TENNESSEE DEPARTMENT OF HEALTH OD SERVICE ESTABLISHMENT INSPECTION REPORT

			FOOD SERVICE ESTABLISHMENT INSPECTION REPORT								SCORE									
Miller's Ale House #94											O Farmer's Market Food Unit									
Establishment Name 2119 Gunbarrel Rd						Тур	pe of	Establi	ishme	ent Permanent O Mobile	J		J							
Add	ress															O Temporary O Seasonal				
City					Chattanoo	ga	Time in	12	2:3	0 F	<u>PM</u>	_ A	M / F	M Ti	me o	ut <u>12:45</u> ; <u>РМ</u> ам/рм				
Insp	ectio	n Da	rte		05/30/20	023 Establishment	60525593	2		_	Emba	argoe	d (0						
Puŋ	oose	of In	spect		ORoutine	一 趟 Follow-up	O Complaint			O Pr					Cor	nsuitation/Other				
Risk	Cat	egon	v .		01	02	223			04				Fo	-wolle	up Required O Yes 🕱 No	Number of S	eats	37	1
			isk I				and employee									to the Centers for Disease Contr	ol and Prevent			
				as c	ontributing ta											control measures to prevent illne	ss or injury.			
		(Ma	ırk de	elgne	ted compliance st											ach liom as applicable. Deduct points for ca	tegory or subcate	gory.		
IN	⊧in c	ompili	ance			iance NA=not applicable mpliance Status	NO=not observe		R		S=co	rrecte	d on-	site duri	ing ins	spection R=repeat (violation of the Compliance Status			8	WT
h	IN	OUT	NA	NO		Supervision			- 1			IN	ou	T NA	-	Cooking and Reheating of Time/T		000	~	
1	展	0				e present, demonstrates	knowledge, and	0	0	5						Control For Safety (TCS) F	eods	_	-	
H			NA	NO	performs duties	Employee Health		-		-		8				Proper cooking time and temperatures Proper reheating procedures for hot holdi	ng	8	00	5
	Ж	_				d food employee awaren	ess; reporting		0	5		IN	ou		NO	Cooling and Holding, Date Marking,				
3	8	0	NA	NO		striction and exclusion Bood Hygionic Practic		0	0	-						a Public Health Contro Proper cooling time and temperature	•	_		
4	X	0	nea			asting, drinking, or tobacc			0	5	19	12	o	0		Proper hot holding temperatures		0	0	
5	义 N		NA			om eyes, nose, and mout nting Contamination		0	0	<u> </u>	20	12	8		0	Proper cold holding temperatures Proper date marking and disposition		00	8	5
6	×		1.00 1		Hands clean and	d properly washed		0	0		22	_	ō			Time as a public health control: procedure	is and records	ō	ō	
7	X	0	0	0	No bare hand co alternate proced	ontact with ready-to-eat fo lures followed	ods or approved	0	0	°		IN	ou		NO	Consumer Advisory		-	-	
8	XX IN	애	NA	NO	Handwashing si	nks properly supplied and Approved Source	d accessible	0	0	2	23	×	0	0		Consumer advisory provided for raw and food	undercooked	0	0	4
9	嵩	0				rom approved source			0			IN	ou	T NA	NO	Highly Susceptible Populat	tions			
10 11	0 ※	8	×	0	Food received a Food in good co	t proper temperature ndition, safe, and unadult	terated	8	0	5	24	0	0	22		Pasteurized foods used; prohibited foods	not offered	0	0	5
	0	0	×	0		s available: shell stock ta		0	0			IN	ou	T NA	NO	Chemicals				
			NA	NO	Prot	tection from Contami	nation					0	ļ	1		Food additives: approved and properly us		0		5
13 14	泉区	00	0		Food separated Food-contact su	and protected infaces: cleaned and sanit	tized		0	4	26	彩 IN		T NA	NO	Toxic substances properly identified, store Conformance with Approved Pr		0	0	
	X	0			Proper disposition served	on of unsafe food, returne	ed food not re-	0	0	2	27	0	0	1		Compliance with variance, specialized pro HACCP plan	ocess, and	0	0	5
		_						-				-	-	-						
				Goo	d Retail Prac	tices are preventive	measures to co	ontro	l the	intr	oduc	tion	of	patho	gens	s, chemicals, and physical objects	into foods.			
				01	T=not in complianc	*	COS=corre	GOO						\$.)		R-repeat (violation of the same	code provision)			
				00	Cor	mpliance Status	CO3-cone	COS	R	WT	Ē					Compliance Status		COS	R	WT
2	_	001		euríze	Saf ed eggs used who	e Food and Water ere required		0	0	1			TUK	Food a	nd no	Utensils and Equipment prood-contact surfaces cleanable, properly	/ designed.	-		
2		0	Wate	er and	lice from approv		ds.	0	0 0	2	\vdash	-	~	constru	cted,	and used		0	0	1
		OUT				Temperature Control	44			_	4	6	<u> </u>	Warew	ashin	g facilities, installed, maintained, used, tes	t strips	0	0	1
3	1	0	Prop		oling methods us	ed; adequate equipment	for temperature	0	0	2	4		嵐 TUX	Nonfoo	d-cor	Physical Facilities		0	0	1
	2		Plan	t food	properly cooked				0	1	_	8	0			f water available; adequate pressure		0		2
3	3 4				thawing methods eters provided an			0	0	1	4					stalled; proper backflow devices		0	0	2
		OUT				od identification		Ľ		_			-			es: properly constructed, supplied, cleaned			ŏ	1
3	5	0	Food	i prop	erly labeled; orig	inal container; required re	cords available	0	0	1	5	2	0	Garbag	e/ref	use properly disposed; facilities maintained	i i	0	0	1
		OUT				n of Food Contaminat	ion				5	-+-				ilities installed, maintained, and clean			0	1
3	6	0	Insec	ats, ro	dents, and animation	als not present		0	0	2	5	-		Adequa	ne ve	entilation and lighting; designated areas use	bd	0	0	1
3	7	0	Cont	amin	ation prevented d	luring food preparation, st	torage & display	0	0	1		0	TUK			Administrative Items				
_	8 9				cleanliness ths; properly use	d and stored		0	0	1		_				nit posted inspection posted		0	0	0
_	0	0			ruits and vegetat	bles				1	F	*	~ 1	HINAK FR	-venit	Compliance Status				WT
4	_	OUT S	In-re	e ute	Prop nsils; properly sto	oer Use of Utensils		0		1	5	7	-	Come	2000	Non-Smokers Protection A with TN Non-Smoker Protection Act		2	0	
- 4	2	X	Uten	sils, e	equipment and lin	ens; properly stored, drie	d, handled	0	0	1	5	8		Tobacc	o pro	ducts offered for sale		0	ŏ	0
	3		ang	e-use	arsingle-service a	rticles; properly stored, u	sed	18	0	1	5	9		IT LODGC	co pr	oducts are sold, NSPA survey completed		0	0	

ms within ten (10) days may result in su constituting imminent health hazards sh on of your food service establishe corrected immediately or operation hment permit. Repeated violation of an identical risk factor may result in revocation of your foor ons shall cease. You are required to post the food service establishment permit in a conspicuous rrect any violations of risk factor iter zards shall be corrected imm ns ide d as co ent pe ner and post the most recent inspection report in a conspicuous manner. You have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of the tr. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-719, 68-14-715, 68-14-716, 4-5-320.

0 0 1

O Gloves used properly

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 $) \cap$ -, le 05/30/2023 05/30/2023 Date Signature of Environmental Health Specialist Signature of Person In Charge Date **** Additional food safety information can be found on our website, http://tn.gow/health/article/eh-foodservice ****

PH-2267 (Rev. 6-15)	Free food safety training cla	RDA 629		
P192201 (1094. 0=10)	Please call () 4232098110	to sign-up for a class.	104.025

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Miller's Ale House #94 Establishment Number #: 605255932

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)							

Equipment l'emperature	
Description	Temperature (Fahrenheit)

Food Temperature	State of Food	Temperature (Fahrenheit

Observed Violations	
iotal# 5	
lepeated # ()	
1:	
2:	
7:	
3:	
4:	
4.	
If One name at the and of this document for any violations that could not be disclosed in this space	

""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

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Comments/Other Observations		
0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 9: 9: 9: 9: 9: 9: 9: 9: 9		
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Additional Comments See last page for additional comments.

***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: Miller's Ale House #94 Establishment Number : 605255932

Comments/Other Observations (cont'd)

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

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Sources		
Source Type:	Source:	
Additional Comments		

#1, 2, 8, 14, 20, 21 corrected.