

Establishment Name

Purpose of Inspection

Address

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Type of Establishment

Remanent O Mobile

Chattanooga City

KRoutine

Firehouse Subs

Time in 02:20 PM AM / PM Time out 03:00; PM AM / PM

O Complaint

O Temporary O Seasonal

Inspection Date

09/24/2021 Establishment # 605195956 O Follow-up

3849 Dayton Blvd., STE 101

Embargoed 0 O Preliminary

O Consultation/Other

Number of Seats 49

SCORE

Risk Category

Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

10	∉ -in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		С
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	×	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	ЭK	0			Management and food employee awareness; reporting	0	0	
3	×	0			Proper use of restriction and exclusion	0	0	5
	IN	OUT	NA	NO	Good Hygienic Practices			
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5
5	滋	0		0	No discharge from eyes, nose, and mouth	0	0	0
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed	0	0	
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5
8	×				Handwashing sinks properly supplied and accessible	0	0	2
	IN	OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source	0	0	
10	0	0	0	×	Food received at proper temperature	0	0	
11	×	0			Food in good condition, safe, and unadulterated	0	0	5
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	0	0	黨		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

_					Compliance Status	COS	K	WI
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	×	0	Proper cooking time and temperatures	0	00	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	-	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		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	M		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	80	0			Toxic substances properly identified, stored, used	0	0	3
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

trol the introduction of pathogo s, chemicals, and physical objects into foods.

. PRACTICES

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	COS	R	W
	OUT				
28	0	Pasteurized eggs used where required	0	0	1
29		Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	١,
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	:
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	1
34	0	Thermometers provided and accurate	0	0	г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	•
	OUT	Prevention of Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	:
37	0	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	Г
39	0	Wiping cloths; properly used and stored	0	0	_
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1
43	0	Single-use/single-service articles; properly stored, used	0	0	r
44	0	Gloves used properly	0	0	

ect		R-repeat (violation of the same code provision Compliance Status	cos	R	W
	OUT	Utensiis and Equipment	1000		
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	ŀ
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	
47	0	Nonfood-contact surfaces clean	0	0	
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	
49	0	Plumbing installed; proper backflow devices	0	0	
50	0	Sewage and waste water properly disposed	0	0	
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	
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	L.
		Compliance Status	YES	NO	٧
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 180	0	
58		Tobacco products offered for sale	0	0	١.
59		If tobacco products are sold, NSPA survey completed	0	0	\Box

You have the right to request a l (10) days of the date of the

09/24/2021

Date Signature of Environmental Health Specialist

09/24/2021

Date

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

Free food safety training classes are available each month at the county health department. PH-2267 (Rev. 6-15) RDA 629) 4232098110 Please call (to sign-up for a class.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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Establishment Name: Firehouse Subs
Establishment Number #: |605195956

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	1.
"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.	\neg
Tents or awnings with removable sides or vents in non-enclosed areas are not completely removed or open.	
Smoke from non-enclosed areas is inflitrating into areas where smoking is prohibited.	\rightarrow
Smoking observed where smoking is prohibited by the Act.	_

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

Equipment Temperature					
Description	Temperature (Fahrenheit)				
Reach in cooler	39				
Low boy	38				

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Ham	Cold Holding	38
Turkey	Cold Holding	39
Sliced tomatoes (reach in)	Cold Holding	37
Salami	Cold Holding	38
Cut leafy greens (reach in)	Cold Holding	39
Meatballs	Hot Holding	157
Chili	Hot Holding	171
Chili (reach in)	Cold Holding	38

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Firehouse Subs Establishment Number: 605195956

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 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: Good 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 from approved sources.
- 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: No raw animal products present at facility during time of inspection.
- 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: (NA) No raw animal foods served.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See temperatures.
- 20: See temperatures.
- 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:

Additional Comments

See last page for additional comments.

^{***}See page at the end of this document for any violations that could not be displayed in this space.

^{***}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: Firehouse Subs	
Establishment Number: 605195956	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Inform	nation			1
Establishment Name: Fir	rehouse Subs			
Establishment Number #:	605195956			
Sources				
Source Type:	Food	Source:	Cheney bros	
Source Type:	Water	Source:	Public	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comme	nts			