TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

	調査	R.	No.									• ••								┥
RED FISH - KITCHEN											O Fermer's Market Food Unit	8	C)						
Establishment Name		9915								Тур	xe of I	Establi	shme			L				
Address 9915 HWY 64 (STAGE RD) Arlington			11	0.1	0 4						O Temporary O Seasonal at <u>11:15:AM</u> AM / PM									
City		_			<u> </u>	23	ment # 60526052		1.0						ne ou	IT:12: AIVI AM/PM				
Inspec						留 Follow-up				– O Pr			a g	000	0	nsultation/Other				
Purpose of Inspection O Routine A Follow-up O Complaint Risk Category O1 A 22 O3					04	çarras	iary		-			Number of S	eats	88						
	Bisk Category O 1 Image: Control of Co																			
				contrib	ating met		DBORNE ILLNESS R	_		_							de or injury.			_
INeir		icina: Iplian				ice NA=not app			ltem							ach Item as applicable. Deduct points for o pection R=repeat (violation of the				
						pliance Statu	\$	T _{COS}	R		Ē	100.00	u urre	she dun	ay 110	Compliance Status			R	WT
1 1	-	or M D	IA NO		in charge p	Supervisio resent, demons	trates knowledge, and	0				IN	ουτ		NO	Cooking and Reheating of Time/ Control For Safety (TCS) I				
			IA NO	perform	is duties	Employee He	÷ ·	0	0	5		<u>演</u> 0				Proper cooking time and temperatures Proper reheating procedures for hot hold	ing	0	8	5
2)) 3))		2		-		ood employee a iction and excluse	wareness; reporting	0	0	5		IN	оυт		NO	Cooling and Holding, Date Marking a Public Health Contro	, and Time as			
11	_		IA NO		Geo	d Hygienic Pr	ractices	Ť	0			0	0		X	Proper cooling time and temperature	D4	0	0	-
4) 5)		8				ing, drinking, or eyes, nose, and		8	00	5	19 20		00			Proper hot holding temperatures Proper cold holding temperatures		0	00	
6 3		UT N C	IA NO			ng Contamina roperly washed	rtion by Hands	0	0		21	8	0 0	0 第		Proper date marking and disposition	and consider	0 0	ŏ	Ĭ
7 🖇	8 0		0 0		e hand cont		>-eat foods or approved	0	0	5	-	IN		NA	-	Time as a public health control: procedur Consumer Advisory	es and records	•	9	_
8 C	0	UT N			ashing sink	s properly supple Approved So	ied and accessible urce	0	0	2	23	X	0	0		Consumer advisory provided for raw and food	undercooked	0	0	4
9 X			গাহ			n approved sour roper temperatu		8	00			IN	OUT	NA 🐹		Highly Susceptible Popula		_		
11 E	_	0 0 2	x o	10.000		ition, safe, and u rvailable: shell s	Inadulterated tock tags, parasite	0	0	5	24	O IN	O		_	Pasteurized foods used; prohibited foods Chemicals	not offered	0	0	•
IN IN	0	UTN	IA NO	destruc		tion from Con	tamination				25	0	0			Food additives: approved and properly u	sed	0	0	_
13 X 14 X			0			d protected ces: cleaned an	d sanitized	8	0	4	26	完 IN		r na	NO	Toxic substances properly identified, stor Confermance with Approved P		0	0	-
15 X	1	_	_	Proper served	disposition	of unsafe food, r	returned food not re-	0	-	2	27	0	0	8		Compliance with variance, specialized pr HACCP plan	ocess, and	0	0	5
			60		il Practic		ative measures to c	ontro	1 100	inte	-	tion		atho		, chemicals, and physical objects	a into fooda			
			_					GOO								, energies, and physical edges				
			0	JT=not in (compliance Comp	liance Statu	COS=corr	ected o		during						R-repeat (violation of the sam Compliance Status		COS	R	WT
28	_	UT D P	asteuriz	and anne		Food and Wate			0				UT	Lood ar	ud no	Utensils and Equipment nfood-contact surfaces cleanable, proper			_	
29		D [W	/ater an	d ice fron	n approved	source	an and a sta	0	0	2	4	5 1				and used	iy desgried,	0	0	1
30		UT 1	ariance	obtained		zed processing mporature Col		0	0	1	4	6 1	₿ V	Narews	shin	g facilities, installed, maintained, used, te	st strips	0	0	1
31	1		roper co ontrol	coling me	thods used,	adequate equip	pment for temperature	0	0	2	4	_	O N UT	Vonfoo	5-con	tact surfaces clean Physical Facilities		0	0	1
32				d property	r cooked for	r hot holding		0				8	0 1			water available; adequate pressure		0		2
33	_	_			methods us wided and a			0	00	1		_				talled; proper backflow devices waste water properly disposed		0	0	2
	_	UT	rennon	recers pro		Identification	n					_				is: properly constructed, supplied, cleaner	d	ŏ	ŏ	1
35	8	K F	ood pro	perly labe	eled; origina	I container; requ	uired records available	0	0	1	5	2 1	2	Sarbag	e/refu	use properly disposed; facilities maintaine	d	0	0	1
	0	σ		Pr	evention o	f Food Contai	mination		_		5	3	o F	Physica	l faci	ities installed, maintained, and clean		0	0	1
36	4	D In	sects, r	odents, a	nd animals	not present		0	0	2	5	4 1	箴 /	Adequa	te ve	ntilation and lighting; designated areas us	ied	0	0	1
37	8	X o	ontamir	nation pre	vented duri	ng food prepara	tion, storage & display	0	0	1		0	UT			Administrative items				
38 39				cleanline	ss perly used a	and stored		0	00	1		_				nit posted inspection posted		0	8	0
40	1	N C	X		l vegetables	5		ŏ			Ľ	~ 1 .	<u> </u>	HODE I'C	oeni i	Compliance Status			NO	WT
41	_	UT a In	JISO IA	onsis: no	Proper operly store	Use of Utens	ils .	0	0	1		7	_	Comolia	1000	Non-Smokers Protection / with TN Non-Smoker Protection Act	Act	x	01	_
42	1	0 U	tensils,	equipme	nt and linen	s; properly store	d, dried, handled	0	0	1	5	8		Tobacc	o pro	ducts offered for sale		0	0	0
43						cles; properly sto	ored, used	8	8		5	9	1	ftobac	co pri	oducts are sold, NSPA survey completed		0	0	
service	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 namer 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, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329.																			
	1	\sim	a	\sim			02/	28/2	023	3		1	R	$\mathbf{)}$	Х	Kalla	C)2/2	8/2	023
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 ****																				
PH-226	PH-2257 (Rev. 6-15) Free food safety training classes are available each month at the county health department. Please call () 9012229200 to sign-up for a class.																			

PH-2267 (Rev. 6-15)	Free food safety training of	classes are available each mo	nth at the county health department.	RDA 60
P192207 (Rev. 0-10)	Please call () 9012229200	to sign-up for a class.	hDe oz

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

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Establishment Information					
	ED FISH - KITCHEN				
Establishment Number #:	605260522				

Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						

Equipment Temperature	
Description	Temperature (Fahrenheit)

Food Temperature	State of Food	Temperature (Fahrenheit

Observed Violations
Total# 11
Repeated # ()
8:
35: Unlabeled food containers.
37: Uncovered food. Open bag of planko. Please place in comtainer with lid.
Open sauce cans stored on shelf.
Food stored on the floor in walk in freezer.
38: Employees are not wearing hair restraints while preparing food. Ex: Hair net,
baseball cap.
39: Orange wiping cloths were stored at cold holding table. Please store in
sanitizer bucket
41: Ice scoop laying on ice machine. Please cover or place in container and sit
on ice machine.
Cups used as scoops stored in flour and dry rice. Please remove.
Scoops stored in food containers must be stored with handle pointed upwards
and not touching food.
45: Free standing water in prep cooler. Cutting boards have too many grooves.
Please replace
46: Commercial dish washer is not despinsing any chlorine. No chlorine test
strips available
51: Employee restroom does not have soap and paper towels and toilet is dirty.
52: Dumpster door is open. Please keep door closed.
54: Grease build up under ventilation hood

***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: RED FISH - KITCHEN Establishment Number : 605260522

omments/Other Observations	

"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: RED FISH - KITCHEN

Establishment Number: 605260522

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: RED FISH - KITCHEN Establishment Number #: 605260522

Sources		
Source Type:	Source:	
Additional Comments		
Violation #8 was not corrected.		

Violation #13 was corrected.

Commercial dish washer is not dispensing any sanitizer. (Sodium hypochlorite)