



TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE
82

Establishment Name Public House Type of Establishment Farmer's Market Food Unit Permanent Mobile
 Address 1110 Market St., STE 101 Temporary Seasonal
 City Chattanooga Time in 11:05 AM AM / PM Time out 12:15 PM AM / PM
 Inspection Date 12/29/2021 Establishment # 605208772 Embargoed 0
 Purpose of Inspection Routine Follow-up Complaint Preliminary Consultation/Other
 Risk Category 01 02 03 04 Follow-up Required Yes No Number of Seats 116

Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health interventions are control measures to prevent illness or injury.

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

| Compliance Status | | | | | COS | R | WT |
|--|----------------------------------|-----------------------|-----------------------|-----------------------|-----|---|----|
| IN | OUT | NA | NO | | | | |
| Supervision | | | | | | | |
| 1 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| Employee Health | | | | | | | |
| 2 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 3 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| Good Hygienic Practices | | | | | | | |
| 4 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 5 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| Preventing Contamination by Hands | | | | | | | |
| 6 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 7 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 8 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 2 |
| Approved Source | | | | | | | |
| 9 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 10 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 11 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 12 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| Protection from Contamination | | | | | | | |
| 13 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 4 |
| 14 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 15 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 2 |

| Compliance Status | | | | | COS | R | WT |
|---|----------------------------------|----------------------------------|----------------------------------|----------------------------------|-----|---|----|
| IN | OUT | NA | NO | | | | |
| Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | | | | | |
| 16 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 17 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| Cooling and Holding, Date Marking, and Time as a Public Health Control | | | | | | | |
| 18 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 19 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 20 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 21 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| 22 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | | | 5 |
| Consumer Advisory | | | | | | | |
| 23 | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 4 |
| Highly Susceptible Populations | | | | | | | |
| 24 | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | | | 5 |
| Chemicals | | | | | | | |
| 25 | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | | | 5 |
| 26 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 5 |
| Conformance with Approved Procedures | | | | | | | |
| 27 | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | | | 5 |

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES

| Compliance Status | | | | | COS | R | WT |
|---|----------------------------------|-----------------------|-----------------------|-----------------------|-----|---|----|
| OUT | | | | | | | |
| Safe Food and Water | | | | | | | |
| 28 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 29 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 2 |
| 30 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| Food Temperature Control | | | | | | | |
| 31 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 2 |
| 32 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 33 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 34 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| Food Identification | | | | | | | |
| 35 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| Prevention of Food Contamination | | | | | | | |
| 36 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 2 |
| 37 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 38 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 39 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 40 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| Proper Use of Utensils | | | | | | | |
| 41 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 42 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 43 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 44 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |

| Compliance Status | | | | | COS | R | WT |
|-----------------------------------|----------------------------------|-----------------------|-----------------------|-----------------------|-----|---|----|
| OUT | | | | | | | |
| Utensils and Equipment | | | | | | | |
| 45 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 46 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 47 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| Physical Facilities | | | | | | | |
| 48 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 2 |
| 49 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 2 |
| 50 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 2 |
| 51 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 52 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 53 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| 54 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 1 |
| Administrative Items | | | | | | | |
| 55 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 0 |
| 56 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 0 |
| Compliance Status | | | | | | | |
| Non-Smokers Protection Act | | | | | | | |
| 57 | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 0 |
| 58 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 0 |
| 59 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | | | 0 |

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. Items 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.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

Signature of Person In Charge Ja Ell Date 12/29/2021 Signature of Environmental Health Specialist [Signature] Date 12/29/2021

**** 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: Public House
 Establishment Number #: 605208772

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) |
|--------------|----------------|-----|---------------------------|
| Dish machine | Chlorine | 0 | |

Equipment Temperature

| Description | Temperature (Fahrenheit) |
|-------------|---------------------------|
| | |

Food Temperature

| Description | State of Food | Temperature (Fahrenheit) |
|-----------------|---------------|---------------------------|
| Chx salad | Cold Holding | 38 |
| Hard boiled egg | Cold Holding | 39 |
| Cooked veg | Hot Holding | 149 |
| Beans | Hot Holding | 162 |
| Grits | Hot Holding | 145 |
| Grits | Reheating | 172 |
| Cut toms | Cold Holding | 41 |
| Raw chx | Cold Holding | 38 |
| Pasta | Cooling | 100 |
| Raw chx | Cold Holding | 38 |
| Raw salmon | Cold Holding | 37 |
| Raw scallop | Cold Holding | 37 |
| Chx | Cold Holding | 41 |
| Burger | Cooking | 176 |
| Tartar sauce | Cold Holding | 41 |

Observed Violations

Total # 7

Repeated # 0

1: Pic unfamiliar with correct sanitizer set up at 3 sink.

14: Dish machine reading 0 ppm. Sani buckets and 3 sink reading 0 ppm. Triple sink is meant to be set up with quaternary ammonia, but the establishment is out of QT ammonia and has chlorine hooked up instead. The system is not pulling chlorine correctly resulting in sanitizer buckets at 0ppm.

23: Items on menu that are served under minimum required cook temp are not labeled or indicated by the food item.

31: Pasta cooling in walkin in deep container. Product was still in cooling time frame. Removed and placed on an ice bath. Large amounts of food should be cooled in small batches or using ice baths.

31: Onion rings cooked and held at room temp through lunch service. Cooked vegetables should be held at 135F or above, properly cooled and held at 41F or below, or using time in lieu of temperature control. Reviewed tilt policy with PIC.

39: Wiping towels stored on the ground in dry storage area. Clean towels should be stored off of the ground.

41: Tongs on pickle breading station stored in room temperature standing water.

Utensils should be stored dry, in water 135F or above, under running water, or in product.



Establishment Information

Establishment Name: Public House

Establishment Number : 605208772

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 drinking from an approved container which is stored properly.
- 5: (IN) No employees exhibiting persistent coughing, sneezing, runny nose, or watery eyes.
- 6: Observed hand washing.
- 7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
- 8: (IN): All handsinks are properly equipped and conveniently located for food employee use.
- 9: 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.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (IN) All raw animal foods cooked to proper temperatures.
- 17: (IN) All TCS foods are properly reheated for hot holding.
- 18: Observed food cooling in adequate time period.
- 19: See food temps.
- 20: See food temps.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NO) Time as a public health control is not being used during the inspection.
- 24: (NA) A highly susceptible population is not served.
- 25: (NA) Establishment does not use any additives or sulfites on the premises.
- 26: (IN) All poisonous or toxic items are properly identified, stored, and used.
- 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.

***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: Public House

Establishment Number : 605208772

Comments/Other Observations (cont'd)

Additional Comments (cont'd)

See last page for additional comments.

Establishment Information

Establishment Name: Public House

Establishment Number #: 605208772

Sources

Source Type: Food Source: Reinhardt, inland

Source Type: Water Source: Tnam

Source Type: Source:

Source Type: Source:

Source Type: Source:

Additional Comments