TENNESSEE DEPARTMENT OF HEALTH

			FOOD SER	VICE ESTA	BL	ISH	M	EN	T II	NSI	PEC	TIC	ON REPORT	SCO	RE				
ß		1	C. C.																
Esta	bisi	nmen	t Nar		Checker's						Tre		Establi		Farmer's Market Food Unit Ø Permanent O Mobile	9	r)	
Address					4348 Ringgold Rd. Type of Establishment O mobile O Temporary O Seasonal														
City					Chattanooga	Time in	03	3:0	0 F	PM	_ A1	M/P	M Tir	ne ou	л 03:15: PM АМ/РМ				
Insp	ectio	n Da	rte		05/23/2022 Establishment	60517645	9			Emba	argoe	d 0)						
Purp	oose	of In	spec		ORoutine AFollow-up	O Complaint			O Pr	elimir	ary	_	0	Cor	nsuitation/Other				
Risk	Cat	egor			O1 \$22	O 3			O 4						up Required O Yes 鑬 No	Number of Se		8	
		R	isk I												I to the Centers for Disease Contr control measures to prevent illne		ion		
			urik de	elone											INTERVENTIONS ach liem as applicable. Deduct points for c	ategory or subcate	err.)		
IN	⊧in c	ompii			OUT=not in compliance NA=not applicable		ю		c						pection R=repeat (violation of the	same code provisio	n)		
	IN	OUT	NA	NO	Compliance Status Supervision		cos	R	WT	H		0.0		110	Compliance Status Cooking and Reheating of Time/T		cos	R	WT
1	展	0			Person in charge present, demonstrates	knowledge, and	0	0	5		IN			NO	Control For Safety (TCS) F		_	_	
	IN	OUT	NA	NO	performs duties Employee Health				-		<u>爲</u> 0	0	0		Proper cooking time and temperatures Proper reheating procedures for hot hold	ng	8	8	5
	XX	0			Management and food employee aware Proper use of restriction and exclusion	ness; reporting	0	0	5		IN	ουτ	NA	NO	Cooling and Holding, Date Marking				
-	_		NA	NO	Good Hygienic Practic	ces	ľ		-	18	0	0	0	23	a Public Health Centre Proper cooling time and temperature		0	0	_
	黨				Proper eating, tasting, drinking, or tobac No discharge from eyes, nose, and mou		8	0	5	19	100	0		0	Proper hot holding temperatures Proper cold holding temperatures		8	응	
	IN	OUT	NA	NO	Preventing Contamination						X			0	Proper date marking and disposition		ŏ	ŏ	5
6	直区	0	0	0	Hands clean and properly washed No bare hand contact with ready-to-eat f	foods or approved	0	0	5	22	12	0	0	0	Time as a public health control: procedure	es and records	0	0	
8		0	-	-	alternate procedures followed Handwashing sinks properly supplied an	d accessible		6	2	-	_	_	NA	NO	Consumer Advisory Consumer advisory provided for raw and	undercooked			
	IN 嵐	OUT	NA	NO	Approved Source Food obtained from approved source				_	23	O IN	O OUT	NA	NO	food Highly Susceptible Popula		0	0	4
10	0	0	0		Food received at proper temperature		0	0		24	_	0	20	110	Pasteurized foods used; prohibited foods		0	0	5
11 12	0	0	×	0	Food in good condition, safe, and unadu Required records available: shell stock to		0	0	5	H	IN	OUT		NO	Chemicals	not offered	-	-	•
				NO	destruction Protection from Contam	ination	-		_	25	0	0		~~~	Food additives: approved and properly us	ed	0	তা	
		0			Food separated and protected	No. 1		0		26	黛	0	<u> </u>		Toxic substances properly identified, stor	ed, used	X	0	5
14 15	2	0	0	l.	Food-contact surfaces: cleaned and san Proper disposition of unsafe food, return		0	0	5	27	IN O	OUT	NA	NO	Conformance with Approved P Compliance with variance, specialized pr		0	0	5
	~	-			served						-				HACCP plan		-	-	
				Goo	d Retail Practices are preventive	measures to co						_		gens	, chemicals, and physical objects	into foods.			
				00	T=not in compliance	COS=corre		n-site	during				5		R-repeat (violation of the sam	e code provision)			
_	_	OUT		_	Compliance Status Safe Food and Water		COS	R	WT	F		UTI	_	_	Compliance Status Utensils and Equipment		cos	R	WT
2	8	0	Past		d eggs used where required ice from approved source		0	8	1	4		o F			nfood-contact surfaces cleanable, properl and used	y designed,	0	0	1
3	0	Õ	Varia		btained for specialized processing method	ods	ŏ	ŏ	1		6				g facilities, installed, maintained, used, ter	t strips	0	0	1
	_	OUT	_	erco	Food Temperature Control bing methods used; adequate equipment	t for temperature	0			4	_	-			tact surfaces clean		-	0	1
3		8	cont	rol	properly cooked for hot holding		-	0	2			UT OF	int and	loold	Physical Facilities water available; adequate pressure		0	_	0
3	_	0	Appr	oved	thawing methods used		0	0	1	4	9)	R P	Numbir	ng ins	talled; proper backflow devices		0	0	2
3	-	0 OUT		mome	eters provided and accurate Food Identification		0	0	1	5		-			waste water properly disposed s: properly constructed, supplied, cleaned			8	2
3	_		_	i prop	erly labeled; original container; required r	records available	0	0	1	-	_				use properly disposed; facilities maintaine		ō	ō	1
		OUT			Prevention of Food Contaminat	tion				5	3	o F	hysica	il faci	ities installed, maintained, and clean		0	0	1
3	6	0	Inse	cts, ro	dents, and animals not present		0	0	2	5	4	<u>^</u>	\dequa	te ve	ntilation and lighting; designated areas us	ed	٥	0	1
3	7	0	Cont	amina	tion prevented during food preparation, s	storage & display	0	0	1		0	υт			Administrative items				
3	_	-			leanliness ths; properly used and stored		0	0	1		_			-	nit posted inspection posted		8	0	0
4	0	0	Was		ruits and vegetables			ŏ		Ľ	- 1	- Iu			Compliance Status				WT
4	_	OUT O		e ute	Proper Use of Utensils nsils; properly stored		0	0		5		-	Somplia	ance	Non-Smokers Protection A with TN Non-Smoker Protection Act		XI	01	
4	_	0	Uten	sils, e	quipment and linens; properly stored, dri /single-service articles; properly stored, to		0	0	1	5	8				ducts offered for sale oducts are sold, NSPA survey completed		8	0	0
_	4				ed properly			ŏ		2	-	14			and and and a second second second		-	-1	
															Repeated violation of an identical risk factor e. You are required to post the food service er				
man	ner a	nd po	st the	most		nner. You have the rig	ht to r	eques				ling th	is repo	t by f	iling a written request with the Commissioner				
	r	/		/	<u> </u>	05/2	23/2	022	2	(\subseteq	$\frac{1}{2}$	λ)	Elle	0	5/2	3/2	2022
		-		~ _		00/2					~ ~					0			

K	11.4
Signature o	f Person In Charge

05/23/2022	and? Elle
Date	Signature of Environmental Health Specialist

05/23/2022

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

PH-2267 (Rev. 6-15)	Free food safety training class	RDA 629		
Pris2207 (Nev. 0-10)	Please call () 4232098110	to sign-up for a class.	NDA 025

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Checker's Establishment Number #: 605176459

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. Smoking observed where smoking is prohibited by the Act.

Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)					

Equipment l'emperature	
Description	Temperature (Fahrenheit)

Food Temperature Decorption	State of Food	Temperature (Fahrenheit

Observed Violations	
Total # 2	
Repeated # 0	
31:	
49:	

***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: Checker's

Establishment Number: 605176459

Comments/Other Observations	 	
0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 8: 9: 0: 1: 7: 7: 8: 9: 0: 1: 7: 7: 8: 9: 0: 1: 7: 7: 8: 9: 0: 1: 7: 7: 8: 9: 0: 1: 7: 7: 8: 9: 0: 1: 7: 7: 8: 9: 0: 1: 7: 7: 7: 8: 9: 0: 1: 7: 7: 7: 7: 7: 7: 7: 7: 7: 7		
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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: Checker's

Establishment Number: 605176459

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Checker's Establishment Number # 605176459

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

Additional Comments

Priority item # 26 corrected. See original report dated 5/23/22.