TENNESSEE DEPARTMENT OF HEALTH

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ALL NO SHA

						FOOD SERVI	ICE ESTA	BL	ISH	M	ENT	Г IP	ISI	PEC	TIC		sco	RE		
Estab Addre City		men	t Nan	ne	State of Con 301 E. Main Chattanooga	Street	Time in	02	2:1	8 F				Establi M Ti		O Farmer's Market Food Unit @ Permanent O Mobile O Temporary O Seasonal ut 03:02; PM AM / PM	98	E	3	
Inspec	ction	n Da	rte		04/01/202	2 Establishment #	60525585	8			Emba	arace	d 0)						
Purpo					ORoutine	份 Follow-up	O Complaint			_	elimin		_		Cor	nsultation/Other				
Risk					01	3022	03			04		,					mber of Se	ate	27	0
NISK C	-010				÷ .			beha		-	st c	omin	only			to the Centers for Disease Control and			_	<u> </u>
				as c	ontributing facto											control measures to prevent illness or in	njury.			
		(Ma	rk de	lanat	ed compliance status											INTERVENTIONS ach item as applicable. Deduct points for category o	er subcates	err.)		
IN-ir		mpīi			OUT=not in compliance		NO=not observe									pection R=repeat (violation of the same co				
_	_	_	_	_	Comp	liance Status		COS	R			_	_	_	_	Compliance Status	_	cos	R	WT
	-	-	NA	NO		Supervision						IN	ουτ	NA	NO	Cooking and Roheating of Time/Tempers Control For Safety (TCS) Foods	eture			
	. L	0			Person in charge pro performs duties	esent, demonstrates kn	owledge, and	0	0	5		0	0	0	×	Proper cooking time and temperatures		8	0	5
2 3			NA	NO		Employee Health od employee awarenes	s: reporting	0			17	0	0	0	X	Proper reheating procedures for hot holding		0	0	9
		ŏ			Proper use of restric		io, reporting	ŏ	ŏ	5		IN	ουτ	NA	NO	Cooling and Holding, Date Marking, and T a Public Health Control	ime as			
_	-	-	NA	NO	Good	d Hygionic Practicos					18	×	0	0	0	Proper cooling time and temperature		0		_
4 8	Ķ.	0				g, drinking, or tobacco u	use	0	0	5		0	0			Proper hot holding temperatures		0	<u> </u>	
5 2	N C	000	NA			yes, nose, and mouth g Contamination by	Hands	0	0	_	20	20	00	8		Proper cold holding temperatures Proper date marking and disposition		8	윙	5
_	_	0			Hands clean and pro			0	0		22		0	X		Time as a public health control: procedures and n			0	
7 8	ĸ	0	0	0	No bare hand conta alternate procedures	ct with ready-to-eat food s followed	ds or approved	0	0	°		IN	OUT			Consumer Advisory		-	-	
8 8	K	<u> </u>		110	Handwashing sinks	properly supplied and a	ccessible	0	0	2	23	_	0	0		Consumer advisory provided for raw and underco	oked	0	0	4
9 8		0	NA	NO	Food obtained from	Approved Source approved source		0	ο	-	-	IN	OUT	NA	_	food Highly Susceptible Populations	-	-	- 1	
10 (5	0	0	20	Food received at pro	oper temperature		0	0		24	0	0	83		Pasteurized foods used: prohibited foods not offer	red	0	0	5
11 8	_	_		_		ion, safe, and unadulter, vailable: shell stock tags				5	H		_					-	-	•
		0	XX NA	0	destruction	tion from Contaminat		0	0			IN	OUT			Chemicals		~	~	
13 5					Food separated and		tion	0	0	4		0 ()	0			Food additives: approved and properly used Toxic substances properly identified, stored, used	1	0	허	5
14 8	K	0	0			es: cleaned and sanitize		0	0	5		IN	OUT	NA		Conformance with Approved Procedure	res		_	
15 🖇	8	٥			Proper disposition o served	f unsafe food, returned t	food not re-	0	0	2	27	×	0	0		Compliance with variance, specialized process, a HACCP plan	nd	0	0	5
				Goo	d Retail Practice	a are preventive m	ensures to co	atro	1 10.0	inte	oduc	tion		atho		, chemicals, and physical objects into fe	oode			
								600					-	_	90110	, chemicals, and physical objects into h				
				00	T=not in compliance		COS=corre							8		R-repeat (violation of the same code pr	ovision)			
		DUT	_	_		iance Status ood and Water		COS	R	WT			υτI		_	Compliance Status Utensils and Equipment		cos	R	WT
28	_		Past	urize	d eggs used where r			0	0	1	4		_	ood ar	nd no	nfood-contact surfaces cleanable, properly design	ed,			
29 30		0	Wate	r and	ice from approved s			0	8	2		-				and used		0	0	1
	_	DUT				perature Control				_	4		_	Varew	ashin	g facilities, installed, maintained, used, test strips		0	0	1
31	T		Prop		oling methods used; a	adequate equipment for	r temperature	0	0	2	4	_	_	lonfoo	d-con	itact surfaces clean		0	0	1
32	+				properly cooked for	hot holding		0	0	1	4		UT D F	lot and	f cold	Physical Facilities		0	0	2
33		0	Appr	oved	thawing methods use	ed		0	0	1	4	9 (O P	Numbir	ng ins	stalled; proper backflow devices		0	0	2
34	_	0	Then	nome	eters provided and ac	courate		0	0	1	5	_	-			waste water properly disposed is: properly constructed, supplied, cleaned			응	2
35	-	_	Food	0000		container, required reco	wie available	0	0	1	5	_				use properly disposed; facilities maintained		0	6	1
			1000	piop		Food Contamination		Ŭ	<u> </u>	<u> </u>	5		-			Ities installed, maintained, and clean			 	1
36			Insec	ts, ro	dents, and animals n			0	0	2	5	_	-			ntilation and lighting; designated areas used		õ	0	1
37	+	0	Cont	amina	tion prevented durin	g food preparation, stor	age & display	0	0	1		0	UT			Administrative Items				
38	_	_			leanliness		-g	0	0	1	5	5 (0 0	Jurrent	perm	nit posted	-	0	0	
39		Ó	Wipir	ng clo	ths; properly used ar	nd stored		0	0	1	_					inspection posted		0	0	0
40	_	O	_	hing f	ruits and vegetables	Use of Utensils		0	0	1		_	_			Compliance Status Non-Smokers Protection Act		YES	NO	WT
41		0	In-us		nsils; properly stored				0		5					with TN Non-Smoker Protection Act		X		
42	_					properly stored, dried, es; properly stored, use			0		5					ducts offered for sale oducts are sold, NSPA survey completed		8		0
44					ed properly	es, property stored, date	-		ŏ		Ľ	-			pri	carried and areas, that is and the southpressed		-	91	

Failure 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. Rems 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 manner 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 report. T.C.A. sections (8-14-703, 68-14-708, 68-14-709, 68-14-719, 68-14-716, 4-5-329.

	04/01/2022	\mathcal{R}	04/01/2022			
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date			
	*** Additional food safety information can be found on ou	website, http://tn.gov/health/article/eh-foodservi	ce ****			
Free food safety training classes are available each month at the county health department.						

PH-2267 (Rev. 6-15)	Free food safety training cla	RDA 629		
(Net: 0-15)	Please call () 4232098110	to sign-up for a class.	104 023

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: State of Confusion Establishment Number #: 605255858

Warewashing Info									
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)						

Equipment Temperature						
Description	Temperature (Fahrenheit)					

Description	State of Food	Temperature (Fahrenheit

Observed Violations	
Total # 1 Repeated # 0	
Repeated # 0	
31:	

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Establishment Information

Establishment Name: State of Confusion Establishment Number : 605255858

Comments/Other Observations		
Comments/Other Observations		
0:		
1:		
2:		
3:		
4:		
5:		
6:		
7:		
8:		
9:		
0:		
1:		
2:		
3:		
4:		
5:		
6:		
7: Logs all up to date.		
7:		
8:		

***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.

***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: State of Confusion

Establishment Number : 605255858

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: State of Confusion Establishment Number #. 605255858

Sources		
Source Type:	Source:	

Additional Comments