



TENNESSEE DEPARTMENT OF HEALTH  
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

68

Establishment Name Noodles Asian Bistro Type of Establishment ☒ Permanent ☐ Mobile  
Address 2936 Kirby Whitten Rd. ☐ Temporary ☐ Seasonal  
City Bartlett Time in 11:45 AM AM / PM Time out 02:20 PM AM / PM  
Inspection Date 02/01/2024 Establishment # 605227680 Embargoed 000  
Purpose of Inspection ☒ Routine ☐ Follow-up ☐ Complaint ☐ Preliminary ☐ Consultation/Other  
Risk Category ☐ 1 ☒ 2 ☐ 3 ☐ 4 Follow-up Required ☒ Yes ☐ No Number of Seats 190

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

| IN=in compliance  |                                  |                                  |                                  |                       | OUT=not in compliance  |  |  |  |  | NA=not applicable     |                       |  |  |  | NO=not observed |  |  |  |  | COS=corrected on-site during inspection |  |  |  |  | R=repeat (violation of the same code provision) |  |  |  |  |
|-------------------|----------------------------------|----------------------------------|----------------------------------|-----------------------|--|--|--|--|--|-----------------------|-----------------------|--|--|--|-----------------|--|--|--|--|---|--|--|--|--|---|--|--|--|--|
| Compliance Status |                                  |                                  |                                  |                       |  |  |  |  |  | COS                   |                       |  |  |  | R               |  |  |  |  | WT                                      |  |  |  |  |   |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Supervision  |  |  |  |  |                       |                       |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 1                 | <input type="radio"/>            | <input type="radio"/>            |                                  |                       | Person in charge present, demonstrates knowledge, and performs duties                  |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5               |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Employee Health  |  |  |  |  |                       |                       |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 2                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                       | Management and food employee awareness, reporting                                      |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5               |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 3                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                       | Proper use of restriction and exclusion  |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Good Hygienic Practices  |  |  |  |  |                       |                       |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 4                 | <input type="radio"/>            | <input checked="" type="radio"/> |                                  | <input type="radio"/> | Proper eating, tasting, drinking, or tobacco use                                       |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5               |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 5                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  | <input type="radio"/> | No discharge from eyes, nose, and mouth  |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Preventing Contamination by Hands  |  |  |  |  |                       |                       |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 6                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  | <input type="radio"/> | Hands clean and properly washed  |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5               |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 7                 | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/> | No bare hand contact with ready-to-eat foods or approved alternate procedures followed |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 8                 | <input type="radio"/>            | <input checked="" type="radio"/> |                                  |                       | Handwashing sinks properly supplied and accessible                                     |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 2               |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Approved Source  |  |  |  |  |                       |                       |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 9                 | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                       | Food obtained from approved source   |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5               |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 10                | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/> | Food received at proper temperature  |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 11                | <input type="radio"/>            | <input checked="" type="radio"/> |                                  |                       | Food in good condition, safe, and unadulterated  |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 12                | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/> | Required records available: shell stock tags, parasite destruction                     |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Protection from Contamination  |  |  |  |  |                       |                       |  |  |  |                 |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 13                | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |                       | Food separated and protected   |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 4               |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 14                | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |                       | Food-contact surfaces: cleaned and sanitized   |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5               |  |  |  |  |   |  |  |  |  |   |  |  |  |  |
| 15                | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                       | Proper disposition of unsafe food, returned food not re-served                         |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 2               |  |  |  |  |   |  |  |  |  |   |  |  |  |  |

| Compliance Status |                                  |                                  |                                  |                       |  |  |  |  |  | COS                   |                       |  |  |  | R |  |  |  |  | WT |  |  |  |  |
|-------------------|----------------------------------|----------------------------------|----------------------------------|-----------------------|--|--|--|--|--|-----------------------|-----------------------|--|--|--|---|--|--|--|--|----|--|--|--|--|
|                   | IN                               | OUT                              | NA                               | NO                    | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods |  |  |  |  |                       |                       |  |  |  |   |  |  |  |  |    |  |  |  |  |
| 16                | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/> | Proper cooking time and temperatures                                     |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5 |  |  |  |  |    |  |  |  |  |
| 17                | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/> | Proper reheating procedures for hot holding                              |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |   |  |  |  |  |    |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Cooling and Holding, Date Marking, and Time as a Public Health Control   |  |  |  |  |                       |                       |  |  |  |   |  |  |  |  |    |  |  |  |  |
| 18                | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/> | Proper cooling time and temperature                                      |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5 |  |  |  |  |    |  |  |  |  |
| 19                | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/> | Proper hot holding temperatures  |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |   |  |  |  |  |    |  |  |  |  |
| 20                | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |                       | Proper cold holding temperatures   |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |   |  |  |  |  |    |  |  |  |  |
| 21                | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> | Proper date marking and disposition                                      |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |   |  |  |  |  |    |  |  |  |  |
| 22                | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/> | Time as a public health control: procedures and records                  |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |   |  |  |  |  |    |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Consumer Advisory  |  |  |  |  |                       |                       |  |  |  |   |  |  |  |  |    |  |  |  |  |
| 23                | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/>            |                       | Consumer advisory provided for raw and undercooked food                  |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 4 |  |  |  |  |    |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Highly Susceptible Populations   |  |  |  |  |                       |                       |  |  |  |   |  |  |  |  |    |  |  |  |  |
| 24                | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |                       | Pasteurized foods used; prohibited foods not offered                     |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5 |  |  |  |  |    |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Chemicals  |  |  |  |  |                       |                       |  |  |  |   |  |  |  |  |    |  |  |  |  |
| 25                | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |                       | Food additives: approved and properly used                               |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5 |  |  |  |  |    |  |  |  |  |
| 26                | <input type="radio"/>            | <input type="radio"/>            |                                  |                       | Toxic substances properly identified, stored, used                       |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  |   |  |  |  |  |    |  |  |  |  |
|                   | IN                               | OUT                              | NA                               | NO                    | Conformance with Approved Procedures                                     |  |  |  |  |                       |                       |  |  |  |   |  |  |  |  |    |  |  |  |  |
| 27                | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |                       | Compliance with variance, specialized process, and HACCP plan            |  |  |  |  | <input type="radio"/> | <input type="radio"/> |  |  |  | 5 |  |  |  |  |    |  |  |  |  |

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

| GOOD RETAIL PRACTICES            |                                  |   |                       |                       |   |   |    |
|----------------------------------|----------------------------------|---|-----------------------|-----------------------|---|---|----|
| OUT=not in compliance            |                                  | COS=corrected on-site during inspection                                 |                       |                       | R=repeat (violation of the same code provision) |   |    |
| Compliance Status                |                                  |   |                       |                       | COS   | R | WT |
| Safe Food and Water              |                                  |   |                       |                       |   |   |    |
| 28                               | <input type="radio"/>            | Pasteurized eggs used where required                                    | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| 29                               | <input type="radio"/>            | Water and ice from approved source                                      | <input type="radio"/> | <input type="radio"/> | 2   |   |    |
| 30                               | <input type="radio"/>            | Variance obtained for specialized processing methods                    | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| Food Temperature Control         |                                  |   |                       |                       |   |   |    |
| 31                               | <input checked="" type="radio"/> | Proper cooling methods used; adequate equipment for temperature control | <input type="radio"/> | <input type="radio"/> | 2   |   |    |
| 32                               | <input type="radio"/>            | Plant food properly cooked for hot holding                              | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| 33                               | <input type="radio"/>            | Approved thawing methods used   | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| 34                               | <input type="radio"/>            | Thermometers provided and accurate                                      | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| Food Identification              |                                  |   |                       |                       |   |   |    |
| 35                               | <input type="radio"/>            | Food properly labeled; original container; required records available   | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| Prevention of Food Contamination |                                  |   |                       |                       |   |   |    |
| 36                               | <input checked="" type="radio"/> | Insects, rodents, and animals not present                               | <input type="radio"/> | <input type="radio"/> | 2   |   |    |
| 37                               | <input checked="" type="radio"/> | Contamination prevented during food preparation, storage & display      | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| 38                               | <input type="radio"/>            | Personal cleanliness  | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| 39                               | <input type="radio"/>            | Wiping cloths; properly used and stored                                 | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| 40                               | <input type="radio"/>            | Washing fruits and vegetables   | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| Proper Use of Utensils           |                                  |   |                       |                       |   |   |    |
| 41                               | <input type="radio"/>            | In-use utensils; properly stored  | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| 42                               | <input type="radio"/>            | Utensils, equipment and linens; properly stored, dried, handled         | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| 43                               | <input type="radio"/>            | Single-use/single-service articles; properly stored, used               | <input type="radio"/> | <input type="radio"/> | 1   |   |    |
| 44                               | <input type="radio"/>            | Gloves used properly  | <input type="radio"/> | <input type="radio"/> | 1   |   |    |

| Compliance Status          |                                  |   |                                  |                       | COS | R  | WT |
|----------------------------|----------------------------------|---|----------------------------------|-----------------------|-----|----|----|
| Utensils and Equipment     |                                  |   |                                  |                       |     |    |    |
| 45                         | <input type="radio"/>            | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used | <input type="radio"/>            | <input type="radio"/> | 1   |    |    |
| 46                         | <input type="radio"/>            | Warewashing facilities, installed, maintained, used, test strips                      | <input type="radio"/>            | <input type="radio"/> | 1   |    |    |
| 47                         | <input checked="" type="radio"/> | Nonfood-contact surfaces clean  | <input type="radio"/>            | <input type="radio"/> | 1   |    |    |
| Physical Facilities        |                                  |   |                                  |                       |     |    |    |
| 48                         | <input type="radio"/>            | Hot and cold water available; adequate pressure                                       | <input type="radio"/>            | <input type="radio"/> | 2   |    |    |
| 49                         | <input checked="" type="radio"/> | Plumbing installed; proper backflow devices   | <input type="radio"/>            | <input type="radio"/> | 2   |    |    |
| 50                         | <input type="radio"/>            | Sewage and waste water properly disposed  | <input type="radio"/>            | <input type="radio"/> | 2   |    |    |
| 51                         | <input type="radio"/>            | Toilet facilities; properly constructed, supplied, cleaned                            | <input type="radio"/>            | <input type="radio"/> | 1   |    |    |
| 52                         | <input type="radio"/>            | Garbage/refuse properly disposed; facilities maintained                               | <input type="radio"/>            | <input type="radio"/> | 1   |    |    |
| 53                         | <input checked="" type="radio"/> | Physical facilities installed, maintained, and clean                                  | <input type="radio"/>            | <input type="radio"/> | 1   |    |    |
| 54                         | <input checked="" type="radio"/> | Adequate ventilation and lighting; designated areas used                              | <input type="radio"/>            | <input type="radio"/> | 1   |    |    |
| Administrative Items       |                                  |   |                                  |                       |     |    |    |
| 55                         | <input type="radio"/>            | Current permit posted   | <input type="radio"/>            | <input type="radio"/> | 0   |    |    |
| 56                         | <input checked="" type="radio"/> | Most recent inspection posted   | <input type="radio"/>            | <input type="radio"/> | 0   |    |    |
| Compliance Status          |                                  |   |                                  |                       | YES | NO | WT |
| Non-Smokers Protection Act |                                  |   |                                  |                       |     |    |    |
| 57                         | <input checked="" type="radio"/> | Compliance with TN Non-Smoker Protection Act  | <input checked="" type="radio"/> | <input type="radio"/> | 0   |    |    |
| 58                         | <input type="radio"/>            | Tobacco products offered for sale   | <input type="radio"/>            | <input type="radio"/> | 0   |    |    |
| 59                         | <input type="radio"/>            | If tobacco products are sold, NSPA survey completed                                   | <input type="radio"/>            | <input type="radio"/> | 0   |    |    |

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 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 this report. 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, 4-5-329.

Signature of Person In Charge Tom Date 02/01/2024 Signature of Environmental Health Specialist [Signature] Date 02/01/2024

\*\*\*\* 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: Noodles Asian Bistro

Establishment Number #: 605227680

***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) |
|------------------------|----------------|-----|---------------------------|
| Commercial dish washer | Chlorine       | 100 |                           |

***Equipment Temperature***

| Description                  | Temperature ( Fahrenheit) |
|------------------------------|---------------------------|
| Walk in cooler               | 38                        |
| Cold holding table           | 40                        |
| Drink chest (front of house) | 28                        |

***Food Temperature***

| Description     | State of Food | Temperature ( Fahrenheit) |
|-----------------|---------------|---------------------------|
| Broccoli        | Cooling       | 56                        |
| Cooked shrimp   | Cold Holding  | 39                        |
| Egg rolls       | Cooling       | 76                        |
| Breaded chicken | Cooling       | 100                       |
| Cooked shrimp   | Cooling       | 61                        |
| Zucchini        | Cold Holding  | 40                        |
| Roasted potato  | Cooling       | 48                        |
| Rice            | Cooling       | 84                        |
| Raw shrimp      | Cold Holding  | 40                        |
| Raw chicken     | Cold Holding  | 40                        |
| Egg drop soup   | Hot Holding   | 160                       |
| White rice      | Hot Holding   | 155                       |

## Observed Violations

Total # 15

Repeated # 0

- 4: I observed employee take a sip from his tumbler while in kitchen. There was no staw in his cup. All cups must have a lid and a straw.
- 6: I observed employee rinse his hands with water only at 3 compartment sink . I observed another employee enter kitchen and began pouring soup into togo cup with out washing his hands.
- 8: Hot water is not available at front of house hand sink
- 11: Package of Jalapeño peppers had mold. Peppers were discarded.
- 11: Roasted potatoes were cooked on yesterday but the temperature was not 41 degrees F or below. Potatoes were discarded.
- 21: Roasted potatoes cooked on yesterday was not date marked. Mushroom soup label is illegible. I could not understand writting even tho chef told me it was cooked on yesterday. Sliced red bell peppers were sliced today but labeled had 8/7/23. (Please change labels). Chopped Zucchini and chopped onions were prepped yesterday but was not date marked.
- 31: Improper cooling method. According to PIC broccoli was sitting on counter on ice for 20 minutes,then they put in walk in cooler. Fried rice was cooked an hour ago and then place in walk in cooler. They go back in cooler to get rice per customer order. Shrimp, chicken and egg rolls were cooked 1 hour ago and then after 5 minutes they places in cooler.
- 36: Back wood door is open but screen door is closed. There is and opening at top of screen door which makes it easy for insects to enter kitchen.
- 37: Uncovered food in deep freezer (inside of walk in cooler) please keep food covered.
- 47: Grease build up on fryers,
- 49: Drain under commercial dish washer is stopped up. I observe water flowing to another drain in the kitchen.
- 53: Walls and ceiling are stained. There is a piece of the ceiling tile missing from water damage.(stain is present around the hole in ceiling. Hole in wall on the right dife of hand sink in kitchen. (Pipes are visible)
- Ceiling tiles are stained and ceiling tile is missing in mop sink area.( Insulation is visible. )
- 53: I observed a spiderweb coming from ceiling the to the soy sauce on top shelf. (Shelf is over cold holding tables)
- 54: No light shield on far left light builb. There are filters missing under ventilation hood. Grease build up under ventilation hood.
- 56: Most recent inspection is not posted. Establishment has not posted inspection since 2018

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***Establishment Information***

Establishment Name: Noodles Asian Bistro

Establishment Number : 605227680

***Comments/Other Observations***

2:  
3:  
5:  
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\*\*\*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.***

\*\*\*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: Noodles Asian Bistro

Establishment Number : 605227680

**Comments/Other Observations (cont'd)****Additional Comments (cont'd)*****See last page for additional comments.***

**Establishment Information**

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Establishment Number #: 605227680

**Sources**

Source Type: Food Source: A&D Foods

Source Type: Source:

Source Type: Source:

Source Type: Source:

Source Type: Source:

**Additional Comments**

I recommend employees take a food safety class.  
Educated manager on the cooling method and date marking.