#### TENNESSEE DEPARTMENT OF HEALTH N REPORT \_\_\_\_ \_\_\_\_

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Establishment Name Type of Establishment						ent 🛍 Pen	manent	OM	obile															
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City	/				Hixson		Time in	12	2:20	) F	<u>M</u>	A	//PN	1 Tir	ne ou	# <u>01:20</u>	) <u>PN</u>	Λ_	M / PM					
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					ontributing factors i	FOODBORNE												-	event m	mess of	ingery.			
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IN	in c	ompili	ance			NA=not applicable	NO=not observe		R		S=con	rected	l on-sit	te duri	ng ins	pection Con		repeat ( ce Sta		the same	code provisi		R	WT
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- 50	0	Personal cleaniness				11	33	-	Content permit posted			0
39	0	Wiping cloths; properly used and stored	0	0	1	1[	56	0	Most recent inspection posted		0	Ť
40	0	Washing fruits and vegetables	0	0	1	] [			Compliance Status	YES	NO	WT
	OUT	Proper Use of Utensils				1[			Non-Smokers Protection Act			
41	12	In-use utensils; properly stored	0	0	1	] [	57		Compliance with TN Non-Smoker Protection Act	25	0	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1	] [	58		Tobacco products offered for sale		0	0
43	0	Single-use/single-service articles; properly stored, used	0	0	1	1[	59		If tobacco products are sold, NSPA survey completed	0	0	
44	0	Gloves used properly	0	0	1	] `						
manner	Failure to correct any violations of risk factor items within ten (10) days may result in suspension of your food service establishment permit. Repeated violation of an identical risk factor may result in revocation of your food service establishment permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the food service establishment permit 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 this report. T.C.A. sections 68-14-703, 68-14-706, 68-14-706, 68-14-706, 68-14-706, 4-5-320.											
10/19/2021									y = +	L0/1		2021
Signat	ure of	Person In Charge			Date		Signa	ture	of Environmental Health Specialist			Date
	**** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****											

1

PH-2267 (Rev. 6-15)	Free food safety training ck	RDA 629		
Prezzon (new. 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: Ichiban Japanese Establishment Number #: 605199369

Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						
Dish machine	Chlorine	100							

Equipment Temperature						
Description	Temperature ( Fahrenheit)					

Food Temperature		
Decoription	State of Food	Temperature (Fahrenheit)
Raw chx	Cold Holding	38
Rice	Cold Holding	41
Salad dressing -temp check only	Cold Holding	40
Raw shrimp	Cold Holding	36
Raw beef	Cold Holding	40
Raw salmon	Cold Holding	38
Raw shrimp	Cold Holding	40

#### Observed Violations

Total # 6

Repeated # ()

22: Not using time for sushi rice correctly. Rice was unlabeled.

26: Using bleach in excess of 200 ppm at sanitizer buckets.

34: Missing thermometers in stand up coolers.

37: Food boxes stored on floor of walkin freezer. Must be stored off of the ground.

41: Utensils stored in room temp standing water.

49: Leak at 3 sink faucet

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



### Establishment Information

Establishment Name: Ichiban Japanese

Establishment Number : 605199369

#### 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: Hands washed

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: Approved

10: (NO): No food received during inspection.

11: (IN) All food was in good, sound condition at time of inspection.

12: On invoice

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: See recorded food temperatures

20: See recorded food temperatures

21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours. 23: Posted

24: (NA) A highly susceptible population is not served.

25: (NA) Establishment does not use any additives or sulfites on the premises.

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: Ichiban Japanese

Establishment Number : 605199369

Comments/Other Observations (cont'd)

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

## Establishment Information

Establishment Name: Ichiban Japanese Establishment Number #: 605199369

Sources	Sources									
Source Type:	Water	Source:	Hud							
Source Type:	Food	Source:	Sysco, kgi							
Source Type:		Source:								
Source Type:		Source:								
Source Type:		Source:								
Source Type:		Source:								

## Additional Comments