#### TENNESSEE DEPARTMENT OF HEALTH PERCOT \_ ---------\_\_\_\_ \_\_\_

120

						FOOD SER	VICE ESTA	BL	ISH	IMI	ENT	- 11	ISF	PEC	TIC	DN REPORT	SCO	RE		
8		H			Saks Win	g Shak										O Farmer's Market Food Unit	9	C		
Esta	blish	nem	t Nar	ne								Тур	xe of E	Establi	shme	ent Permanent O Mobile	J			
Add	ress				3911 Brai						_					O Temporary O Seasonal				
					L:4	8 F	PM	A	M / PI	M Tir	ne o	л <u>02:22</u> : <u>РМ</u> АМ/РМ								
Insp	ectio	n Da	rte		10/05/2	023 Establishment	<u>60522243</u>	0		-	Emba	rgoe	d 0							
Purp	xose	of In	spect	tion	Routine	O Follow-up	O Complaint			<b>O</b> Pr	elimin	ary		0	Cor	nsuitation/Other				
Risk	Cat	egon	, .		<b>O</b> 1	3822	<b>O</b> 3			<b>O</b> 4				Fo	ilow-	up Required O Yes 🕱 No	Number of S	eats	0	
		R														to the Centers for Disease Contr control measures to prevent illne	ol and Prevent			
						FOODBO	RNE ILLNESS RI	SK F	ACTO	ORS	AND	PUI	BLIC	HEA	LTH	INTERVENTIONS ach Hem as applicable. Deduct points for ci				
IN	∙in co	(CD ompīii		Ngna		pliance NA=not applicable			Relation			_				pection Rerepent (violation of the			)	
_	_	_	_			ompliance Status			R				_		_	Compliance Status			R	WT
	_	-	NA	NO	Parson in char	Supervision ge present, demonstrates	Inculation and			_		IN	ουτ	NA	NO	Cooking and Reheating of Time/T Control For Safety (TCS) F				
1		0	NA	110	performs duties	5	÷ ·	0	0	5		*	0			Proper cooking time and temperatures		0	8	5
2	X		NA	NO	Management a	Employee Health ind food employee awarer		0	0		"	0	0	*		Proper reheating procedures for hot hold Cooling and Holding, Date Marking	-	0	0	
3		0			Proper use of r	restriction and exclusion		0	0	5		IN	OUT		NO	a Public Health Contro				
4	IN X		NA			Good Hygienic Practic tasting, drinking, or tobacc		0	0			区区	0	0		Proper cooling time and temperature Proper hot holding temperatures		0	0	
5	24	0		0	No discharge fr	rom eyes, nose, and mout	th	ŏ	ŏ	5	20	25	0	0		Proper cold holding temperatures		0	0	5
	IN 注	001	NA			enting Contamination nd properly washed	by Hands	0	0	-	21	0	0	0		Proper date marking and disposition			0	
7	×	0	0	0		contact with ready-to-eat f	oods or approved	0	0	5	"	O IN	O	NA		Time as a public health control: procedure Consumer Advisory	is and records	0	0	
8	×	0		110		sinks properly supplied an	d accessible	0	0	2	23	0	0	12		Consumer advisory provided for raw and	undercooked	0	0	4
_	_	_	NA	NO	Food obtained	Approved Source from approved source		0	0	-		IN	OUT		NO	food Highly Susceptible Popular	tions	_		
10		8	0	$\gtrsim$		at proper temperature ondition, safe, and unadu	Iterated	8	8	5	24	0	0	×		Pasteurized foods used; prohibited foods	not offered	0	0	5
	_	ŏ	×	0	Required recor	ds available: shell stock t		ŏ	ŏ	Ť	H	IN	OUT	NA	NO	Chemicals				
	IN		NA	NO	destruction Pre	stection from Contami	nation				25	0	0	X		Food additives: approved and properly us	ed	0	0	6
13 14		8				d and protected urfaces: cleaned and san	tized	8	8	4	26	N N	0 OUT	NA		Toxic substances properly identified, store Conformance with Approved Provider Provi		0	0	Ŷ
	ž	0				tion of unsafe food, return		0	0	2	27	0	0	×	110	Compliance with variance, specialized pr HACCP plan		0	0	5
				Goo	d Retail Prac	ctices are preventive	measures to co	ontro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects	into foods.			
								GOO	D RI	ar/.	L PR	ACT	ICE	3						
_	_			00	T=not in complian Co	ce Impliance Status	COS=corre		R		inspe	ction				R-repeat (violation of the same Compliance Status		COS	R	WT
	_	OUT	Dest		Sa	fe Food and Water			· · ·				UT			Utensils and Equipment				
2		0	Wate	er and	ed eggs used wh fice from appro-	ved source		0	8	2	4	5 (				nfood-contact surfaces cleanable, propert and used	y designed,	0	0	1
3	-	0 001	Varia	ince		cialized processing metho Temperature Control	ds	0	0	1	4	5 3	® v	Varew	ashin	g facilities, installed, maintained, used, tes	t strips	0	0	1
3	_	0				sed; adequate equipment	for temperature	0	0	2	4	_	-	lonfoo	d-cor	tact surfaces clean		0	0	1
3		-	contr Plant		property cooker	d for hot holding		-	1 1	1	4		UT O ⊢	lot and	Loold	Physical Facilities water available; adequate pressure		0	o	2
3	3	0	Appr	oved	thawing method	ds used		0	0	1	4		ΟP	lumbir	ng ins	talled; proper backflow devices		0	0	2
3	_	O OUT	Then	mom	eters provided a	nd accurate ood identification		0	0	1	5	_	-			waste water properly disposed is: properly constructed, supplied, cleaned		0	0	2
3	_	_	Food	i prop		ginal container; required r	ecords available	0	0	1	5	_				use properly disposed; facilities maintained		0	ō	1
		OUT			Preventio	on of Feed Contaminat	lion				5	5 0	o P	hysica	I faci	ities installed, maintained, and clean		0	0	1
3	6	×	Insec	ts, ro	dents, and anim	nais not present		0	0	2	5	1	0 A	dequa	đe ve	ntilation and lighting; designated areas us	ed	0	0	1
3	7	X	Cont	amin	ation prevented	during food preparation, s	torage & display	0	0	1		0	UT			Administrative items				
3	_	-	-		leanliness	ad and stored		0	0	1	5					nit posted		00	0	0
3	_				ths; properly us ruits and vegeta			0	0	1	5	<u>,   (</u>		icist re	Cent	inspection posted Compliance Status			NO	WT
4	_	OUT	0.47	a i de	Pro nsils; properly si	per Use of Utensils				1	5		-	ome	1000	Non-Smokers Protection A with TN Non-Smoker Protection Act	ct	x		
4	2	0	Uten	sils, e	equipment and li	inens; properly stored, drie		0	0	1	5	5	T	obacc	o pro	ducts offered for sale		0	0	0
4					a/single-service ed properly	articles; properly stored, u	ised		8		5	9	If	tobac	co pr	oducts are sold, NSPA survey completed		0	0	
	re to	corre	ict an	y viol	ations of risk facto											Repeated violation of an identical risk factor				
man	ter ar	nd po	st the	most	recent inspection	report in a conspicuous ma	nner. You have the rig	the to r	eques							e. You are required to post the food service en ling a written request with the Commissioner y				
repo	ter 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 rt. T.C.A. sections (8-14-703, 68-14-708, 68-14-708, 68-14-709, 68-14-719,																			

Joe Luts	10/05/2023		10/05/2023
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date
**** Additional f	ood safety information can be found on our	website, http://tn.gov/health/article/eh-foodservice ****	

PH-2267 (Rev. 6-15)	Free food safety training cla	sses are available each mor	th at the county health department.	RDA 629
(New. 0-10)	Please call (	) 4232098110	to sign-up for a class.	hDr 025

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



#### Establishment Information

Establishment Name: Saks Wing Shak Establishment Number # 605222430

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)						
Triple sink	Chlorine	50							

Equipment Temperature	
Description	Temperature (Fahrenheit)
Cold prep case	38

Description	State of Food	Temperature (Fahrenheit
Chicken wing	Cooking	196
Wing	Cooking	188
Ning	Hot Holding	166
Raw chicken	Cold Holding	37
Slaw	Cold Holding	38
Slaw	Cooling	50
Raw fish	Cold Holding	40

Observed Violations
Total # 3 Repeated # 0
Repeated # 0
36: Flies present
37:
46: Clean sink

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



### Establishment Information

Establishment Name: Saks Wing Shak

Establishment Number : 605222430

### Comments/Other Observations

1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection. 2: 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: Hands washed 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: Chattanooga restaurant supply 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. 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: Chicken cooked over 165° 17: (NA) No TCS foods reheated for hot holding. 18: Slaw mixed less than hour was at 50° 19: Chicken in basket held above 135° 20: Cold food held below 41° 21: (NO) There are no foods requiring date marking in the facility at the time of the inspection. 22: (NA) No food held under time as a public health control. (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: \*\*\*See page at the end of this document for any violations that could not be displayed in this space.

See last page for additional comments.

Additional Comments

# Establishment Information

Establishment Name: Saks Wing Shak

Establishment Number : 605222430

Comments/Other Observations (cont'd)

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

## Establishment Information

Establishment Name: Saks Wing Shak Establishment Number # 605222430

Sources		
Source Type:	Source:	

## Additional Comments