

Establishment Name

Inspection Date

Purpose of Inspection

Routine

Address

City

## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT

OI IIEAEIII	
INSPECTION REPORT	SCORE

O Consultation/Other

O Farmer's Market Food Unit Blvd. Smokehouse Permanent O Mobile Type of Establishment 3230 1/2 Wilcox Blvd O Temporary O Seasonal Chattanooga Time in 02:01; PM AM / PM Time out 02:17; PM AM / PM 04/28/2021 Establishment # 605249810 Embargoed 0

Number of Seats 0 Risk Category О3 Follow-up Required O Yes 疑 No

04

O Preliminary

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

s (IN, OUT, NA, HO) for a

10	<b>¥</b> =in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		0
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	鼷	٥			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	ЭK	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	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5
5	黨	0		0	No discharge from eyes, nose, and mouth	0	0	
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	100	0		0	Hands clean and properly washed	0	0	
7	級	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5
8	82	0			alternate procedures followed Handwashing sinks properly supplied and accessible	0	0	2
0	IN.	OUT	NΔ	NO	Approved Source	-	_	-
9	200	0	THE C	no	Food obtained from approved source	0	0	
10		ŏ	0	3	Food received at proper temperature	ŏ	ŏ	
11	×	_	ŭ	_	Food in good condition, safe, and unadulterated	ŏ	ŏ	5
	-	_	0-2	_	Required records available: shell stock tags, parasite	-		-
12	0	0	×	0	destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	×	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2

∰ Follow-up

O Complaint

_					Compliance Status	COS	к	WI
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		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		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	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	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	OUT	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	菜	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

## duction of pathogens, chemicals, and physical objects into foods.

						JL PR
		OUT=not in compliance COS=con				
		Compliance Status	cos	R	WT	l ∟
	OUT					
28	0	Pasteurized eggs used where required	0	0	1	49
29		Water and ice from approved source	0	0	2	1 🗀
30	0	Variance obtained for specialized processing methods	0	0	1	1 4
	OUT	Food Temperature Control		_		ш
31	ᄣ	Proper cooling methods used; adequate equipment for temperature control	0	0	2	47
32	0	Plant food properly cooked for hot holding	0	0	1	48
33	0	Approved thawing methods used	0	0	1	49
34	0	Thermometers provided and accurate	0	0	1	50
	OUT	Food Identification		_		51
35	0	Food properly labeled; original container; required records available	0	0	1	52
	OUT	Prevention of Food Contamination				53
36	0	Insects, rodents, and animals not present	0	0	2	54
37	0	Contamination prevented during food preparation, storage & display	0	0	1	
38	0	Personal cleanliness	0	0	1	55
39	0	Wiping cloths; properly used and stored	0	0	1	56
40	0	Washing fruits and vegetables	0	0	1	
	OUT	Proper Use of Utensils				
41	0	in-use utensils; properly stored	0	0	1	57
42	ō		0	ō	1	58
43	0	Single-use/single-service articles; properly stored, used	0	0	1	58
44		Gloves used properly	Ŏ	Ŏ	-	_

pecti	on	R-repeat (violation of the same code provision		_	
		Compliance Status	cos	R	W
	OUT	Utensils and Equipment	_	_	_
45	0	Food and nonfood-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	-
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	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1
53	0	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	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- 3%	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request a h ten (10) days of the date of the 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320

04/28/2021

of Environmental Health Specialist

04/28/2021

Signature of Person In Charge

Date Signat

Date

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

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



Establishment Information							
Establishment Name: Blvd. Smokehou							
Establishment Number # 605249810							
NSPA Survey - To be completed if							
Age-restricted venue does not affirmatively res twenty-one (21) years of age or older.	trict access to its buildings o	r facilities at all times to	persons who are				
Age-restricted venue does not require each pe	rson attempting to gain entry	to submit acceptable for	orm of identification.				
"No Smoking" signs or the international "Non-S	moking" symbol are not con	spicuously posted at ev	ery entrance.				
Garage type doors in non-enclosed areas are r	not completely open.						
Tents or awnings with removable sides or vent	s in non-enclosed areas are	not completely remove	d or open.				
Smoke from non-enclosed areas is infiltrating it	nto areas where smoking is	prohibited.					
Smoking observed where smoking is prohibited	d by the Act.						
Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature ( Fair	renheit)			
	,,						
Equipment Temperature							
Description			Temperature ( Fah	renhelt)			
Food Tomporature							
Food Temperature Description		State of Food	Temperature ( Fah				
Decomption		state of Food	reinperature ( rain	reminent/			
I			1				

bserved Violations	
tal# [_	
peated # O	
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



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See last page for additional comments.

Additional Comments

<sup>\*\*\*</sup>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: Blvd. Smokehouse	
Establishment Number: 605249810	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
See last page for auditional comments.	

Establishment Information				
Establishment Name: Blvd. Smokehouse				
Establishment Number #: 605249810				
Sources				
Source Type:	Source:			
Source Type:	Source:			
Source Type:	Source:			
Source Type:	Source:			
Source Type:	Source:			
Additional Comments				