

City

### TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit The Bread Basket Remanent O Mobile Establishment Name Type of Establishment 1301 Dorchester Road, Suite 101 O Temporary O Seasonal Address Chattanooga Time in 10:15 AM AM/PM Time out 10:45; AM AM/PM

11/09/2022 Establishment # 605302998 Embargoed 0 Inspection Date

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

Number of Seats 2 Risk Category О3 Follow-up Required O Yes 疑 No

# FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

es (IH, OUT, HA, HO) for a

IN	in ¢	compli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		0	05=0	соп	recte	d on-si	te duri	ing int	spec	
_					Compliance Status	cos	R	WT	] [						_	
	IN	OUT	NA	NO	Supervision				П		IN	оит	NA	NO		
1	M	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	١,	16	0	0	XX	0	Pro	
	IN	OUT	NA	NO	Employee Health		-			17	Ö	ŏ	8	ŏ	Pro	
2	-300	0			Management and food employee awareness; reporting	0	0	$\overline{}$	1 1						c	
3	×	0			Proper use of restriction and exclusion	0	0	5	Н		IN	OUT	NA	NO	Pr	
	IN	OUT	NA	NO	Good Hygienic Practices				1 17	18	0	0	×	0	Pro	
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	1 13	19	0	0	文	0	Pro	
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	l °	ΙÞ	20	0	0	200		Pro	
	IN	OUT	NA	NO	Preventing Contamination by Hands				1 [3	21	0	0	246	0	Pro	
6	100	0		0	Hands clean and properly washed	0	0		ΙG	22	0	0	×	0	Tin	
7	800	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5	5	Ľ	-	_	_		_	
_	-		_		alternate procedures followed	_			J D	$\Box$	IN	OUT	NA	NO		
8	250	0			Handwashing sinks properly supplied and accessible	0	0	2	l Is	23	0	l٥l	M		Co	
	IN	-	NA	NO	Approved Source	-		_	l L		_	-			foc	
9	黨	0			Food obtained from approved source	0	0		LЦ	_	IN	OUT	NA	NO		
10	0	0	0	200	Food received at proper temperature	0	0	١.	H	24	0	0	333		Pa	
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	Ľ		_	ŭ	-		1.0	
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0		Ш		IN	ОИТ	NA	NO		
	IN	OUT		NO	Protection from Contamination					25	0	0	-XX		Fo	
13	0	0	8		Food separated and protected	0	0	4	] [3	26	80	0			Tα	
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5	lſ		IN	OUT	NA	NO		
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	[	27	0	0	×		Co HA	

ш	Compliance Status						R	WT
	IN	OUT	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	300	0	Proper reheating procedures for hot holding	0	0	Ů
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	×	0	Proper cooling time and temperature	0	0	
19		0	文	0	Proper hot holding temperatures	0	0	1 1
20	0	0	<b>X</b>		Proper cold holding temperatures	0	0	5
21	0	0	380	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	333		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0		巡		Food additives: approved and properly used	0	0	5
26	黨	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

### s to control the introduction of pathogens, chemicals, and physical objects into foods.

		OUT=not in compliance COS=corr				
		Compliance Status	COS	R	W	
	OUT					
28	0	Pasteurized eggs used where required	0	0	1	
29		Water and ice from approved source	0	0		
30	0	Variance obtained for specialized processing methods	0	0	١,	
	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	1	
34	0	Thermometers provided and accurate	0	0	г	
	OUT	Food Identification				
35	0	Food properly labeled; original container; required records available	0	0	•	
	OUT	Prevention of Feed Contamination				
36	0	Insects, rodents, and animals not present	0	0	:	
37	0	Contamination prevented during food preparation, storage & display	0	0	1	
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	Г	
	OUT	Proper Use of Utensils	$\overline{}$			
41	0	In-use utensils; properly stored	0	0	г	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1	
43	0	Single-use/single-service articles; properly stored, used	0	0	r	
44	0	Gloves used properly	0	0		

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pecti		R-repeat (violation of the same code provision Compliance Status	COS	R	W
	OUT	Utensils and Equipment	1		
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	
47	0	Nonfood-contact surfaces clean	0	0	
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	-:
49	0	Plumbing installed; proper backflow devices	0	0	- 7
50	0	Sewage and waste water properly disposed	0	0	- 2
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	_
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	٠
53	0	Physical facilities installed, maintained, and clean	0	0	-
54	0	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items	$\top$		
55	0	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	_ '
		Compliance Status	YES	NO	٧
		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 h ten (10) days of the date of th

11/09/2022 Date Signature of E Signature of Person In Charge

11/09/2022

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 ( to sign-up for a class.

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



Establishment Information				
Establishment Name: The Bread Bask				
Establishment Number #: [605302998	3			
NSPA Survey - To be completed it Age-restricted venue does not affirmatively re-		or facilities at all times to	namone who are	
twenty-one (21) years of age or older.	strict access to its buildings	or facilities at all times to	persons wno are	
Age-restricted venue does not require each pe	erson attempting to gain entr	ry to submit acceptable f	form of identification.	
"No Smoking" signs or the international "Non-	Smoking" symbol are not co	nspicuously posted at ev	very entrance.	
Garage type doors in non-enclosed areas are	not completely open.			
Tents or awnings with removable sides or ven	ts in non-enclosed areas are	e not completely remove	d or open.	
Smoke from non-enclosed areas is inflitrating	into areas where smoking is	prohibited.		
Smoking observed where smoking is prohibite	d by the Act.			
Warewashing Info				
Machine Name	Sanitizer Type	PPM	Temperature ( Fait	renhelti
Three comp sink	QA			
Three comp sink	QΛ			
Equipment Temperature				
Description			Temperature ( Fah	renhelt)
Food Temperature				
Description		State of Food	Temperature ( Fah	renhelt)

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



#### Establishment Information

Establishment Name: The Bread Basket Establishment Number: 605302998

#### 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: (IN) Observed proper handwashing by employees.
- 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: (IN) 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: No raw animal products in facility
- 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: (NA) No raw animal foods served.
- 17: (NA) No TCS foods reheated for hot holding.
- 18: (N.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: (NA) Establishment does not cold hold TCS foods.
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 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: (NA) Establishment is not required to have a variance or HACCP plan, performs no special processes.

57:

58:

### Additional Comments

See last page for additional comments.

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

<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: The Bread Basket	
Establishment Number: 605302998	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
see last page for additional comments.	

Establishment Information								
Establishment Name: The Bread Basket								
Establishment Number #: 605302998								
Sources								
Source Type:	Food	Source:	Signal mtn location					
Source Type:	Water	Source:	Water is from approved source					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Comme	ents							