

Establishment Name

Purpose of Inspection

Address

City

Checker's

Chattanooga

Routine

4348 Ringgold Rd.

# FO

TE	NNESSEE	DEPARTMENT	OF HEALTH	
OD SE	RVICE EST	<b>TABLISHMENT</b>	INSPECTION	REPORT

O Farmer's Market Food Unit

SCORE

Number of Seats 8

Permanent O Mobile Type of Establishment

O Temporary O Seasonal

11/16/2021 Establishment # 605176459 Embargoed 0 Inspection Date

類 Follow-up

O Consultation/Other

Time in 02:30 PM AM / PM Time out 02:45; PM

Risk Category О3 Follow-up Required

O Complaint

O Preliminary

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

- 12	¥=in c	ompli	ence		OUT=not in compliance NA=not applicable NO=not observ	ed		CC	\$=co	rrecte	d on-s
匚					Compliance Status	cos	R	WT			
	IN	OUT	NA	NO	Supervision					IN	оит
1	盔	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	×	0
	IN	OUT	NA	NO	Employee Health				17		
2	30	0			Management and food employee awareness; reporting	0	0	П			
3	黨	0			Proper use of restriction and exclusion	0	0	5		IN	OUT
	IN	OUT	NA	NO	Good Hygienic Practices				18	0	0
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19	嵩	0
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	Ľ	20	0-00	0
		OUT	NA	NO		Preventing Contamination by Hands			21	200	0
6	巡	0		0	Hands clean and properly washed	0	0		22	100	l٥
7	級	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5		IN	OUT
8	X	0			Handwashing sinks properly supplied and accessible	0	0	2	23	0	6
	IN	OUT	NA	NO	Approved Source				23	1	Ľ
9	黨	0			Food obtained from approved source	0	0			IN	OUT
10	0	0	0	×	Food received at proper temperature	0	0	] _ [	24	0	0
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	-	_	Ľ
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0			IN	OUT
	IN	OUT	NA	NO	Protection from Contamination				25		0
13	黛	0	0		Food separated and protected	0	0	4	26	窦	0
14	×	0	0		Food-contact surfaces: cleaned and sanitized	X	0	5		IN	OUT
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0

Compliance Status						COS	R	WT
	IN	оит	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	×	0	0	0	Proper cooking time and temperatures	0	0	5
17	*	0	0	0	Proper reheating procedures for hot holding	0	0	,
	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	24	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	<b>X</b>		Food additives: approved and properly used	0	0	5
26	2	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

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Caro i con amo i i mori			_
28	0	Pasteurized eggs used where required	0	0	1
29	0		0	0	
30	0	Variance obtained for specialized processing methods	0	0	1
	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	r
33	0	Approved thawing methods used	0	0	7
34	0	Thermometers provided and accurate	0	0	Г
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	ŀ
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	:
37	0	Contamination prevented during food preparation, storage & display	0	0	ŀ
38	0	Personal cleanliness	0	0	г
39	0	Wiping cloths; properly used and stored	0	0	_
40	0	Washing fruits and vegetables	0	0	'
	OUT	Proper Use of Utensils			Π
41	0	In-use utensils; properly stored	0	0	г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	7
43	0		0	0	r
-					

ignature of Person In Charge

pecti		R-repeat (violation of the same code provision)  Compliance Status	Cos	R	W
	OUT	Utensils and Equipment	1000	-	
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	125	Warewashing facilities, installed, maintained, used, test strips	0	0	
47	0	Nonfood-contact surfaces clean	0	0	_
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	Γ:
49	0	Plumbing installed; proper backflow devices	0	0	
50	0	Sewage and waste water properly disposed	0	0	-
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	_
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	١.
53	2%	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	- 100	0	
58		Tobacco products offered for sale	0	0	١ ١
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request a (10) days of the date of the

11/16/2021

Date Signature of Environmental Health Specialist Date

\*\*\*\* 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. PH-2267 (Rev. 6-15) RDA 629 ) 4232098110 Please call (

11/16/2021

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



Establishment Information				
Establishment Name: Checker's				
Establishment Number #  605176459				
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 ( Fai	renheit)
	.,			
Equipment Temperature				
Description			Temperature ( Fah	renhelt)
Food Tomporature				
Food Temperature Description		State of Food	Temperature ( Fah	ranhali)
Decomption		State of Pood	Temperature ( Pan	reminent/

bserved Violations	
otal # 2 epeated # 0	
epeated # 0	
6:	
3:	
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# TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information	
Establishment Name: Checker's	
Establishment Number: 605176459	

Comments/Other Observations	
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# Additional Comments

See last page for 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: Checker's	
Establishment Number: 605176459	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information						
Establishment Name: Checker's						
Establishment Number #: 605176459						
Sources						
Source Type:	Source:					
Source Type:	Source:					
Source Type:	Source:					
Source Type:	Source:					
Source Type:	Source:					
Additional Comments						
***Priority item # 14 corrected. See original report dat	red 11/16/21.***					