

### TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Alleia Establishment Name Permanent O Mobile Type of Establishment 25 E. Main St., Suite 101 O Temporary O Seasonal

Address Chattanooga Time in 02:09 PM AM / PM Time out 02:36; PM AM / PM City

12/20/2021 Establishment # 605208431 Embargoed 0 Inspection Date

 Routine ₩ Follow-up O Complaint O Preliminary O Consultation/Other Purpose of Inspection О3

Number of Seats 140 Risk Category 04 Follow-up Required O Yes 疑 No ase Control and Prevention

#### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS status (IN, OUT, HA, HO) for ea

| IN-in compliance OUT-not in compliance NA-not applicable NO-not observed |                   |     |    |     |   | id  |   | 0  |
|--|-------------------|-----|----|-----|---|-----|---|----|
|  | Compliance Status |     |    |     |   | cos | R | WT |
|  | IN                | OUT | NA | NO  | Supervision   |     |   |    |
| 1  | ×                 | 0   |    |     | Person in charge present, demonstrates knowledge, and<br>performs duties                  | 0   | 0 | 5  |
|  | IN                | OUT | NA | NO  | Employee Health   |     |   |    |
| 2  | TXC               | 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  | 0                 | 0   |    | X   | Proper eating, tasting, drinking, or tobacco use  | 0   | 0 |    |
| 5  | *                 | 0   |    | 0   | No discharge from eyes, nose, and mouth   | 0   | 0 |    |
|  | IN                | OUT | NA | NO  | Proventing Contamination by Hands   |     |   |    |
| 6  | 0                 | 0   |    | 300 | Hands clean and properly washed   | 0   | 0 |    |
| 7  | 釵                 | 0   | 0  | 0   | No bare hand contact with ready-to-eat foods or approved<br>alternate procedures followed | 0   | 0 | 5  |
| 8  | ×                 | 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<br>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   | M                 | 0   |    |     | Proper disposition of unsafe food, returned food not re-                                  | 0   | 0 | 2  |

|    | Compliance Status |     | cos | R   | WT  |   |   |   |
|----|-------------------|-----|-----|-----|---|---|---|---|
|    | IN                | OUT | NA  | NO  | Cooking and Reheating of Time/Temperature<br>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<br>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   | 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<br>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 | 黨                 | 0   |     |     | Toxic substances properly identified, stored, used                          | 0 | 0 | 9 |
|    | IN                | OUT | NA  | NO  | Conformance with Approved Procedures  |   |   |   |
| 27 | 0                 | 0   | ×   |     | Compliance with variance, specialized process, and<br>HACCP plan            | 0 | 0 | 5 |

#### s, chemicals, and physical objects into foods.

| GK |     |  |     |   |    |  |  |
|----|-----|--|-----|---|----|--|--|
|    |     | OUT=not in compliance COS=corr   |     |   |    |  |  |
|    |     | Compliance Status  | cos | R | WT |  |  |
|    | OUT |  |     |   |    |  |  |
| 28 | _   | Pasteurized eggs used where required                                       | 0   | 0 | 1  |  |  |
| 29 |     | Water and ice from approved source   | 0   | 0 | 2  |  |  |
| 30 |     | Variance obtained for specialized processing methods                       | 0   | 0 | 1  |  |  |
|    | OUT | Food Temperature Control   |     |   |    |  |  |
| 31 | 氮   | Proper cooling methods used; adequate equipment for temperature<br>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 | 10  | Gloves used properly   | 0   | 0 | -  |  |  |

| pecti | on  | R-repeat (violation of the same code provision)  |     |    |   |
|-------|-----|--|-----|----|---|
|       |     | Compliance Status  | COS | R  | W |
|       | OUT | Utensiis and Equipment   |     |    |   |
| 45    | 0   | Food and norfood-contact surfaces cleanable, properly designed,<br>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   |     |    |   |
| 55    | 0   | Current permit posted  | 0   | 0  | - |
| 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   | - X | 0  |   |
| 58    |     | Tobacco products offered for sale  | 0   | 0  |   |
| 59    |     | If tobacco products are sold, NSPA survey completed                                      | 0   | 0  |   |

most recent inspection report in a conspicuous manner. You have the right to requis 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329. er. You have the right to request a hi n ten (10) days of the date of th

12/20/2021 Date Signature of Environmental Health Specialist 12/20/2021

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

Date

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



| Establishment Name: Alleia Establishment Name: [605208431]  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 benefity one (21) years of age or older. Age-restricted venue does not require each person admitted by a provided or open.  Age-restricted venue does not require each person admitted by open.  The disconsistance of the international "Non-Omoking" 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.  Simoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.  Garage type doors with removable sides or vents in non-enclosed areas are not completely removed or open.  Simoke from non-enclosed areas is infiltrating into areas where smoking is prohibited.  Warewashing info  Warewashing info  Sanitizer Type  PPM  Temperature (Fahrenh  Food Temperature  Description  Temperature (Fahrenh  Food Temperature  Description |  |  |                               |                   |          |  |  |  |  |
|---|--|--|-------------------------------|-------------------|----------|--|--|--|--|
| NSPA Survey - To be completed if #57 is "No"  | Establishment Information                        |  |                               |                   |          |  |  |  |  |
| 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  Sanittzer Type  PPM  Temperature ( Fahrenh  Equipment Temperature  Description  Temperature ( Fahrenh  |  |  |                               |                   |          |  |  |  |  |
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| Equipment Temperature   Name   Sanitizer Type   PPM   Temperature   Temperature   Fahrenh   |  |  |                               |                   |          |  |  |  |  |
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| Warewashing Info Machine Name Sanitizer Type PPM Temperature ( Fahrenh  Equipment Temperature Description Temperature ( Fahrenh   | Smoke from non-enclosed areas is infiltrating in | nto areas where smoking is p                                     | rohibited.                    |                   |          |  |  |  |  |
| Equipment Temperature  Description  Food Temperature  Sanitizer Type  PPM  Temperature (Fahrenh  Temperature (Fahrenh   | Smoking observed where smoking is prohibited     | d by the Act.  |                               |                   |          |  |  |  |  |
| Equipment Temperature  Description  Food Temperature  Sanitizer Type  PPM  Temperature (Fahrenh  Temperature (Fahrenh   |  |  |                               |                   |          |  |  |  |  |
| Equipment Temperature  Description Temperature (Fahrenh  Food Temperature   | Warewashing Info                                 |  |                               |                   |          |  |  |  |  |
| Food Temperature  Temperature (Fahrenh  | Machine Name                                     | Sanitizer Type   | PPM                           | Temperature ( Fat | renhelt) |  |  |  |  |
| Food Temperature  Temperature (Fahrenh  |  |  |                               |                   |          |  |  |  |  |
| Food Temperature  Temperature (Fahrenh  | 5  |  |                               |                   |          |  |  |  |  |
| Food Temperature  |  |  |                               | I =               |          |  |  |  |  |
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| Description State of Food Temperature ( Fahrenh   | Food Temperature                                 |  |                               |                   |          |  |  |  |  |
|   | Description                                      |  | State of Food                 | Temperature (Fah  | renhelt) |  |  |  |  |
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## TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



| Establishment Information       |  |
|---------------------------------|--|
| Establishment Name: Alleia      |  |
| Establishment Number: 605208431 |  |
|                                 |  |

| Comments/Other Observations  |    |
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# Additional Comments

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| Establishment Name: Alleia             |  |  |  |  |
|--|--|--|--|--|
| Establishment Number: 605208431        |  |  |  |  |
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| Comments/Other Observations (cont'd)   |  |  |  |  |
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Establishment Information

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|-----------------------------------|---------|--|--|--|--|--|
| Establishment Name: Alleia        |         |  |  |  |  |  |
| Establishment Number #: 605208431 |         |  |  |  |  |  |
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| Sources                           |         |  |  |  |  |  |
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