TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

6/200

| | AGAIN | 17 | *)諸 | | | FOOD SER | VICE ESTA | BL | BLISHMENT INSPECTION REPORT | | | | | | | | | | |
|--------------------|----------|--------|------------|-------------|---|--|-------------------|--------|-----------------------------|--------|--------|----------------|-----------|-----------------------------|--------|--|---------|----------|----|
| R. | | | S. S. | | | | | | | | | | | | | | | | |
| Establishment Name | | | Firebox Gr | ill | | | | | | Tur | w of F | Establi | iekmo | O Fermer's Market Food Unit | 8 | 2 | | | |
| Address | | | 7025 Shall | lowford Rd. | | | | | | 1.77 | AC OIL | -940101 | 124111110 | O Temporary O Seasonal | | | | | |
| | | | | | Chattanoo | ga | Time in | 11 | ۰Ur | 5 A | M | | | | | ut 11:35:AM AM/PM | | | |
| City | | | | | | . | | | | | | _ | | | me o | | | | |
| Insp | ectio | m Da | rte | | | 23 Establishment | 60509939 | 4 | | | Emba | rgoe | d 0 | | | | | | |
| Ρυη | pose | of In | spect | ion | Routine | O Follow-up | O Complaint | | | O Pro | elimin | ary | | C | Cor | nsultation/Other | | | |
| Risi | Cat | egon | v | | O 1 | <u>\$102</u> | 03 | | | 04 | | | | Fo | -woll | up Required O Yes 🕱 No Number of | f Seats | 10 | 0 |
| | | _ | isk F | | | | | | | | | | | | | to the Centers for Disease Control and Prev | ention | | |
| | | | | as c | ontributing fa | | | | | | | | | | | control measures to prevent illness or injury | | | |
| | | (Ma | ırk des | ignat | ed compliance str | | | | | | | | | | | INTERVENTIONS ach item as applicable. Deduct points for category or subc | ategory | 3 | |
| IN | ⊨in ci | ompili | | | | iance NA=not applicabl | | | | | | | | | | spection R=repeat (violation of the same code pro | | | |
| | _ | _ | _ | _ | Cor | mpliance Status | | COS | R | WT | | | | | | Compliance Status | COS | R | WT |
| | _ | OUT | NA | NO | P | Supervision | | | | | | IN | OUT | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | |
| 1 | 邕 | 0 | | | Person in charge performs duties | e present, demonstrates | s knowledge, and | 0 | 0 | 5 | | 0 | 0 | | × | Proper cooking time and temperatures | 0 | 8 | 6 |
| 2 | IN XX | | NA | NO | Uanacoment an | Employee Health d food employee aware | | ~ | IOT | | 17 | 0 | 0 | 0 | X | Proper reheating procedures for hot holding | _ | 0 | \$ |
| 3 | | ŏ | | | | striction and exclusion | ness, reporting | ŏ | ŏ | 5 | | IN | ουτ | NA | NO | Cooling and Holding, Date Marking, and Time a a Public Health Control | • | | |
| - | | - | NA | | | lood Hygienic Practi | ces | - | <u> </u> | - | 18 | 0 | 0 | 0 | 33 | Proper cooling time and temperature | 0 | 0 | _ |
| 4 | 20 | 0 | | 0 | Proper eating, ta | sting, drinking, or tobac | co use | 0 | 0 | 5 | 19 | X | 0 | 0 | õ | Proper hot holding temperatures | 10 | 0 | |
| 5 | | | NA | | | m eyes, nose, and mounting Contamination | | 0 | 0 | Ľ | 20 | 20 | 00 | 8 | | Proper cold holding temperatures Proper date marking and disposition | | 8 | 5 |
| 6 | 10 | 0 | - | | | d properly washed | by rianus | 0 | 0 | | 22 | | 0 | - | | | | 6 | |
| 7 | 鬣 | 0 | 0 | 0 | No bare hand co | intact with ready-to-eat | foods or approved | 0 | 0 | 5 | " | - | | NA | - | Time as a public health control: procedures and records | | <u> </u> | |
| 8 | 25 | 0 | | | alternate proced Handwashing sir | ures followed nks properly supplied ar | nd accessible | | 0 | 2 | 23 | IN O | OUT | NA X | NO | Consumer Advisory Consumer advisory provided for raw and undercooked | 0 | 0 | |
| | IN | OUT | NA | | Food obtained fo | Approved Source | 1 | 0 | | | 23 | - | - | | NO | food | - | 19 | • |
| | <u>尚</u> | | 0 | | | om approved source t proper temperature | | | 8 | | | IN | OUT | NA | NO | Highly Susceptible Populations | | | |
| 11 | × | 0 | | | Food in good cor | ndition, safe, and unadu | | 0 | 0 | 5 | 24 | 0 | 0 | × | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| 12 | 0 | 0 | × | 0 | destruction | s available: shell stock t | | 0 | 0 | | | IN | OUT | | | Chemicais | | | |
| 43 | | | NA | | | ection from Contam | ination | _ | | | | 0 | | X | | Food additives: approved and properly used | 0 | 0 | 5 |
| 14 | 쭕 | 00 | 픵 | | Food separated Food-contact sur | faces: cleaned and sar | nitized | | 8 | | 26 | <u>実</u> IN | O | NA | NO | Toxic substances properly identified, stored, used Conformance with Approved Procedures | - | 101 | |
| | _ | 0 | _ | | Proper dispositio | on of unsafe food, return | | 0 | 0 | 2 | 27 | 0 | 0 | * | | Compliance with variance, specialized process, and | 0 | 0 | 5 |
| | \sim | • | | | served | | | - | - | - | | - | - | \sim | | HACCP plan | 1. | - | - |
| | | | | Goo | d Retail Pract | tices are preventive | e measures to co | ntro | l the | intr | oduc | tion | of p | atho | gens | , chemicals, and physical objects into foods. | | | |
| | | | | | | | | 600 | D RE | ar Al | L PR | ACT | 1CES | 3 | | | | | |
| | | | | 001 | not in compliance | e mpliance Status | COS=corre | cted o | R R | Suring | inspe | ction | | | | R-repeat (violation of the same code provision Compliance Status | | | WT |
| | | OUT | | | | e Food and Water | | | 1 ~ 1 | | | 0 | UT | | | Utensils and Equipment | 000 | | - |
| | 8 | | | | d eggs used whe | | | 0 | 2 | 1 | 4 | 5 2 | | | | infood-contact surfaces cleanable, properly designed, | 0 | 0 | 1 |
| _ | 9 0 | 0 | Varia | nce o | | alized processing meth | | 0 | 0 | 2 | 40 | + | - 0 | | | and used g facilities, installed, maintained, used, test strips | 0 | 0 | 1 |
| | | OUT | | | | emperature Control | | | | | | | - | | | | - | - | - |
| 3 | 1 | 0 | Prope | | ang methods use | ed; adequate equipmen | t for temperature | о | 0 | 2 | 43 | _ | ≌ N UT | 000000 | a-cor | htact surfaces clean Physical Facilities | 0 | 0 | 1 |
| 3 | 2 | 0 | | | properly cooked | for hot holding | | 0 | 0 | 1 | 41 | | | lot and | 1 cold | water available; adequate pressure | 0 | 0 | 2 |
| | 3 | | | | thawing methods | | | | <u> </u> | 1 | 4 | _ | _ | | | stalled; proper backflow devices | _ | 0 | 2 |
| 3 | 4 | OUT | | nome | ters provided an | d accurate od identification | | 0 | 0 | 1 | 50 | | - | | | waste water properly disposed s: properly constructed, supplied, cleaned | 8 | 0 | 2 |
| 3 | 5 | | | proce | | nal container; required i | records available | 0 | 0 | 1 | 53 | | | | | use properly disposed; facilities maintained | 6 | 6 | 1 |
| - | - | OUT | | prop | | of Food Contamina | | - | <u> </u> | - | 53 | | - | - | · | lities installed, maintained, and clean | -0 | 0 | 1 |
| 3 | 6 | - | Insec | ts. ro | dents, and anima | | | 0 | 0 | 2 | 54 | _ | - | | | entilation and lighting; designated areas used | ŏ | ŏ | 1 |
| | - | - | | - | - | | | | + + | - | F | + | - | | | | + | | |
| 3 | _ | | | | - | uring food preparation, | storage & display | 0 | 0 | 1 | | | UT | | | Administrative items | | 1 - 1 | |
| | 8 9 | | | | leanliness ths; properly used | d and stored | | 0 | 0 | 1 | 54 | | | | | nit posted inspection posted | 8 | 0 | 0 |
| _ | 0 | | | | uits and vegetab | | | | 6 | | ۲ | | 0 IN | | ALC: N | Compliance Status | | | WT |
| | _ | OUT | | | Prop | er Use of Utensils | | | | | | | | | | Non-Smokers Protection Act | | | |
| 4 | 2 | | | | sils; properly sto guipment and line | ens; properly stored, dri | ied, handled | | 8 | | 51 | | | | | with TN Non-Smoker Protection Act ducts offered for sale | 18 | 8 | 0 |
| - 4 | 3 | 0 | Single | e-use | /single-service ar | rticles; properly stored, | used | 0 | 0 | 1 | 5 | 5 | | | | oducts are sold, NSPA survey completed | | ŏ | |
| 4 | 4 | 0 | GIOVE | 95 USA | ed properly | | | 0 | | 1 | | | | | | | | | |

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

| | 12/07/2023 | 12/07/2023 | | | |
|---|---|------------|--|--|--|
| Signature of Person In Charge | 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) | Free food safety training clas | RDA 629 | | |
|---------------------|--------------------------------|--------------|-------------------------|---------|
| | Please call (|) 4232098110 | to sign-up for a class. | 101.025 |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Firebox Grill Establishment Number #: [605099394

| 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) | | | |
| Dish machine | Chlorine | 100 | | | | |
| Triple sink | QA | 200 | | | | |
| | [| | | | | |

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

| Description | State of Food | Temperature (Fahrenheit) |
|------------------|---------------|--------------------------|
| Sliced tomatoes | Cold Holding | 40 |
| Diced tomatoes | Cold Holding | 40 |
| Corn and beans | Hot Holding | 150 |
| White rice | Hot Holding | 155 |
| Sliced ham | Cold Holding | 40 |
| Raw chicken | Cold Holding | 40 |
| Raw ground beef | Cold Holding | 40 |
| Cut leafy greens | Cold Holding | 40 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| Observed Violations | | | | |
|------------------------------------|--|--|--|--|
| Total # 2 | | | | |
| Repeated # 0 | | | | |
| 45: Cutting board heavily scorred. | | | | |

45: Cutting board heavily scorred. 47: Nonfood-contact surfaces dirty.



Establishment Information

Establishment Name: Firebox Grill

Establishment Number : 605099394

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2: Employee illness policy located on kitchen wall.

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.
- 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: No cooking observed.
- 17: (NO) No TCS foods reheated during inspection.
- 18: No cooling observed.
- 19: Proper hot holding temps observed.
- 20: Proper cold holding temps 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: (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: Firebox Grill

Establishment Number: 605099394

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Firebox Grill Establishment Number # 605099394

SourcesSource Type:WaterSource:PublicSource Type:FoodSource:SyscoSource Type:Source:Source:Source Type:Source:Source:Source Type:Source:Source:

Additional Comments