

Establishment Name

Address

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Remanent O Mobile Type of Establishment

O Temporary O Seasonal

Chattanooga City

Subway

Time in 09:45 AM AM / PM Time out 10:30: AM AM / PM

Inspection Date

07/13/2021 Establishment # 605179660

O Follow-up

Embargoed 0 O Preliminary

O Consultation/Other

SCORE

Purpose of Inspection **K**Routine

6510 Ringgold Rd.

О3

O Complaint

Follow-up Required

级 Yes O No

Number of Seats 46

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

115	4 =in c	ompli	ence		OUT=not in compliance NA=not applicable NO=not observe	ed		0
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	-MC	0			Management and food employee awareness; reporting	0	0	
3	寒	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	黨	0		0	No discharge from eyes, nose, and mouth	0	0	0
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	滋	0		0	Hands clean and properly washed	0	0	
7	鼷	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
		OUT	NA	NO	Approved Source			
9	黨	0			Food obtained from approved source	0	0	
10	0	0	0	3%	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	100		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		Compliance Status	cos	R	WT		
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	寒	0	Proper cooking time and temperatures	0	0	5
17	8	0	0	0	Proper reheating procedures for hot holding	0	0	٠
	IN	OUT	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	_	0	0	×	Proper cooling time and temperature	0	0	
19	-	0	0	0	Proper hot holding temperatures	0	0	
20	_	×	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	335		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25		0	X		Food additives: approved and properly used	0	0	5
26	0.0	0			Toxic substances properly identified, stored, used	0	0	
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

e to control the introduction of patho s, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Caro i con amo i i mori			
28	0	Pasteurized eggs used where required	0	0	1
29	0	Water and ice from approved source	0	0	2
30	0	Variance obtained for specialized processing methods	0	0	1
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	2
32	0	Plant food properly cooked for hot holding	0	0	1
33	0	Approved thawing methods used	0	0	1
34	0	Thermometers provided and accurate	0	0	1
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	1
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	2
37	0	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	1
39	0	Wiping cloths; properly used and stored	0	0	1
40	0	Washing fruits and vegetables	0	0	1
	OUT	Proper Use of Utensils	-		
41	0	In-use utensils; properly stored	0	0	1
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	1
44	0	Gloves used properly	0	0	1

pect	un I	R-repeat (violation of the same code provision) Compliance Status	Cos	B	W
	OUT	Utensils and Equipment	1000	-	
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	125	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	2%	Physical facilities installed, maintained, and clean	0	0	-
54	0	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items			
55	0	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	V
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	١ ١
59		If tobacco products are sold, NSPA survey completed	0	0	

conspicuous manner. You have the right to request a hearing reg 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. ten (10) days of the date of the

07/13/2021

gnature of Person In Charge

Date Signature of Environmental Health Specialist

**** 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.

07/13/2021 Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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Establishment Name: Subway

Establishment Number #: |605179660

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 (Fahrenhelt)		
Triple Sink	QA	200			

Equipment Temperature		
Description	Temperature (Fahrenheit)	
Reach In Cooler	58	

Food Temperature		
Description	State of Food	Temperature (Fahrenheit
Ham	Cold Holding	39
Turkey	Cold Holding	39
Steak	Cold Holding	40
Chicken	Cold Holding	37
Meatballs	Reheating	184
*Sliced tomatoes	Cold Holding	49
*Cut Leafy Greens	Cold Holding	50

Observed Violations
Total # B
20: TCS foods on vegetable bain holding between 49-50*F. Products were removed from reach in cooler that was at 58*F. Products were removed from reach-in and moved to operable walk in cooler unit. Vegetable bain was in working order at time of inspection. 46: Automatic sanitizer dispensing unit not operable/poor repair.
53: Floors dirty behind/underneath equipment.

[&]quot;"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: Subway

Establishment Number: 605179660

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 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: (IN): Observed employees washing hands as needed.
- 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: (IN): Food products obtained 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: (NA) No raw animal products served/stored at establishment.
- 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: (IN) All TCS foods are properly reheated for hot holding.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: (IN) TCS foods holding at 135*F or above. See food temperatures listed above.
- 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: (IN) Establishment does not allow smoking inside facility.
- 58: (IN): Tobacco products not sold at establishment.

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 Name: Subway		
Establishment Number: 605179660		
Comments/Other Observations (cont'd)		
Additional Comments (cont'd)		
See last page for additional comments.		

Establishment Information

Establishment Infor	mation		
Establishment Name: S			
Establishment Number #:	605179660		
Sources			
Source Type:	Food	Source:	Approved sources noted
Source Type:	Water	Source:	Public
Source Type:		Source:	
Source Type:		Source:	
Source Type:		Source:	
Additional Comme	ents		