

City

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

94

Southern Squeeze

Establishment Name

Address

Southern Squeeze

Type of Establishment

Type of Establishment

O Mobile

O Temporary

O Seasonal

Inspection Date 09/07/2021 Establishment # 605252397 Embargoed 0

Chattanooga

Purpose of Inspection Routine O Follow-up O Complaint O Preliminary O Consultation/Other

Risk Category O1 III2 O3 O4 Follow-up Required III Yes O No Number of Seats 14

isk 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.

Time in 09:55 AM AM/PM Time out 10:25: AM AM/PM

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IH, OUT, HA, HO) for each numbered Item. For Items marked OUT, mark COS or R for each Item as applicable. Deduct points for category or subcategory.

IIN	∳-in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		CC)S=cc	rrecte	d on-si	te duri	ng ins	pection
					Compliance Status	cos	R	WT						Complia
	IN	оит	NA	NO	Supervision				Г	IN	оит	NA	NO	Cooking and
1	器	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	0	0	0	XX.	Proper cooking tir
	IN	OUT	NA	NO	Employee Health	-			17	0	O	0	90.00	Proper reheating
2	300	0			Management and food employee awareness; reporting	0	0	\Box						Cooling and He
3	×	0			Proper use of restriction and exclusion	0	0	5		IN	OUT	NA	NO	
	IN	OUT	NA	NO	Good Hygienic Practices				18	0	0	0	X	Proper cooling tim
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	15		0	0	0	Proper hot holding
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	l ° l	20	122	0	0		Proper cold holding
	IN	OUT	NA	NO	Proventing Contamination by Hands				21	1 28	0	0	0	Proper date mark
6	100	0		0	Hands clean and properly washed	0	0		27	0	0	×	0	Time as a public h
7	級	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5	Ľ		_			Time as a public i
	-		_		alternate procedures followed	_				IN	OUT	NA	NO	
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2	23	0	0	M		Consumer adviso
		OUT	NA	NO	Approved Source		_	=	-		_	0-0		food
9	黨	0			Food obtained from approved source	0	0			IN	OUT	NA	NO	Highly
10	0	0	0	×	Food received at proper temperature	0	0	١. ا	24	0	0	333		Pasteurized foods
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	L.		Ŭ	000		r distediseed roods
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			IN	ОИТ	NA	NO	
	IN	OUT	NA	NO	Protection from Contamination				25		0	X		Food additives: as
13	黛	0	0		Food separated and protected	0	0	4	20	黨	0			Toxic substances
14	0	×	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Conforman
15	×	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	×	0	0		Compliance with v HACCP plan

					Compliance Status	cos	R	WT
	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	0	寒	Proper cooking time and temperatures	0	0	5
17	0	0	0	320	Proper reheating procedures for hot holding	0	0	۰
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	涎	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	335		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	26		Food additives: approved and properly used	0	0	-
26	X	0			Toxic substances properly identified, stored, used	0	0	٥
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	×	0	0		Compliance with variance, specialized process, and HACCP plan	0	0	5

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

L PRACTICES

			GOO		
		OUT=not in compliance COS=corr			
		Compliance Status	cos	R	W
	OUT	Caro i con amo i i mon			
28	0	Pasteurized eggs used where required	0	0	
29	0	Water and ice from approved source	0	0	
30	0	Variance obtained for specialized processing methods	0	0	
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	
32	0	Plant food properly cooked for hot holding	0	0	г
33	0	Approved thawing methods used	0	0	г
34	0	Thermometers provided and accurate	0	0	т
	OUT	Food Identification		_	h
35	0	Food properly labeled; original container; required records available	0	0	Γ
	OUT	Prevention of Feed Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	338	Contamination prevented during food preparation, storage & display	0	0	Γ
38	0	Personal cleanliness	0	0	Г
39	0	Wiping cloths; properly used and stored	0	0	Г
40	0	Washing fruits and vegetables	0	0	Г
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	Г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г
43	0	Single-use/single-service articles; properly stored, used	0	0	Г
44	10	Gloves used properly	0	0	г

pecti		R-repeat (violation of the same code provision) Compliance Status	cos	R	W
	OUT	Utensiis and Equipment	000		
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	
50	0	Sewage and waste water properly disposed	0	0	- 3
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	_
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	١.
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	Ľ
		Compliance Status	YES	NO	W
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	١ (
59		If tobacco products are sold, NSPA survey completed	0	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.C. Sections 68-24-703, 68-14-716, 58-14-706, 68-14-719,

09/07/2021

Signature of Person In Charge

Date Signature of Environmental Health Specialist

09/07/2021

**** 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 classes are available each month at the county health department.

Please call () 4232098110 to sign-up for a class.

Date

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Southern Squeeze
Establishment Number #: 605252397

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 (Fahrenhelt)						
Triple sink	QA	0							
Dish machine	Chlorine	0							

Equipment Temperature						
Description		Temperature (Fahrenheit)				

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Garbanzo beans	Cold Holding	39
Cut leafy greens	Cold Holding	39
Chili	Hot Holding	155
Quinoa	Hot Holding	150

Observed Violations
Total # 2
Repeated # ()
14: 0 ppm QA at triple sink. 0 ppm chlorine at dish machine. Using bleach in
triple sink and sanitizer buckets until sanitizer is replenished.
37: Dusty fan blowing on food prep area.

^{***}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: Southern Squeeze Establishment Number: 605252397

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 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.
- 6: Proper handwashing observed.
- 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: Food obtained from approved source.
- 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: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: Proper hot holding temperatures observed.
- 20: Proper cold holding temperatures observed.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (NA) No food held under time as a public health control.
- 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.
- 26: (IN) All poisonous or toxic items are properly identified, stored, and used.
- 27: Warning label for juice located on bottles.

57:

58:

Additional Comments

See last page for additional comments.

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

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Southern Squeeze	
Establishment Number: 605252397	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
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Establishment Information

Establishment Information									
Establishment Name: So	uthern Squeeze								
Establishment Number #:	605252397			i i					
Sources									
Source Type:	Water	Source:	Public						
Source Type:	Food	Source:	Public						
Source Type:		Source:							
Source Type:		Source:							
Source Type:		Source:							
Additional Commen	nts								