TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

	-	10	12																
A DECEMBER OF A																			
	100	THEFT			lata Dinna										O Fermer's Market Food Unit	\mathbf{T}	\bigcirc		
Jets Pizza Establishment Name							Tree		Sector In 15		Remanent O Mobile	98		Ń					
Add	nae e				3600 Hixson Pike.					_	Typ	e of E	stabli	shme	O Temporary O Seasonal				
					Chattanooga		11	·∩	5 ^	Ν.					11.40 414				
City							_				_			me ou	at 11:40:AIVI AM/PM				
Insp	ectio	on Da	ate		01/11/2024 Estat	lishment # 60522530	9		_	Emba	rgoe	d 0							
Puŋ	ose	of In	spec	tion	Routine O Follow	up O Complaint			O Pro	limin	ary		0	Cor	nsultation/Other				
Risi	Cat	tegor	У		箴1 02	03			O 4				Fo	ilow-	up Required O Yes 🕄 No Nur	nber of Sea	ats	52	
		R	isk I												to the Centers for Disease Control and	Preventio			
	as contributing factors in foodborne illness outbreaks. Public Health Interventions are control measures to prevent illness or injury.																		
	FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS (Mark designated compliance status (IH, OUT, HA, HO) for each numbered liem. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)																		
IN	⊧in c	ompii	ance		OUT=not in compliance NA=not					\$=cor	recte	d on-si	te duri	ng ins	pection R=repeat (violation of the same co				
	IN	ошт	NA	NO	Compliance St Superv		cos	R	WT	Ь					Compliance Status Cooking and Reheating of Time/Tempera	_	os	ĸ	WT
-		_	-		Person in charge present, dem		0	0	-		IN	OUT	NA	NO	Control For Safety (TCS) Foods				
			NA	NO	performs duties Employee	÷.	0	0	5		00	00	ŝ		Proper cooking time and temperatures Proper reheating procedures for hot holding		8	읽	5
		0	-	110	Management and food employe		0	0		H ⁺⁺					Cooling and Holding, Date Marking, and Ti		-	<u> </u>	
_	×	0			Proper use of restriction and ex	clusion	0	0	5		IN	OUT	NA	NO	a Public Health Control				
		OUT	NA	NO	Good Hygionic Proper eating, tasting, drinking,			0			00	0	0 <u> </u>		Proper cooling time and temperature Proper hot holding temperatures		8		
5	24	0		0	No discharge from eyes, nose,	and mouth	ŏ	ŏ	5	20	25	0	0		Proper cold holding temperatures		0	0	5
	N		NA	NO	Preventing Centam Hands clean and properly wash		0	0			×		0	-	Proper date marking and disposition	_		0	
_	×		0	ŏ	No bare hand contact with read		ŏ	ŏ	5	22	-	0	×		Time as a public health control: procedures and re	cords (0	이	
		õ			alternate procedures followed Handwashing sinks properly su	polied and accessible	6		2		IN	OUT	_	NO	Consumer Advisory Consumer advisory provided for raw and underco	oked			
	IN	OUT	NA	NO	Approved	Source			_	23		0	篇		food		이	이	4
9 10	高の	0	0	52	Food obtained from approved s Food received at proper temper			0			IN	OUT	NA	NO	Highly Susceptible Populations		- 1		
11					Food in good condition, safe, an	nd unadulterated	ŏ	ŏ	5	24	0	0	×		Pasteurized foods used; prohibited foods not offer	ed (0	이	5
12	0	0	X	0	Required records available: she destruction	ill stock tags, parasite	0	0			IN	OUT	NA	NO	Chemicais				
				NO	Protection from	Contamination				25	0	0	X		Food additives: approved and properly used		음	읽	5
13	晟	0			Food separated and protected Food-contact surfaces: cleaned	f and sanitized	6	0	5	26	≊ ⊠		NA	NO	Toxic substances properly identified, stored, used Conformance with Approved Procedur			0	
15	_				Proper disposition of unsafe for	od, returned food not re-	0		2	27	0	0	窯		Compliance with variance, specialized process, an	nd e	0	न	5
					served										HACCP plan				
				Goo	d Retail Practices are pre	ventive measures to co	ontro	l the	intr	duc	tion	of p	atho	gens	, chemicals, and physical objects into fo	ods.			
												ic ș	;						
				00	Finct in compliance Compliance Str	COS=corre itus		R R		inspe	ction				R-repeat (violation of the same code pro Compliance Status		os	R	WT
_		OUT			Safe Food and W						0	UT			Utensils and Equipment		-	-	
2					d eggs used where required ice from approved source		8	8	2	4	5 8				nfood-contact surfaces cleanable, properly designed and used	M, (0	0	1
3	-	0 OUT	Varia	ance o	btained for specialized process Food Temperature		0	0	1	46	5 (0 10	larew	ashin	g facilities, installed, maintained, used, test strips		0	0	1
-	_		Prop	er co	bing methods used; adequate e					47	7 0		onfoo	d-cor	tact surfaces clean	,	.	 	1
3		0	cont	rol	•	4.4	0	0	2		_	UT			Physical Facilities			-	
3					properly cooked for hot holding thawing methods used		8	8	1	42	_				water available; adequate pressure stalled; proper backflow devices		읽	읽	2
3	_				eters provided and accurate		ŏ	ŏ	1	50	_	o s	ewage	and	waste water properly disposed		0	0	2
	_	OUT			Food Identificat					51	_				is: properly constructed, supplied, cleaned	_		<u> </u>	1
3	5		Food	d prop	erly labeled; original container; r		0	0	1	52		-	-		use properly disposed; facilities maintained		-	이	1
_		OUT			Prevention of Feed Con	tamination	-			53	_	-			lities installed, maintained, and clean		-	악	1
3	6	0	Insec	cts, ro	dents, and animals not present		0	0	2	54	•	0 A	dequa	de ve	ntilation and lighting; designated areas used	'	0	이	1
3	7	22	Cont	tamina	ition prevented during food prep	aration, storage & display	0	0	1		0	στ			Administrative Items				
3	-				leanliness		0	0	1	55	_				nit posted		8	<u>_</u>	0
3	_				ths; properly used and stored ruits and vegetables		8	0	1	56	<u>s (</u>	o IM	lost re	cent	Compliance Status				WT
		OUT			Proper Use of Uto	eliene									Non-Smokers Protection Act		-	-	
4	_	_			nsils; properly stored quipment and linens; properly s	lored dried bandled	8	8		57					with TN Non-Smoker Protection Act ducts offered for sale	P	5	읭	0
4	3	0	Sing	le-use	/single-service articles; properly		0	0	1	53	5				oducts are sold, NSPA survey completed		ŏ		Ĩ
4					ed properly			0	_										
															Repeated violation of an identical risk factor may resul e. You are required to post the food service establishme				
man	ner a	nd po	st the	most		cuous manner. You have the rig	the to r	eques							lling a written request with the Commissioner within ten				
	1	\mathbf{r}	2		1 -				i		7	$\overline{\ }$	0	8			11 1		<u></u>
<	\vdash		$\mathbf{\Sigma}$		1	01/2	L1/2			-		\mathcal{V}	ъY	,			11		024
3101	เสเบ	re of	Hers	ion in	Charge			- (Date	- 510	natu	IE OF	CITVIN	unme	ental Health Specialist				Date

Signature of	Person In	Charge
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	Date	Signatu	re or chivitorinienal riealth opeoiali	D1
****	Additional food safety information can be found on ou	r website,	http://tn.gov/health/article/eh-foo	dservice ****

SCORE

Free food safety training classes are available each month at the county health department. Please call () 4232098110 to sign-up for a class. PH-2267 (Rev. 6-15) RDA 629

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Jets Pizza Establishment Number #: 605225309

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 wenty-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)			
3 sink	Quat	300				
Dish machine	Chlorine	100				

Equipment Temperature			
Description	Temperature (Fahrenheit)		
Walkin	39		

Food Temperature				
Description	State of Food	Temperature (Fahrenheit)		
Cut toms	Cold Holding	32		
Marinara	Cold Holding	35		
Ham	Cold Holding	37		
Cut toms	Cold Holding	34		
Chicken	Cold Holding	37		
Pepperoni	Cold Holding	39		

Observed Violations

Total # 2

Repeated # 0

37: Onions on floor of walkin.

45: Gasket under marinara line area in poor repair, carbon build up on pans.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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Establishment Number : 605225309

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 2: Policy posted above computers
- 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: Observed good hand washing

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: Approved source

- 10: (NO): No food received during inspection.
- 11: (IN) All food was in good, sound condition at time of inspection.
- 12: (NÁ) 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: (NA) No raw animal foods served. Wings are all fully cooked
- 17: (NA) No TCS foods reheated for hot holding.
- 18: No cooling observed
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: Adequate cold holding 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.

Establishment Information

Establishment Name: Jets Pizza

Establishment Number: 605225309

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Jets Pizza

Establishment Number #: 605225309

Sources				
Source Type:	Water	Source:	Public	
Source Type:	Food	Source:	Sofo	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

Additional Comments