# TENNESSEE DEPARTMENT OF HEALTH

					FOOD SERVICE ESTABLISHMENT INSPECTION REPORT								ON REPORT S	SCORE						
Establishment Name			t Nar	ne	Cajun Oasis								El Dormanant O Mobile	) [						
	ress				2100 Hamil	ton Place Blvc	d Unit 302				_	Тур	e of E	Establi	shme	O Temporary O Seasonal				
					Chattanoog	a	Time is	01	1.5	5 F	PM			и ть		ut 02:30; PM AM / PM				
City		_				23 Establishment						-			ne or					
		n Da								-	Emba					L				
			spect		Routine	O Follow-up	O Complaint			_	elimin	ary				nsultation/Other			<u>,                                    </u>	
Risi	Cat	egon R			O1	paration practice	O3 and employee	beha		04	at c	mm	onh			up Required I Yes O No Numbe to the Centers for Disease Control and Pro			,	
				as c	ontributing fac	tors in foodborne i	liness outbreak	s. P	ublic	: He	aith i	inte	ven	tions	are	control measures to prevent illness or inju	у.			
		(11	rk de	elgnet	ed compliance stat											INTERVENTIONS ach litem as applicable. Deduct points for category or su	boatego	og.)		
IN	⊧in c	ompili	ance			nce NA=not applicable	NO=not observe				)S=cor	recte	d on-s	ite duri	ng ins	pection R+repeat (violation of the same code p			_	
	IN	OUT	NA	NO	Com	Supervision		COS	R	WT	Н					Compliance Status Cooking and Reheating of Time/Temperatur	_	os F	1	WT
	500 100	0	~	no	Person in charge	present, demonstrates	knowledge, and	0	0	5		IN		NA		Control For Safety (TCS) Foods				
'			NA	NO	performs duties	Employee Health		-		9		00	00			Proper cooking time and temperatures Proper reheating procedures for hot holding			3	5
	X	0				food employee awarer	ness; reporting		0	5	Ë	IN	оит			Cooling and Holding, Date Marking, and Time	_			
3	8	0	NA		,	triction and exclusion od Hygienic Practic		0	0	-	12	0	0	0		Public Health Control  Proper cooling time and temperature	$\rightarrow$		51	
4	10	0	-	0	Proper eating, tas	ting, drinking, or tobaco	co use	0	0		19	黨	0	0	õ	Proper hot holding temperatures		5 0	5	
5	义 IN		NA			n eyes, nose, and mou ing Contamination		0	0	_	20	0	<u>×</u>			Proper cold holding temperatures Proper date marking and disposition			3	5
6	×	0	10-1	0	Hands clean and	properly washed		0	0			0	ō	×		Time as a public health control: procedures and record	-		-	
7	×	0	0	0	No bare hand con alternate procedu	tact with ready-to-eat f res followed	oods or approved	0	0	°		IN	OUT		-	Consumer Advisory				
8	N IN	애	NA	NO	Handwashing sin/	is properly supplied an Approved Source	d accessible	0	0	2	23	0	0	×		Consumer advisory provided for raw and undercooke food	a (		7	4
9	嵩	0				m approved source			0			IN	OUT	NA	NO	Highly Susceptible Populations		-	-	
10 11	0 ※	8	0	*		proper temperature dition, safe, and unadu	Iterated	8	00	5	24	0	0	X		Pasteurized foods used; prohibited foods not offered	- 0	>   c		5
	0	0	×	0	Required records destruction	available: shell stock to	ags, parasite	0	0			IN	OUT							
43		OUT O	NA	NO		ction from Contami	nation			_	25	0 笑	0	X		Food additives: approved and properly used				5
14	욼	ð	ð			aces: cleaned and san	tized		ŏ		20			NA	NO	Toxic substances properly identified, stored, used Conformance with Approved Procedures	+`		-	
	×	0			Proper disposition served	of unsafe food, return	ed food not re-	0	0	2	27	0	0	×		Compliance with variance, specialized process, and HACCP plan			ग	5
	_			-							_		-							_
				Goo	d Retail Practi	ces are preventive	measures to co						_		gens	, chemicals, and physical objects into food	s.			
				00	Prot in compliance		COS=corre	COO cted o					ICE	3		R-repeat (violation of the same code provis	on)			
	_	OUT				pliance Status Food and Water		COS	R	WT			UT			Compliance Status Utensils and Equipment	C	OS F	۲	WT
	8	0			d eggs used when	e required			0		4	_	n F			nfood-contact surfaces cleanable, properly designed,			Л	1
	9 0				ice from approved btained for specia	source lized processing metho	ds	8	0	2	$\vdash$	+	- 0			and used	-	+	+	
	-	OUT			Food Te	emperature Control		I			4		_			g facilities, installed, maintained, used, test strips rtact surfaces clean	_		_	1
3	1	0	contr		ning methods used	d; adequate equipment	for temperature	0	0	2	4	_	UT	vonioo	G-COT	Physical Facilities	-l'		1	1
	2				properly cooked for				0	1	4	_				water available; adequate pressure				2
	3 4				thawing methods u iters provided and			6	0	1	49	_			- T	talled; proper backflow devices waste water properly disposed			_	2
	_	OUT				d identification			-		5	_	-			s: properly constructed, supplied, cleaned		5 0		1
3	5	0	Food	i prop	erly labeled; origin	al container; required r	ecords available	0	0	1	5	2   (	<b>o</b>   a	Sarbag	e/refu	use properly disposed; facilities maintained	- 0	> o		1
		OUT			Prevention	of Food Contaminat	ion				5	_	-			ities installed, maintained, and clean	_	2	-	1
3	6	٥	Insec	ts, ro	dents, and animal	s not present		0	0	2	5	• •	0 A	Vdequa	nte ve	ntilation and lighting; designated areas used	- (		2	1
3	7	_				ring food preparation, s	torage & display	0	0	1			UT			Administrative items				
_	8 9				Cleanliness         O         O         1         55         O         Current permit posted           oths; properly used and stored         O         O         1         56         X         Most recent inspection posted					3	0									
_	0	0	Wasl		ruits and vegetable	15			ŏ		Ĕ	- 1 4	-9 I.		115	Compliance Status		ES N		WT
4	-	OUT		e uter	Prope nsils; properly stor	r Use of Utensils		0	0	-	5	,	-	Somole	2000	Non-Smokers Protection Act with TN Non-Smoker Protection Act		KLC	21	
4	2	0	Uten	sils, e	quipment and line	ns; properly stored, drie		0	0	1	5	8	T	obacc	o pro	ducts offered for sale			5	0
	3 4				/single-service art ed properly	icles; properly stored, u	ised	8	8	1	50	9]	lf	tobac	co pr	oducts are sold, NSPA survey completed	0		2	
_		~																		

actor 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 foo ified 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 conspicuou ion 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 thi 06, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

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Signature of Person In Charge

04/18/2023

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

Please call ( ) 4232098110 to sign-up for a class.	PH-2267 (Rev. 6-15)	Free food safety training cla	sses are available each mon	th at the county health department.	RDA 629
	P192201 (1004. 0=10)	Please call (	) 4232098110	to sign-up for a class.	nur des

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



#### Establishment Information

Establishment Name: Cajun Oasis Establishment Number #: 605258923

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)					
Sanitizer bucket	Chlorine	100						
Triple sink	Chlorine	100						

Equipment Temperature			
Description T	femperature ( Fahrenheit)		

Food Temperature					
Description	State of Food	Temperature (Fahrenheit)			
Honey chicken	Hot Holding	145			
Lo mein	Hot Holding	145			
White rice	Hot Holding	155			
Fried rice	Hot Holding	155			
*Egg roll	Cold Holding	48			
Breaded chicken	Cold Holding	40			
Lo mein	Cold Holding	40			

Observ	ed Vio	lations	

Total # 2

Repeated # ()

20: Small reach-in cooler holding TCS foods at 48 degrees F. Must be 41 degrees F or below.

56:

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



#### Establishment Information

Establishment Name: Cajun Oasis

Establishment Number : 605258923

#### Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 2: (IN): PIC has knowledge of symptoms and diseases of foodborne illnesses.
- 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) 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: 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: (NA) No food held under time as a public health control.
- 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.

## Establishment Information

Establishment Name: Cajun Oasis

Establishment Number : 605258923

Comments/Other Observations (cont'd)

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

### Establishment Information

Establishment Name: Cajun Oasis

Establishment Number #: 605258923

Sources						
Water	Source:	Public				
Food	Source:	Public				
	Source:					
	Source:					
	Source:					
		Food Source: Source: Source:	FoodSource:PublicSource:Source:			

#### Additional Comments