## TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

15/5.24

SCORE

Aller Contract																			
Establishment Name				Little Caesars #2 Type of Establishment O Mobile											7				
Address			5510 Hwy 153 Suite 106 Type of Establishment O Temporary O Seasonal																
City	,				Hixson Time in 01:15 PM AM / PM Time out 01:45; PM AM / PM														
,		n Da			10/05/20	20 Establishment					Emba	_							
			spect		Routine	O Follow-up	O Complaint	<u> </u>			elimin	-			0	nsultation/Other			
				ion	_						earnars	ary		-				0	
Risi	k Cat	egon R		act	O1 ors are food pr	Peparation practices	O3 and employee	beha		04	st co	mm	onh			up Required O Yes X No Number of to the Centers for Disease Control and Prev		0	
																control measures to prevent illness or injury.			
		(14)	rir dae	lane	ed compliance sta											INTERVENTIONS ach liem as applicable. Deduct points for category or subc	deserv.		
IN	⊨in o	omplia				ance NA=not applicable										spection R=repeat (violation of the same code pro			
		or open	A 1990			mpliance Status	10 10 00011	cos	R				0.011-0	990 GOE	19 110	Compliance Status		R	WT
	IN	ουτ	NA	NO		Supervision						IN	ουτ	NA	NO	Cooking and Reheating of Time/Temperature			
1	鬣	0	_			present, demonstrates	knowledge, and	0	0	5	40	-				Control For Safety (TCS) Foods			
-		-	NA	NO	performs duties	Employee Health		-		-		00		8		Proper cooking time and temperatures Proper reheating procedures for hot holding	- 8	00	5
2	X		1.0-1	110	Management and	d food employee awaren	ess; reporting	0	0		Ë					Cooling and Holding, Date Marking, and Time a	_		
3	黨	0			Proper use of res	striction and exclusion		0	0	۶		IN	OUT	NA	NO	a Public Health Control			
			NA	NO		ood Hygienic Practic						0	0	0		Proper cooling time and temperature		0	
4	X	0				sting, drinking, or tobacc		0	2	5		<u>ال</u>	00		0	Proper hot holding temperatures		0	
- 3			NA			m eyes, nose, and mout ting Contamination		-		-	20 21	20	6		0	Proper cold holding temperatures Proper date marking and disposition	8	6	5
6	邕	0		0	Hands clean and	properly washed		0	0		22		ō	8		Time as a public health control: procedures and records		o	
7	黨	0	0	0	No bare hand co alternate procedo	ntact with ready-to-eat fo	oods or approved	0	0	5			OUT		-	Consumer Advisory	-	-	
8	X					nks properly supplied and	d accessible	0	0	2	23	0	0	12	110	Consumer advisory provided for raw and undercooked	0	0	4
	IN 宸		NA	NO	Easd obtained for	Approved Source om approved source		0		_		IN	OUT		NO	food Highly Susceptible Populations	-	<u> </u>	-
			0	20		t proper temperature		ŏ					-	_	NO				
11	X	0			Food in good cor	ndition, safe, and unadul		0	0	5	24	0	0	×		Pasteurized foods used; prohibited foods not offered	0	0	5
12	0	0	×	0	Required records destruction	s available: shell stock ta	igs, parasite	0	0			IN	OUT	NA	NO	Chemicals			
			NA	NO		ection from Contamin	nation				25	0	0	X		Food additives: approved and properly used	0		5
13	읗	8	릥		Food separated a Food-contact sur	and protected faces: cleaned and sanit	tized		0	4 5	26	<u>≋</u> ≥	0	NA	NO	Toxic substances properly identified, stored, used Conformance with Approved Procedures	0	0	
	_	ŏ	_			n of unsafe food, returne		-		<u> </u>	27				110	Compliance with variance, specialized process, and	-	0	5
15	2	•			served			0	0	-	21	0	<u> </u>	8		HACCP plan	10	U	8
				Goo	d Retail Pract	ices are preventive	measures to co	ntro	the	intr	oduc	tion	of p	atho	gens	s, chemicals, and physical objects into foods.			
								600				ACT	ICE	-					
				00	F=not in compliance	ė	COS=corre							0		R-repeat (violation of the same code provision			
	_		_	_		npliance Status		COS	R	WT					_	Compliance Status Utensils and Equipment	COS	R	WT
2	8	OUT		surize	d eggs used whe	Food and Water		0	0	1		_	UT K	ood ar	nd no	prood-contact surfaces cleanable, properly designed,	-		
_	9	0	Wate	r and	ice from approve	ed source	4	0	0	2	4	2				and used	0	0	1
- 3	0	해	Varia	nce o		alized processing metho emperature Control	ds	0	0	1	4	s   0	o  v	Narewa	ashin	g facilities, installed, maintained, used, test strips	0	0	1
Ξ.	и		Prop	er co		d; adequate equipment	for temperature	0	0	2	47	1 8	<u> 1</u>	Vonfoo	d-cor	ntact surfaces clean	0	0	1
		-	contr							UT			Physical Facilities						
_	2				properly cooked thawing methods			00		1	41	_	_			f water available; adequate pressure stalled; proper backflow devices		0	2
	4				eters provided and			ŏ		$\frac{1}{1}$	50	_				i waste water properly disposed	Ťŏ	ŏ	2
		OUT				d identification			- 1		51	_	_			es: properly constructed, supplied, cleaned	ŏ	ŏ	1
3	5	0	Food	prop	erly labeled; origin	nal container; required re	cords available	0	0	1	53	2 0	0	Garbag	e/refi	use properly disposed; facilities maintained	0	0	1
		OUT			Prevention	of Food Contaminat	lon				5	3 3	RK F	hysica	I faci	ilities installed, maintained, and clean	0	0	1
3	6	0	Insec	ts, ro	dents, and anima	is not present		0	0	2	54	1 0	0 /	Adequa	de ve	entilation and lighting; designated areas used	0	0	1
3	7	0	Cont	amina	ation prevented d	uring food preparation, st	torage & display	0	0	1		0	UΤ			Administrative Items			
	8	-			leanliness				0	1	55				-	nit posted	0	0	0
_	9				ths; properly used			0		1	54	5 (	0	/lost re	cent	inspection posted		0	
-4	0	0	was	ning f	ruits and vegetab	les		0	0	1						Compliance Status	YES	NO	WT

40	0	Washing truits and vegetables	0		1	11			Compliance Status	YES	NO	WI
OUT Proper Use of Utensils						11			Non-Smokers Protection Act			
41	0	In-use utensils; properly stored	0	0	1	11	57	7	Compliance with TN Non-Smoker Protection Act	28		
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1	11	58		Tobacco products offered for sale	0	0	0
43	120	Single-use/single-service articles; properly stored, used	0	0	1	11	59	5	If tobacco products are sold, NSPA survey completed	0	0	
44	0	Gloves used properly	0	0	1	1.						
ervice	establi and p	ect any violations of risk factor items within ten (10) days may result in suspen shment permit, items identified as constituting imminent health hazards shall b ost the most recent inspection report in a conspicuous manner. You have the rig sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-7	ht to r	cted i eques	mme	diat	ely c	or operati	ons shall cease. You are required to post the food service establishment permit	in a	consp	icuous
10/05/2020 10/05/2										2020		

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

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



#### Establishment Information

Establishment Name: Little Caesars #2 Establishment Number #: 605253468

Warewashing Info			
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)
Triple sink	QA	200	

Equipment Temperature					
Description	Temperature (Fahrenheit)				

Description	State of Food	Temperature ( Fahrenheit
Sausage	Cold Holding	35
Ham	Cold Holding	40
Chicken	Cold Holding	36
Chicken wings	Cold Holding	38
Chicken wing	Hot Holding	155

#### Observed Violations

Total # 5 Repeated # ()

39: Dirty cloth on equipment in bakc of kitchen.

43: Single-use items in boxes on the floor-must elevate 6".

- 45: Carbon build up on the outside of pans.
- 47: Multiple non-food contact surfaces dirty.
- 53: Floors and walls dirty.

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



#### Establishment Information

Establishment Name: Little Caesars #2

Establishment Number : 605253468

#### Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 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 hand washing 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: Blue Line

- 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: (NA) No raw animal foods served.
- 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: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See temperatures.
- 20: See temperatures.
- 21: Using time as a public health control correctly for pizza.
- 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: Little Caesars #2

Establishment Number : 605253468

Comments/Other Observations (cont'd)

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

## Establishment Information

Establishment Name: Little Caesars #2

Establishment Number # 605253468

Sources								
Source Type:	Water	Source:	Tennessee American					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						

# Additional Comments