

Risk Category

# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

Follow-up Required

SCORE

O Farmer's Market Food Unit **Local Goat** Permanent O Mobile Establishment Name Type of Establishment 6108 Artesian Circle O Temporary O Seasonal Address Ooltewah Time in 02:10 PM AM / PM Time out 03:00; PM AM / PM City 10/24/2023 Establishment # 605306346 Embargoed 0 Inspection Date Purpose of Inspection **E**Routine O Follow-up O Complaint O Preliminary O Consultation/Other

О3

Number of Seats 270

#### RNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

12	¥=in ¢	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		Ö
					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	ЭX	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	30	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	100	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	100	0			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	黛	0	0		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-	0	0	2

	Compliance Status						R	WT
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	黨	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	٠
	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	243	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	*
22	0	0	0	氮	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	2	0			Toxic substances properly identified, stored, used	0	0	۰
	IN OUT NA NO Conformance with Approved Procedures							
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

O Yes 疑 No

### als, and physical objects into foods.

			G00	D R	a/.\	
OUT=not in compliance CO\$=correct						
		Compliance Status	cos	R	WT	
	OUT	Safe Food and Water				
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		Gloves used properly	0			

		Compliance Status	cos	R	WT
	OUT	Utensiis and Equipment			
45	0	Food and norifood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	0	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	2
49	0	Plumbing installed; proper backflow devices	0	0	2
50	0	Sewage and waste water properly disposed	0	0	2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items	$\top$		
55	0	Current permit posted	0	0	6
56	0	Most recent inspection posted	0	0	·
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	180	0	
58		Tobacco products offered for sale	0	0	0
59		If tobacco products are sold, NSPA survey completed	0	0	

ection report in a conspicuous manner. You have the right to request a hearing reg 14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. n (10) days of the date of the

10/24/2023

Signature of Person In Charge

10/24/2023 Date

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

Date

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



	Establishment Information					
	Establishment Name: Local Goat					
İ	E-table-brase Number # 1605306346					

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.	
Sarage 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)				
Triple sink High heat dishwasher	QA Heat	200	160				

Equipment Temperature						
Description Temperature ( Fahren						
Walk in cooler	37					
Reach in cooler	38					
Low boy	38					
Walk in cooler (near line)	37					

Food Temperature					
Description	State of Food	Temperature (Fahrenheit			
Raw beef (drawers)	Cold Holding	37			
Mac n cheese	Hot Holding	157			
Mashed potatoes	Hot Holding	161			
Baked potato	Hot Holding	159			
Raw chicken (drawer)	Cold Holding	37			
Ribs (walk in)	Cold Holding	38			
Raw chicken (walk in)	Cold Holding	37			
Cut leafy greens (walk in)	Cold Holding	39			
Sliced tomatoes (low boy)	Cold Holding	37			

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



### Establishment Information

Establishment Name: Local Goat Establishment Number: 605306346

## 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): 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: (IN):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: (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 cooking of raw animal products observed.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (NO): no cooling of TCS foods observed.
- 19: (IN):See temperatures.
- 20: (IN): 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: (IN): Advisory located on menu.
- 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.

<sup>\*\*\*</sup>See page at the end of this document for any violations that could not be displayed in this space.

<sup>\*\*\*</sup>See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Local Goat				
Establishment Number: 605306346				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				
occ hast page for additional comments.				

Establishment Information

Establishment Information								
Establishment Name: Local Goat								
Establishment Number #:	605306346			ĺ				
Sources								
Source Type:	Water	Source:	Public					
Source Type:	Food	Source:	Reinhart					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Commen	ts							