TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Control of the second s			Pizza Hut #37626							O Fermer's Market Food Unit									
Establishment Name			me							Type of Establishment Remanent O Mobile									
Address				5920 Main St. O Temporary O Seasonal										_					
City					Doltewah Time in 12:00 PM AM / PM Time out 01:00: PM AM / PM														
		n Da				221 Establishment				-			d <u>0</u>						
Puŋ	pose	of In	spec	tion	鼠 Routine	O Follow-up	O Complaint			O Pr	elimin	ary		0	Cor	nsultation/Other			
Risi	c Cat	egor,		Each	O1	22	O3	beha		04	ate	0.000	uon bu			up Required X Yes O No Number of S 1 to the Centers for Disease Control and Preven		_	
																control measures to prevent illness or injury.			
		(14)	urik de	alone	ed compliance st											INTERVENTIONS ach liam as applicable. Deduct points for category or subcat	HEORY.		
IN	⊨in c	ompii			OUT=not in compl	iance NA=not applicable		ed COS=c								spection R=repeat (violation of the same code provisi	on) COS R WT		
	IN	OUT	NA	NO	Co	mpliance Status Supervision		COS	R	WT		IN	010	NA	110	Compliance Status Cooking and Reheating of Time/Temperature	cos	R	WT
1	黨	0				e present, demonstrates	knowledge, and	0	0	5	10	0		NA XX		Control For Safety (TCS) Foods Proper cooking time and temperatures	0	~	
	IN		NA	NO	performs duties	Employee Health				_		ŏ	ŏ			Proper cooking time and temperatures Proper reheating procedures for hot holding	0	ŏ	5
	XX	0				d food employee awaren striction and exclusion	ess; reporting	0	0	5		IN	оυт	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
	IN	OUT	NA	NO		lood Hygienic Practic						0	0	0		Proper cooling time and temperature	0	0	
4	XX	0				asting, drinking, or tobacc om eyes, nose, and mout		0	0	5		0 दि	00	0	*	Proper hot holding temperatures Proper cold holding temperatures	0	00	
			NA	NO	Preve	nting Contamination I d properly washed		0		_	21	12	0	0		Proper date marking and disposition	0	0	9
7	×	0	0	ō		ontact with ready-to-eat fo	ods or approved	0	ō	5	22	-	O OUT	O NA		Time as a public health control: procedures and records Consumer Advisory	0	0	
	20		NA	NO		nks properly supplied and Approved Source	d accessible	0	0	2	23	0	0	10	110	Consumer advisory provided for raw and undercooked food	0	0	4
9	黨	0				rom approved source			0			IN	OUT	NA	NO	Highly Susceptible Populations			
	0		0		Food in good co	t proper temperature indition, safe, and unadult		0	0	5	24	0	0	×		Pasteurized foods used; prohibited foods not offered	0	0	5
12	0	0	X	0	destruction	is available: shell stock ta		0	0			IN	OUT		NO	Chemicals			
13		OUT O		NO	Food separated	tection from Contamin and protected	nation	0	0	4	25 26	0 夏	00	X		Food additives: approved and properly used Toxic substances properly identified, stored, used	0	0	5
14	0	嵩				nfaces: cleaned and sanit		ŏ	0				OUT	NA	NO	Conformance with Approved Procedures			
15	篾	0			served	on of unsafe food, returne	id food hot re-	0	0	2	27	0	0	黨		Compliance with variance, specialized process, and HACCP plan	0	0	5
				Goo	d Retail Pract	tices are preventive	measures to co	ntro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects into foods.			
								GOO	D R	ar/A	L PR	ACT	1CE	;					
				00	T=not in complianc Cor	e mpliance Status	COS=corre		n-site R		inspe	ction				R-repeat (violation of the same code provision) Compliance Status	COS	R	WT
2	8	OUT		eurize	Saf ed eggs used who	e Food and Water		0		1			UT	ood ar	od no	Utensils and Equipment mood-contact surfaces cleanable, properly designed,			
2	9	0	Wat	er and	ice from approve		du	0	0 0	2	4	5				and used	0	0	1
3		OUT			Food 1	Temperature Control				_	4					g facilities, installed, maintained, used, test strips	0	0	1
3	1	0	Prop cont		oling methods us	ed; adequate equipment	for temperature	0	0	2	4	_	O N UT	lonfoo	d-con	ntact surfaces clean Physical Facilities	0	0	1
_	23				properly cooked thawing methods			0	8	1	4	_	_			I water available; adequate pressure stalled; proper backflow devices	8	8	2
	4	0	The		eters provided an	nd accurate		ŏ	ŏ	1	5	0	o s	ewage	and	waste water properly disposed	0	0	2
3	5	001	_	1 0000		od Identification inal container; required re	words available	0	0	1	5	_				es: properly constructed, supplied, cleaned use properly disposed; facilities maintained	0 0	0 0	1
		OUT		a prop		n of Food Contaminat		ľ		-	5		-	-		lities installed, maintained, and clean	-	0	1
3	6	0	Inse	cts, ro	dents, and anima	als not present		0	0	2	5	4	0 A	dequa	đe ve	ntilation and lighting; designated areas used	0	0	1
3	7	0	Con	tamina	ation prevented d	during food preparation, st	torage & display	0	0	1		0	UΤ			Administrative items			
-	8	-	-		leanliness			0	0	1	5	_	_		-	nit posted	0	00	0
_	O Wiping cloths; properly used and stored O Washing fruits and vegetables		0	0		Ľ	6	0 1	iost re	cent	Compliance Status	YES		WT					
4	_	OUT O		se ute	Prop nsils; properly sto	per Use of Utensils pred		0	0	1	5	7	- 0	omplia	ance	Non-Smokers Protection Act with TN Non-Smoker Protection Act	x	0	
-	2 3	0	Uter	vsils, e	quipment and lin	ens; properly stored, drie rticles; properly stored, u		0		1	5	8				ducts offered for sale oducts are sold, NSPA survey completed		0	0
	4				ed properly				ŏ								-	-	
serv	ice et	stablis	shme	nt perm	nit. Items identified	as constituting imminent h	ealth hazards shall b	e corre	cted i	mmed	iately	or op	ration	is shall	ceas	Repeated violation of an identical risk factor may result in revor e. You are required to post the food service establishment permi	t in a c	onsp	icuous
						report in a conspicuous man 18-14-708, 68-14-709, 68-14-7				t a he	aring r	-	_	-		Sling a written request with the Commissioner within ten (10) days	of the	date	of this
(\langle)	5	_	file		11/3	30/2	021	L		1	5	LT.	F	ÐÅ :	11/3	0/2	2021
Sig	natu	re of	Pers	son In	Charge				-	Date	Si	natu	re of	Envir	onme	ental Health Specialist			Date
						*** Additional food safe	ty information can	be fo	und	on ou	r wet	osite,	http	://tn.g	ow/h	ealth/article/eh-foodservice ****			
_	Eree food safety training classes are available each month at the county health department										0.00	h m	unth -	at the	001	inty health department			

PH-2267 (Rev. 6-15)	Free food safety training classe	RDA 629		
1192201 (1097. 0-10)	Please call () 4232098110	to sign-up for a class.	hDr 023

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Pizza Hut #37626 Establishment Number #: 605303036

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)						
CL dishwasher QA bucket	CL QA	0 200							

Equipment l'emperature	
Description	Temperature (Fahrenheit)
	36
Low boy	36

	Food Temperature				
State of Food	Temperature (Fahrenheit				
Cold Holding	36				
Cold Holding	38				
Cold Holding	36				
Cold Holding	36				
Cold Holding	36				
Cold Holding	37				
	Cold Holding Cold Holding Cold Holding Cold Holding Cold Holding				

Observed	Violations	
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Total # 2

Repeated # 0

14: CL dishwasher 0ppm. Dishwasher is full of sanitizer, machine asks operator to add sanitizer during cycles. CL dishwasher ran numerous times and remained at 0ppm CL. Sink next to CL dishwasher dispenses QA at 200ppm. Dishes must be washed and rinsed in dishwasher, then sanitized in sink submerged for at least 60 seconds.

46: Soap to utensils wash sink empty.



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Establishment Number : 605303036

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: Good 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 from approved sources.

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 present at facility during time of inspection.

15: (IN) No unsafe, returned or previously served food served.

16: (NA) No raw animal foods served.

17: (NO) No TCS foods reheated during inspection.

18: (N.O.) No cooling of TCS foods during inspection.

19: (NO) TCS food is not being held hot during inspection.

20: See temperatures.

21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.

22: (NO) Time as a public health control is not being used during the inspection.

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: (NÁ) Establishment is not required to have a variance or HACCP plan, performs no special processes. 57:

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.

Establishment Information

Establishment Name: Pizza Hut #37626

Establishment Number : 605303036

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Pizza Hut #37626 Establishment Number #: 605303036

Sources								
Source Type:	Food	Source:	Mclane					
Source Type:	Water	Source:	Public					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						

Additional Comments

CL dishwasher 0ppm. CL dishwasher is full of sanitizer but not dispensing during cycle. Single sink next to CL dishwasher is dispensing QA sanitizer at 200ppm. Dishes may be washed and rinsed in CL dishwasher, then submerged and sanitized (QA 200) in sink next to dishwasher. CL dishwasher needs immediate repair. Inspector will return on following day 12/1/21 to check status of CL dishwasher.