#### TENNESSEE DEPARTMENT OF HEALTH VICE ESTABLISHMENT INSPEC N DEDO

		ł	10.00			FOOD S	ERVICE ESTA	BL	ISH	IME	IN1	r IN	ISF	PEC	TIC	ON REPORT	SCO	RE		
Ś			T. C.																	
Esta	bīst	nem	t Nar		Ooo Wee I	BBQ						-				Farmer's Market Food Unit Permanent O Mobile	7			
Addr	ess				4272 Bonr	ny Oaks Dr.						Typ	e of t	Establi	shme	O Temporary O Seasonal				
City					Chattanoo	ga	Time in	12	2:4	5 F	M	A	/ / PI	M Tir	ne o	и 01:45: РМ АМ/РМ				
Insp	ectic	n Da	rte		07/13/20	022 Establist	ment <b>6053081</b> 4	3			Emba	rgoe	d 0							
Purpose of Inspection Routine O Follow-up O Complaint								O Pr	limin	ary		0	Cor	nsuitation/Other						
Risk	Cat	_			<b>O</b> 1	<b>3</b> 82	<b>O</b> 3			<b>O</b> 4	_					up Required 邕 Yes O No	Number of Se	eats	12	
																to the Centers for Disease Contro control measures to prevent illner		ion		
		(14	rk de	algaat	ted compliance str		DBORNE ILLNESS RI NO) for each numbered item									INTERVENTIONS ach liom as applicable. Deduct points for ca	tegory or subcate	(467 <b>/</b> )		
IN	in c	ompii			OUT=not in compl	iance NA=not ap	plicable NO=not observe	юl		CC						spection R=repeat (violation of the	same code provisio	n)		
	IN	OUT	NA	NO	Col	mpliance State Supervisi		COS	K	wi	h	IN	олт	NA	NO	Compliance Status Cooking and Roheating of Time/To		cos	ĸ	WT
1	0	篾			Person in charge performs duties	e present, demons	strates knowledge, and	0	0	5	16	1	0	0		Control For Safety (TCS) For Proper cooking time and temperatures		0	o	
2			NA	NO		Employee H d food employee	wareness; reporting	0		_			ŭ			Proper reheating procedures for hot holding		00	ŏ	5
3	×	0				striction and exclu		0	0	5			OUT	NA	NO	Cooling and Holding, Date Marking, a Public Health Contro				
4	_	_	NA			lood Hyglenic P Isting, drinking, or		0			18 19	0 家	00	0	0.0	Proper cooling time and temperature Proper hot holding temperatures		0		
5	×	0	NA	0	No discharge fro	m eyes, nose, an	d mouth	ō	ō	5	20	25	0	0		Proper cold holding temperatures Proper date marking and disposition		0	8	5
6	0	黨		0	Hands clean and	d properly washed		_	0	5	22		õ	ō		Time as a public health control: procedure	s and records	ō	0	
	×	0	٥	0	alternate proced	ures followed	o-eat foods or approved	0	0			IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and	undors a block		_	
_	IN	OUT	NA	NO		Approved Sc				_	23	0	0	黛	110	food		0	0	4
10	<u>尚</u>	0	0	*	Food received at	om approved sou t proper temperat	are	0			24	IN O	OUT	NA	NO	Highly Susceptible Populat Pasteurized foods used; prohibited foods		0	0	5
11 12	_	0	82	0	Required records	ndition, safe, and s available: shell s	unadulterated itock tags, parasite	0	0	5	-	IN	OUT	-	NO	Chemicals		-	-	
H	IN	OUT	NA	NO		ection from Co	ntamination				25	0	0	X		Food additives: approved and properly us			0	5
13 14		8	0		Food separated Food-contact su	and protected rfaces: cleaned ar	nd sanitized	8	8	4 5	26	0 IN		NA	NO	Toxic substances properly identified, store Conformance with Approved Pr		0	0	
	×	0			Proper dispositio served	on of unsafe food,	returned food not re-	0	0	2	27	0	0	冥		Compliance with variance, specialized pro HACCP plan	cess, and	0	0	5
				Goo	d Retail Pract	tices are preve	ntive measures to co	ontro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects	into foods.			
										ar'al			ICE	5						
	_			00		mpliance Statu			R R		inspe					R-repeat (violation of the same Compliance Status		COS	R	WT
20	_	OUT		eurize	Safe ed eggs used whe	e Food and Wat are required	er	0	0	1	4	_	UT D	ood ar	nd no	Utensils and Equipment infood-contact surfaces cleanable, properly	/ designed,	0		
29	_	0	Wate	er and	lice from approve		methods	0	8	Ż	$\vdash$	+	0			and used		-	0	1
		OUT	_	er ee.		Comperature Co	pment for temperature			_	4		_			g facilities, installed, maintained, used, tes ntact surfaces clean	t strips	0	0	1
31		0	contr	lo			prisent for temperature	0	0	2		0	UT			Physical Facilities				
33	_				properly cooked thawing methods			8	0	1	4	_	_			I water available; adequate pressure stalled; proper backflow devices		0	응	2
34		O OUT		mome	eters provided an	d accurate od identificatio		0	0	1	5	_				waste water properly disposed is: properly constructed, supplied, cleaned		0	0	2
35	_			l prop			uired records available	0	0	1	5	_				use properly disposed; facilities maintained		0	<u></u>	1
		OUT			Prevention	of Food Conta	mination				5	3 8	K P	hysica	I faci	lities installed, maintained, and clean		0	0	1
36	;	0	Insec	ts, ro	idents, and anima	als not present		0	0	2	5	1 8	R A	dequa	de ve	ntilation and lighting; designated areas use	ed .	0	٥	1
37		0				uring food prepara	ntion, storage & display	0	0	1			υτ			Administrative Items				
38	_	-	-		cleanliness ths: properly use	d and stored		0	0	1	5					nit posted inspection posted		0	8	0
40	)		Was	- X	ruits and vegetab				õ			-	_			Compliance Status Non-Smokers Protection A			NO	WT
41		0	In-us		nsils; properly sto	pred					5					with TN Non-Smoker Protection Act		X	의	
42	3	0	Singl	e-use	e/single-service ar	ens; properly stor rticles; properly st	ed, dried, handled ored, used		0		54 54	5				ducts offered for sale oducts are sold, NSPA survey completed		0	0	0
4	_				ed properly				0										_	
servi	te es	tablis	hmen	t perm	nit. Items identified	as constituting im-	ninent health hazards shall b	e corre	cted i	mmed	ately	or ope	ration	is shall	ceas	Repeated violation of an identical risk factor n e. You are required to post the food service es	tablishment permit	in a c	onspi	cuous
		C.A.	sectio	ns 68-	14-703, 68-14-776, 6		ous manner. You have the rig 68-14-711, 68-14-715, 68-14-7			e a hei	ring r	egard	ing thi	is repo	nt by f	Iling a written request with the Commissioner w	nthin ten (10) days i	of the	date	of this
2	Ì	l	n	N	Jun	rgh	07/1	L3/2	022	2		_	2	F		$\langle \rangle$	0	7/1	3/2	022

Signature of Person In Charge

PH-2267 (Rev. 6-15)

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

Free food safety training classes are available each month at the county health department. Please call ( ) 4232098110 to sign-up for a class.

Date Signature of Environmental Health Specialist

Date

RDA 629

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



## Establishment Information

Establishment Name: Ooo Wee BBQ Establishment Number #: 605308143

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)
Triple sink (not set up)	chlorine		

Equipment l'emperature	
Description	Temperature (Fahrenheit)

Food Temperature						
enheit)						

#### Observed Violations

Total # 9 Repeated # 0

1: Multiple priorities marked.

6: Hand sinks improperly stocked.

8: Handsinks improperly stocked.

17: Items held in cabinet reheated improperly.

21: Date marking inadequate.

26: Chemical bottle improperly labelled.

47: Nonfood-contact surfaces soiled/ dirty.

53: Parts of facility in poor repair.

54: Light source inadequate within refrigerator.



## Establishment Information

Establishment Name: Ooo Wee BBQ

Establishment Number : 605308143

### Comments/Other Observations

- 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.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.

9: Source approved.

- 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: (IN) All raw animal foods cooked to proper temperatures.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See temperatures.

20: See temperatures.

- 22: (NO) Time as a public health control is not being used during the inspection.
- 23: (NA) Establishment does not serve animal food that is raw or undercooked.
- 24: (NA) A highly susceptible population is not served.
- 25: (NA) Establishment does not use any additives or sulfites on the premises.
- 27: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes. 57:

58:

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

Additional Comments See last page for additional comments.

# Establishment Information

Establishment Name: Ooo Wee BBQ

Establishment Number: 605308143

Comments/Other Observations (cont'd)

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

## Establishment Information

Establishment Name: Ooo Wee BBQ Establishment Number # 605308143

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

# Additional Comments