

Address

# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Bojangles #943 Remanent O Mobile Establishment Name Type of Establishment 7987 E. Brainerd Rd. O Temporary O Seasonal

Time in 01:35 PM AM / PM Time out 02:05: PM AM / PM City 07/26/2023 Establishment # 605241064 Embargoed 0 Inspection Date

Chattanooga

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

Number of Seats 80 Risk Category О3 04 Follow-up Required 级 Yes O No

### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

12	¥=in c	in compliance OUT not in compliance NA not applicable NO not observ		ed		C	<b>05</b> =c	om	ecte		
	Compliance Status				cos	R	WT				
	IN	OUT	NA	NO	Supervision				П	Τ	IN
1	×	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	1	6	0
	IN	OUT	NA	NO	Employee Health				1	7	Ó
2	300	0			Management and food employee awareness; reporting	0	0			T	
3	×	0			Proper use of restriction and exclusion	0	0	5	П		IN
	IN	OUT	NA	NO	Good Hygienic Practices				1	8	0
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	1	9	×
5	*	0		0	No discharge from eyes, nose, and mouth	0	0		2	10	0
	IN	OUT	NA	NO	Proventing Contamination by Hands				2	1	×
6	黨	0		0	Hands clean and properly washed	0	0		J .	2	0
7	級	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	ŀ		IN
8	X	0			Handwashing sinks properly supplied and accessible	0	0	2	F	3	0
	IN	OUT	NA	NO	Approved Source				Ľ	~	~
9	黨	0			Food obtained from approved source	0	0				IN
10	0	0	0	×	Food received at proper temperature	0	0		F	4	0
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	Ľ	1	_
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			T	IN
	IN	OUT	NA	NO	Protection from Contamination					:5	0
13	Ŕ	0	0		Food separated and protected	0	0	4	2	6	×
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		Т	IN
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	2	7	0

_	Compliance Status				COS	к	WI	
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	0	黨	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	÷
	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	寒	0	0	0	Proper hot holding temperatures	0	0	
20	0	×	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	*
22	0	0	0	氮	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	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	8	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

#### to control the introduction of pathoge ns, chemicals, and physical objects into foods.

					ar.
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	WT
	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	2
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	1
34	0	Thermometers provided and accurate	0	0	1
	OUT Food Identification				
35	0	Food properly labeled; original container; required records available	0	0	1
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	2
37	0	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	1
39	0	Wiping cloths; properly used and stored	0	0	1
40	0	Washing fruits and vegetables	0	0	1
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	1
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1
43		Single-use/single-service articles; properly stored, used	0	0	1
44	10	Gloves used properly	0	0	1

pecti	on	R-repeat (violation of the same code provision	)			
	cos	R	W			
	OUT	Utensiis and Equipment				
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0		
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0		
47	0	Nonfood-contact surfaces clean				
	OUT	Physical Facilities				
48	0	Hot and cold water available; adequate pressure	0	0	0 1 0 1 0 2 0 2 0 1 0 1 0 1 0 1 0 1 0 0 0 0	
49	0	Plumbing installed; proper backflow devices	0	O 1 O 1 O 2 O 2 O 2 O 1 O 1 O 1 O 1 O 1 O 1 O 1 O 1		
50	0	Sewage and waste water properly disposed	0	0	O 1 O 1 O 2 O 2 O 2 O 1 O 1 O 1 O 1 O 1 O 1 O 1 O 1	
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0 0 1		
52	0	Garbage/refuse properly disposed; facilities maintained	0	0		
53	0	Physical facilities installed, maintained, and clean	0	0		
54	0	Adequate ventilation and lighting; designated areas used	0	0		
	OUT	Administrative Items	Т			
55	0	Current permit posted	0	0	П	
56	0	Most recent inspection posted	0	0		
		Compliance Status	YES	NO	٧	
Non-Smokers Protection Act						
57		Compliance with TN Non-Smoker Protection Act	- 100	0		
58		Tobacco products offered for sale	0	0	1	
59		If tobacco products are sold, NSPA survey completed	0	0		

conspicuous manner. You have the right to request a h 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320. n (10) days of the date of the

07/26/2023

07/26/2023

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 \*\*\*\*

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



_			_		
	-	i se i	amont.	100	ormation

Establishment Name: Bojangles #943
Establishment Number #: 605241064

ı	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.	
ı	Smoking observed where smoking is prohibited by the Act.	

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature ( Fahrenheit)				
Triple sink	QA	200					

Equipment Temperature					
Description		Temperature ( Fahrenheit)			

Food Temperature					
Description	State of Food	Temperature (Fahrenheit)			
Pinto beans	Hot Holding	155			
Fried chicken breast	Hot Holding	145			
Chicken strip	Hot Holding	145			
Mashed potatoes	Hot Holding	156			
Sausage patties	Hot Holding	145			
Raw chicken	Cold Holding	40			
Raw chicken #2	Cold Holding	40			
Coleslaw	Cold Holding	40			
Pimento cheese	Cold Holding	40			
Cloeslaw in small reach in cooler	Cold Holding	47			

Observed Violations						
Total # 1						
Repeated # ()						
20: Small reach-in cooler on front line holding coleslaw at 47 degrees F.						
Coleslaw was moved into a different, properly working cooler.						

<sup>&</sup>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: Bojangles #943
Establishment Number: 605241064

## Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: Employee illness policy posted.
- 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 cooking observed.
- 17: (NO) No TCS foods reheated during inspection.
- 18: No cooling observed.
- 19: Proper hot 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.

<sup>\*\*\*</sup>See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Bojangles #943	
Establishment Number: 605241064	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
see last page for additional comments.	

Establishment Information

Establishment Information								
	053781900309555555555555555555555555555555555							
Establishment Number # 605241								
e e e e e e e e e e e e e e e e e e e								
Sources								
Source Type: W	/ater	Source:	Public					
Source Type: Fo	ood	Source:	McLane					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Comments								