TENNESSEE DEPARTMENT OF HEALTH

			J		FOOD SERVICE ESTABLISHMENT INSPECTION REPORT								SCORE							
Esta	bist	hmen	t Nar		Armando's							_				Farmer's Market Food Unit Permanent O Mobile	9	f		
					1814 E. Ma	ain St.					_	Ту;	be of I	Establi	ishme	ent		L		
	ress				Chattanoog			01	າ.ງ	л г						O Temporary O Seasonal				
City						•			2.3			_			me o	ut 02:47:PM AM/PM				
Insp	ectio	on Da	rte		09/18/20	23 Establishment #	60500414	9		-	Emb	argoe	d C)						
Puŋ	oose	of In	spect	tion	ORoutine	ə Follow-up	O Complaint			O Pr	elimir	nary		c	Cor	nsultation/Other				
Risi	Cat	egor			01	<u>382</u>	03			04				Fo	-woll	up Required O Yes 🕱 No	Number of S	eats	76	
		_	isk I			eparation practices								y repo	ortec	d to the Centers for Disease Cont	rol and Preven	tion	_	
				as c	ontributing fac											control measures to prevent illn	ess or injury.			
		(14)	uric de	elgnet	ed compliance stat											I INTERVENTIONS such item as applicable. Deduct points for	category or subcate	1007)	
IN	⊨in c	ompii				nce NA=not applicable	NO=not observe									spection R=repeat (violation of th				
					Con	pliance Status		COS	R	WT		_	_	_		Compliance Status		cos	R	WT
	_	OUT	NA	NO	Dorrae is shares	Supervision	nouladay and			_		IN	ουτ	NA	NO	Cooking and Reheating of Time Control For Safety (TCS)				
1	鬣	0			performs duties	present, demonstrates k	nowledge, and	0	0	5		12	0	0		Proper cooking time and temperatures		0	8	5
2	IN XX		NA	NO	Management and	Employee Health food employee awarene	ss: reporting	0	ТОТ		17	1	0	0	0	Proper reheating procedures for hot hol		0	0	÷
	×	õ				triction and exclusion	and, independing	ō	ō	5		IN	ουτ	NA	NO	Cooling and Holding, Date Markin a Public Health Cont				
	IN		NA	NO	94	od Hygionic Practice						×	0	0	_	Proper cooling time and temperature		0		_
4	邕	0				ting, drinking, or tobacco n eyes, nose, and mouth		0	8	5	19		0	0	0	Proper hot holding temperatures Proper cold holding temperatures		0	00	
	IN	OUT	NA	NO	Prevent	ting Contamination b						1	ŏ		0	Proper date marking and disposition		ŏ	ŏ	5
	嵐	0			Hands clean and	properly washed itact with ready-to-eat for	ode or approvad	_	0		22	2 🕱	0	0	0	Time as a public health control: procedu	res and records	0	0	
7	鬣	0	0	0	alternate procedu	res followed		0	0	Ť		IN	OUT	NA	NO					
8	XX IN		NA	NO	Handwashing sin/	ks properly supplied and Approved Source	accessible	0	0	2	23	0	0	箴		Consumer advisory provided for raw an food	d undercooked	0	0	4
9	嵩	0				m approved source			0			IN	OUT	NA	NO	Highly Susceptible Popul	ations			
10	0 ※	0	0	×		proper temperature dition, safe, and unadulte	arated	8	0	5	24	0	0	8		Pasteurized foods used; prohibited food	s not offered	0	0	5
	õ	ō	×	0	Required records	available: shell stock tag		ō	ō			IN	OUT	NA	NO	Chemicals			_	
H	IN	OUT	NA	NO	destruction Prote	ction from Contamin	ation			_	25	0	0	X		Food additives: approved and properly it	ised	0		
13	2	0	0		Food separated a				0		26	1				Toxic substances properly identified, sto		0	0	•
	_	0	0			aces: cleaned and saniti of unsafe food, returned		0	0			IN		NA	NO	Conformance with Approved I Compliance with variance, specialized p		0	0	5
15	2	0			served				U	2	27	0	0	黨		HACCP plan		0	9	0
				Goo	d Retail Practi	ces are preventive i	measures to co	ontro	l the	intr	oduc	ction	ofp	atho	gens	s, chemicals, and physical object	s into foods.			
								GOO	DD R	ar/A	IL PR	LACT	TICE	8						
				00	T=not in compliance	pliance Status	COS=corre		R R		inspe	ection				R-repeat (violation of the sar Compliance Status	ne code provision)	0.06	ы	WT
		OUT				Food and Water			T N			0	TUK			Utensils and Equipment		000	~	
2					d eggs used when lice from approved				0		4	15				prope and used	rly designed,	0	0	1
	0	0	Varia		obtained for specia	lized processing method	5	ŏ	ŏ	1		6	-			g facilities, installed, maintained, used, to	est strips	0	0	1
_	_	OUT	_			emperature Control d; adequate equipment fi	or here executives			_			-			ntact surfaces clean		0	0	1
3	1	0	contr		oing metricas ase	u, adequate equipment in	or temperature	0	0	2	F	_	UT	4011100	0.001	Physical Facilities		-	-	
	2				property cooked for				0	1						d water available; adequate pressure		0		2
3	3 4				thawing methods (eters provided and			0	0	1		_				stalled; proper backflow devices d waste water properly disposed			0	2
		OUT				d identification		Ľ					-			es: properly constructed, supplied, cleane	d		õ	1
3	5	0	Food	i prop	erly labeled; origin	al container; required rec	cords available	0	0	1	5	2	o	Sarbag	e/refi	use properly disposed; facilities maintain	ed	0	0	1
		OUT			Prevention	of Food Contamination	on				5	3 2	R F	hysica	al faci	ilities installed, maintained, and clean		0	0	1
3	6	0	Insec	rts, ro	dents, and animal	s not present		0	0	2	5	ia (嵐 /	Adequa	ite ve	entilation and lighting; designated areas u	sed	0	0	1
3	7	0	Cont	amina	ation prevented du	ring food preparation, sto	orage & display	0	0	1		0	υт			Administrative items				
_	8				leanliness			0	0	1			0	Sument	t pern	mit posted		0	0	0
_	9 0				ths; properly used ruits and vegetable				0	1	5	6	0 1	Aost re	cent	inspection posted Compliance Status		O YES		WT
	-	OUT			Prope	r Use of Utensils			· · ·							Non-Smokers Protection	Act			
4	12				nsils; properly stor quipment and line	ed ns; properly stored, dried	i handled		8			7 8				with TN Non-Smoker Protection Act oducts offered for sale		X	읭	0
- 4	3	0	Sing	e-use	/single-service art	icles; properly stored, us		0	0	1	5	š				roducts are sold, NSPA survey complete	t	ŏ	ŏ	Ť
4	4	0	Glov	es us	ed properly			0	0	1										

alure 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. 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 anner 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 port. T.C.A. sections (8-14-703, 01-14-705, 68-14-709, 68-14-710, 68-14-715, 68-14-716, 4-5-320,

A	ient	il	ma
Signature of P	erson In Ch	arge	

09/18/2023

 \geq Date Signature of Environmental Health Specialist

09/18/2023

Date

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

PH-2267 (Rev. 6-15)	Free food safety training cla	RDA 625		
Priszzor (Nev. 6-15)	Please call () 4232098110	to sign-up for a class.	NDA 023

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Armando's Establishment Number #: 605004149

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)					

Equipment Temperature	
Decoription	Temperature (Fahrenheit)

ecoription	State of Food	Temperature (Fahrenheit

Observed Violations	
Total # 4	
Repeated # 0	
39:	
JJ.	
41:	
53:	
54:	

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Armando's Establishment Number : 605004149

Comments/Other Observations	
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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: Armando's

Establishment Number: 605004149

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Armando's Establishment Number # 605004149

SourcesSource Type:Source:Source Type:Source:Source Type:Source:Source Type:Source:Source Type:Source:Source Type:Source:

Additional Comments