperature							
Description	Temperature (Fahrenheit)						

State of Food	Temperature (Fahrenheit
Cold Holding	38
Cold Holding	37
Cold Holding	40
Cold Holding	31
Cold Holding	36
Cold Holding	38
	Cold Holding Cold Holding Cold Holding Cold Holding Cold Holding

Observed Violations								
Total # 2								
Repeated # ()								
47: Nonfood-contact surfaces soiled/ dirty.								
53: Ceiling tiles in poor repair.								

[&]quot;"See page at the end of this document for any violations that could not be displayed in this space.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Sing It Or Wing It Establishment Number: 605213730

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 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: Good 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 from approved sources.
- 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: (NO) TCS food is not being held hot during inspection.
- 20: See temperatures.
- 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:

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 Information	
Establishment Name: Sing It Or Wing It	
Establishment Number: 605213730	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information							
Establishment Name: Sing It Or Wing It							
Establishment Number #: 605213730							
Sources							
Source Type: Water	Source:	Public					
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Additional Comments							