TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

6/53

			FOOD SERVICE ESTABLISHMENT INSPECTION REPORT								SCORE									
ß			and the second													O Farmer's Market Food Unit		ſ		
Establishment Name KFC K365009								Tvr	e of f	Establi	ishme	R Permanent O Mobile	9	7	5					
Address 4856 Hwy 58							.,,				O Temporary O Seasonal									
City					Chattanoo	oga	Time in	11	L:08	8 A	M	A	M/P	M Th	me o	л <u>11:26:АМ</u> ам/рм				
Inspe	ctio	n Da	rte		05/17/2	023 Establishment #	60518485	6		_	Emba	irgoe	d 0)						
Purp	ose	of In	spect	tion	ORoutine	圖 Follow-up	O Complaint			-	elimin		_		Cor	nsultation/Other				
Risk	Cat	_			O 1	3022	O 3			O 4						up Required O Yes 🕅 No	Number of S	eats	83	
		R														to the Centers for Disease Contro control measures to prevent illnes	and Prevent	tion		
						FOODBOR	NE ILLNESS RJ	SK F	ACTO	orts	AND	PU	BLIC	HEA	LTH	INTERVENTIONS				
IN-	in cr	(Ch mpli		algna		oliance NA=not applicable	NO=not observe		liens							ach Item as applicable. Deduct points for ca pection R*repeat (violation of the :				
_	_		_			ompliance Status			R		Ē	S=corrected on-site during inspection				Compliance Status			R	WT
\rightarrow	-	-	NA	NO	Person in char	Supervision ge present, demonstrates i	mowledge, and			_		IN	ουτ	NA	NO	Cooking and Roberting of Time/Te Control For Safety (TCS) Fe				
		O OUT	NA	NO	performs dutie			0	0	5		00	0	8	Š	Proper cooking time and temperatures Proper reheating procedures for hot holding	a	0	0	5
2	X.	0				and food employee awarene	ess; reporting		0	5	Ë	IN	оит			Cooling and Holding, Date Marking,	and Time as	-		
		О 0UT	NA	NO	,	restriction and exclusion Good Hygienic Practice	••	0	0	_	18	0	0	0	53	a Public Health Control Proper cooling time and temperature		0	o	
4	1	0		0	Proper eating.	tasting, drinking, or tobacci rom eyes, nose, and mouth	o use	0	8	5		0	0			Proper hot holding temperatures Proper cold holding temperatures		0	8	
	IN	OUT	NA	NO	Prev	enting Contamination b						õ	ŏ		23	Proper date marking and disposition		ŏ	ŏ	5
		0 0	0	0	No bare hand o	nd properly washed contact with ready-to-eat fo	ods or approved	6	0	5	22	0	0	×	-	Time as a public health control: procedure	s and records	0	٥	
8	K	0		-		idures followed sinks properly supplied and	accessible		0	2	23	ĭN O	OUT	NA X	NO	Consumer Advisory Consumer advisory provided for raw and a	undercooked	0	0	4
			NA	NO	Food obtained	Approved Source from approved source		0	0	_	-	IN	OUT		NO	food Highly Susceptible Populat	ions	-	_	
10 11	2	8	0	×	Food received Food in good o	at proper temperature condition, safe, and unadult	erated	8	8	5	24	0	0	83		Pasteurized foods used; prohibited foods r	not offered	0	0	5
	_	ō	×	0		rds available: shell stock ta		ō	ō			IN	OUT	NA	NO	Chemicals				
13			NA	NO		otection from Contamin d and protected	ation	0		4	25 26	0 賞	0	X		Food additives: approved and properly use Toxic substances properly identified, store		0		5
14)	×	0	ŏ		Food-contact s	surfaces: cleaned and sanit tion of unsafe food, returne		0	0	5		IN	OUT	-	NO	Conformance with Approved Pr	ocedures			
15	2	0			served	con or unsale lood, returne	a lood hot le-	0	0	2	27	0	0	Compliance with variance, specialized process, and O HACCP plan				0	0	5
				Goo	d Retail Pra	ctices are preventive	measures to co	ontro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects	into foods.			
											L PR			8						
	_			00		ompliance Status	COS=corre		R		; inspe					R-repeat (violation of the same Compliance Status	code provision)	COS	R	WT
28	_	OUT		eurize	Sa d eggs used wi	fe Food and Water here required		0	0	1	4		NUT O	ood ar	nd no	Utensils and Equipment nfood-contact surfaces cleanable, properly	designed,	0		
29 30	_	0	Wate	er and	lice from appro		\$	0	8	2	\vdash	+	- 0			and used			0	1
-	_	OUT			Food	Temperature Control		1			4		_			g facilities, installed, maintained, used, test	t strips	0	0	1
31		0	contr		oling methods u	ised; adequate equipment f	or temperature	0	0	2	4	_	NUT	onnoo	a-cor	tact surfaces clean Physical Facilities		0	0	1
32	_				properly cooke thawing method	d for hot holding			8	1	4	_				water available; adequate pressure talled; proper backflow devices		0	읭	2
34	_				eters provided a			ŏ	ŏ	1	5	_	_			waste water properly disposed		0	0	2
	_	OUT			F	ood identification					5	_				s: properly constructed, supplied, cleaned			0	1
35			Food	l prop		ginal container; required re		0	0	1	5		-		·	use properly disposed; facilities maintained		0	0	1
36	_	OUT	Insec	ts ro		on of Food Contaminati nais not present	on	0	0	2	5		_			ities installed, maintained, and clean ntilation and lighting; designated areas use	d	0	0	1
37	+	-				during food preparation, st	orana & disolav	0	0	1	F	+	UT	-ac des	10 10	Administrative items		-	_	
38	-	-			cleanliness	during rood preparation, as	orage a display	6	0	-	5		_	Jurrient	t pern	nit posted		0	0	
39		Ó	Wipir	ng cic	ths; properly us			0	0	1	5					inspection posted		0	0	0
40	_	OUT		ning f	ruits and vegeta Pro	ables oper Use of Utensils		0	0	1						Compliance Status Non-Smokers Protection A	et	YES	NO	wr
41		0	In-us		nsils; properly s	tored	4.8		2		5					with TN Non-Smoker Protection Act		X	2	
42						inens; properly stored, drie articles; properly stored, us			8	1	5	5				ducts offered for sale oducts are sold, NSPA survey completed		00		0
44					ed properly				ŏ									-		
																Repeated violation of an identical risk factor n e. You are required to post the food service est				
mann	er ar	nd po	st the	most	recent inspection		ner. You have the rig	the to r	eques							ling a written request with the Commissioner w				

RACI	05/17/2023	$\leq \geq$	05/17/2023
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date

**** Additional food safety information can be found on our website	e, http://tn.gov/health/article/eh-foodservice ****

PH-2267 (Rev. 6-15)	Free food safety training clas	RDA 629		
1192201 (Nev. 0-10)	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: KFC K365009 Establishment Number #: 605184856

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)						
			l						

Equipment Temperature	
Description	Temperature (Fahrenheit)

escription	State of Food	Temperature (Fahrenheit

Observed Violations	
Total # 2	
Repeated # ()	
47:	
53:	

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Establishment Name: KFC K365009 Establishment Number : 605184856

Comments/Other Observations	
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4. F.	
b: 6. Octobility of the state (0.00 control of the state)	
6: Sanitizer testes 200ppm	
/:	
7:	
8:	

*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: KFC K365009

Establishment Number : 605184856

Comments/Other Observations (cont'd)

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

Establishment Information Establishment Name: KFC K365009

Establishment Number # 605184856

Sources		
Source Type:	Source:	

Additional Comments