# TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

					Lil Mama's Chiasgo Style Hasgy Inc					Type of Establishment     O Farmer's Market Food Unit     O Mobile						٦				
Establishment Name			t Nar	ne	Lil Mama's Chicago Style Hoagy, Inc						- Type of Establishment						J		J	
Address						a Ave. Suite-11					_					O Temporary O Sea				
Cit	/				Chattanoog										me o	ut 01:45:PM AN	I/PM			
Ins	pectic	on Da	te		01/27/20	23 Establishment #	60531444	1		_	Emba	irgoe	<u>d</u>							
Pu	pose	of In:	spect	tion	Routine	O Follow-up	O Complaint			O Pro	limin	ary		c	Cor	nsultation/Other				
Ris	k Cat	tegon	/		O1	<u>312</u> 2	<b>O</b> 3			<b>O</b> 4				Fc	low-	up Required O Yes 🖇	K No Number of S	Seats	16	
Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention 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 (IN, OUT, NA, NO) for each numbered Nem. For Nems marked OUT, mark COS or R for each Nem as applicable. Deduct points for category or subcategory.)																				
	≇in c	ompila	ance		OUT=not in complian	nce NA=not applicable pliance Status	NO=not observe		COS=corrected on-site during inspection R=repeat (violation of the same code provi OS R WT Compliance Status								cos	R	WT	
	IN	ουτ	NA	NO		Supervision			IN OUT NA NO Cooking and Reheating of Time/Temperat					• • • • • • • • • • • • • • • • • • • •						
1	鬣	0			Person in charge p performs duties	present, demonstrates kn	owledge, and	0	0	5		0	0		-	Proper cooking time and temp	eratures	0	0	5
2	N X	OUT	NA	NO	Management and	Employee Health food employee awarenes	s; reporting	0			17	0	0	×	0	Proper reheating procedures f Ceeling and Heiding, Dat		0	0	-
3	×	0				riction and exclusion		0	0	5		IN	OUT	NA	NO	a Public Hea				
	IN XX	OUT	NA			od Hygionic Practico ing. drinking, or tobacco		~				0	0	义文		Proper cooling time and temp Proper hot holding temperatur		0	읭	
5	25	0		0	No discharge from	eyes, nose, and mouth		ŏ	ŏ	5	20	25	0	0		Proper cold holding temperatu	ires	0	0	5
6	IN X	OUT	NA		Hands clean and p	ing Contamination by properly washed	Hands	0	0		21	<u>家</u>	0	0		Proper date marking and disp Time as a public health control		0	0 0	
7	X	0	0	0	No bare hand cont alternate procedur	tact with ready-to-eat foo es followed	ds or approved	0	0	5	-	IN	OUT		NO	Consumer		-	<u> </u>	_
8	X	아	NA	NO		s properly supplied and a Approved Source	ccessible	0	0	2	23	0	0	12		Consumer advisory provided food		0	0	4
	黨	0			Food obtained from	m approved source			0			IN	OUT	NA	NO	Highly Susceptib	le Populations		_	
	×		0	200		ition, safe, and unadulter		0	0	5	24	0	0	×		Pasteurized foods used; prohi	bited foods not offered	0	0	5
12		0	X	0	Required records a destruction	available: shell stock tage	s, parasite	0	0			IN	ουτ		NO	Chemi	cals			
13		OUT O		NO	Protect Food separated an	ction from Contamina nd protected	tion	0	0	4	25 26	25 O O X Food additives: approved and properly used 26 X O Toxic substances properly identified, stored, used		0	응	5				
14	×	0			Food-contact surfa	ces: cleaned and sanitiz		ŏ	ŏ	5		_	OUT	NA	NO	Conformance with Ap	proved Procedures	Ť	-	
15	X	0			Proper disposition served	of unsafe food, returned	food not re-	0	0	2	27	0	0	×		Compliance with variance, sp HACCP plan	ecialized process, and	0	0	5
				Goo	d Retail Practic	es are preventive n	easures to co	ntro	the	intr	duc	tion	ofp	atho	gens	, chemicals, and physics	l objects into foods.			
										ETAI			_		_					
				00	T=not in compliance	pliance Status	COS=corre	cted o		during						R-repeat (violation Compliance State	n of the same code provision)	COS	R	WT
		OUT	_		Safe	Food and Water						0	UT			Utensils and Equip	ment		~ 1	
_	28 29	0	Wate	er and	d eggs used where fice from approved	source		8			4	5 (				nfood-contact surfaces cleana and used	ble, properly designed,	0	0	1
-	90	O OUT	Varia	ince o		ized processing methods mperature Control		0	0	1	4	6 (	o  v	Varew	ashin	g facilities, installed, maintaine	d, used, test strips	0	0	1
	и					; adequate equipment fo	r temperature	0	0	2	4	47 O Nonfood-contact surfaces clean OUT Physical Facilities				-	0	0	1	
h	2	_	contr Plant		properly cooked fo	r hot holding		0	0	1	4	48 O Hot and cold water available; adequate pressure				0	0	2		
	33 14	_			thawing methods u eters provided and a			0	0	1	49	_	_			stalled; proper backflow device waste water properly dispose		0	0	2
Þ		OUT				Identification				_	5	1	_			s: properly constructed, suppli		ŏ	0	1
Ľ	35		Food	i prop		al container; required rec		0	0	1	5			-		use properly disposed; facilities		0	0	1
	6	OUT	Insec	ts ro	dents, and animals	of Food Contaminatio	h	0	0	2	5	_	-			lities installed, maintained, and intilation and lighting; designate		0	0	1
⊢	N7	-		-			nan 8 disatau	0	$\vdash$	1	F	+	UT		10 10	Administrative its		Ľ	-	·
	38				leanliness	ing food preparation, sto	age o osbiay	0	0	1	5	-	-	ument	nern	nit posted	ems .	0	0	_
	39	Ó	Wipi	ng cic	ths; properly used a			0	0	1		_	_		-	inspection posted		0	0	0
40 O Washing fruits and vegetables OUT Proper Use of UtensIIs				0	0	1	H	_	-	_	_	Compliance Stat Non-Smokers Pr		YES	NO	WT				
	11				nsils; properly store		handlad	8	8		5					with TN Non-Smoker Protectio ducts offered for sale	n Act	8	읭	0
	13	0	Sing	e-use	single-service artic	cles; properly stored, use	d	0	0	1	5	9				oducts are sold, NSPA survey	completed	ŏ	ŏ	Ť
	14				ed properly	and within two official	ar range in success		0	_	and a		b.F.st	name -	-	Repeated detailes of an identical	I sink faster over south in such		1	e la ce
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. 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																				
rep	H. T	C.A.	ectio	ns 68-	14 702, 68-14-706, 68-	14-708, 68-14-709, 68-14-711	, 68-14-715, 68-14-7	16, 4-5	320.		ang r			a repo	oy I		and a set of the set o		Gate	01045
	P	70	1	Ú	Ul.	フ	01/2	27/2	023	3			) (	$\sim$	/	An	(	01/2	7/2	023
Sic	n a tru	-	Deer	on In											<i></i>					
0.9	natu	re of	Pers	on in	Charge				(	Date	Sig	natu	re of	Envir	onme	ental Health Specialist				Date

PH-2267 (Rev. 6-15)	Free food safety training cla	RDA 62		
(10200) (1001. 0-10)	Please call (	) 4232098110	to sign-up for a class.	101.023

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



#### Establishment Information

Establishment Name: Lil Mama's Chicago Style Hoagy, Inc Establishment Number #: 605314441

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)							
Triple sink	QA	150								

Equipment Temperature							
Description	Temperature ( Fahrenheit)						

State of Food	Temperature ( Fahrenheit
Cold Holding	41
Cold Holding	41
Cold Holding	39
Cold Holding	38
Cold Holding	38
Cold Holding	37
	Cold Holding Cold Holding Cold Holding Cold Holding Cold Holding

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



#### Establishment Information

Establishment Name: Lil Mama's Chicago Style Hoagy, Inc

Establishment Number : 605314441

#### 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: (IN) Proper employee handwashing guidelines 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: (IN) 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: (NA) No raw animal foods stored at establishment.
- 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: (NA) No TCS foods reheated for hot holding.

18: (N.A.) No cooked food is cooled, prepares no TCS food from ambient temperature ingredients that require cooling, does not receive raw eggs, shellstock, or milk.

- 19: (NA) Establishment does not hot hold TCS foods.
- 20: (IN) Cold holding temperatures are at 41°F or below.
- 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: Lil Mama's Chicago Style Hoagy, Inc Establishment Number: 605314441

Comments/Other Observations (cont'd)

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

# Establishment Information

Establishment Name: Lil Mama's Chicago Style Hoagy, Inc Establishment Number # 605314441

Sources								
Source Type:	Water	Source:	TN American					
Source Type:	Food	Source:	PFG					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						

## Additional Comments