

Establishment Name

Purpose of Inspection

Address

City

WXYZ Kitchen

Chattanooga

ERoutine

2090 Hamilton Place Blvd.

O Follow-up

TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

O Farmer's Market Food Unit

Remanent O Mobile Type of Establishment

O Temporary O Seasonal

SCORE

12/14/2021 Establishment # 605307002 Embargoed 0 Inspection Date

O Complaint

O Preliminary O Consultation/Other

Time in 08:15 AM AM / PM Time out 09:00; AM AM / PM

Number of Seats 115 Risk Category О3 04 Follow-up Required 级 Yes O No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

12	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		0	OS=com
					Compliance Status	cos	R	WT	
	IN	OUT	NA	NO	Supervision				П
1	邕	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16
	IN	OUT	NA	NO	Employee Health				17
2	- DAG	Management and food employee awareness; reporting		0	0				
3	寒	0			Proper use of restriction and exclusion	0	0	5	
	IN	OUT	NA	NO	Good Hygienic Practices				18
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	l °	20
	IN	OUT	NA	NO	Proventing Contamination by Hands				21
6	黨	0		0	Hands clean and properly washed	0	0		22
7	鼷	0	0	0	No bare hand contact with ready-to-eat foods or approved alternate procedures followed	0	0	5	22
8	×	0			Handwashing sinks properly supplied and accessible	0	0	2	23
	IN	OUT	NA	NO	Approved Source				23
9	黨	0			Food obtained from approved source	0	0		
10	0	0	0	×	Food received at proper temperature	0	0	1	24
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	24
12	0	0	×	0	Required records available: shell stock tags, parasite destruction	0	0		
	IN	OUT	NA	NO	Protection from Contamination				25
13	Æ	0	0		Food separated and protected	0	0	4	26
14	0	X	0		Food-contact surfaces: cleaned and sanitized	0	0	5	
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27

	Compliance status						Ps.	**:
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16	0	0	0	20	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	۰
	IN	оит	NA	NO	Cooling and Holding, Date Marking, and Time as a Public Health Control			
18	0	0	0	×	Proper cooling time and temperature	0	0	
19	×	0	0	0	Proper hot holding temperatures	0	0	
20	245	0	0		Proper cold holding temperatures	0	0	5
21	0	×	0	0	Proper date marking and disposition	0	0	
22	0	0	×	0	Time as a public health control: procedures and records	0	0	
	IN	OUT	NA	NO	Consumer Advisory			
23	0	0	×		Consumer advisory provided for raw and undercooked food	0	0	4
	IN	OUT	NA	NO	Highly Susceptible Populations			
24	0	0	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	80	0			Toxic substances properly identified, stored, used	0	0	
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

to control the introduction of pathoge s, chemicals, and physical objects into foods.

			GOO			
		OUT=not in compliance COS=con				
		Compliance Status	cos	R	W	
	OUT	Caro i con amo i i mori			_	
28	0	Pasteurized eggs used where required	0	0	1	
29	0		0	0		
30	0	Variance obtained for specialized processing methods	0	0	1	
	OUT	Food Temperature Control		_		
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	:	
32	0	Plant food properly cooked for hot holding	0	0	r	
33	0	Approved thawing methods used	0	0	7	
34	0	Thermometers provided and accurate	0	0	Г	
	OUT	Food Identification				
35	0	Food properly labeled; original container; required records available	0	0	ŀ	
	OUT	Prevention of Food Contamination				
36	0	Insects, rodents, and animals not present	0	0	:	
37	0	Contamination prevented during food preparation, storage & display	0	0	ŀ	
38	0	Personal cleanliness	0	0	г	
39	0	Wiping cloths; properly used and stored	0	0	_	
40	0	Washing fruits and vegetables	0	0	'	
	OUT	Proper Use of Utensils			Π	
41	0	In-use utensils; properly stored	0	0	г	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	Г	
43	0		0	0	r	
-						

pecti		R-repeat (violation of the same code provision) Compliance Status	cos	R	W)
	OUT	Utensils and Equipment	000		
45	0	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	0	Nonfood-contact surfaces clean	0	0	1
	OUT	Physical Facilities			
48	0	Hot and cold water available; adequate pressure	0	0	-:
49	0	Plumbing installed; proper backflow devices	0	0	-:
50	0	Sewage and waste water properly disposed	0	0	- :
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	_
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	
53	0	Physical facilities installed, maintained, and clean	0	0	
54	0	Adequate ventilation and lighting; designated areas used	0	0	
	OUT	Administrative Items			
55	0	Current permit posted	0	0	П
56	0	Most recent inspection posted	0	0	
		Compliance Status	YES	NO	٧
		Non-Smokers Protection Act			
57		Compliance with TN Non-Smoker Protection Act	- X	0	
58		Tobacco products offered for sale	0	0	١ ١
59		If tobacco products are sold, NSPA survey completed	0	0	

You have the right to request a ten (10) days of the date of the

12/14/2021

Date Signature of Environmental Health Specialist

12/14/2021 Date

Signature of Person In Charge **** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: WXYZ Kitchen
Establishment Number #: [605307002

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.	
Sarage 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.	\vdash
Smoking observed where smoking is prohibited by the Act.	\vdash

Warewashing Info							
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenhelt)				
Dishmachine	High temp		166				
Sani bucket	Sink and surface	170					
Sani Bucket-after correction		272					

Equipment Temperature						
Description	Temperature (Fahrenhe					

Description	State of Food	Temperature (Fahrenheit
Rice	Hot Holding	148
Coleslaw-prep top	Cold Holding	38
Chicken wings-2 dr reach in	Cold Holding	38
Rice-walk in	Cold Holding	38
Coleslaw-walk in	Cold Holding	38
Yogurt-merch unit	Cold Holding	40

Observed Violations								
Total # 2								
Repeated # ()								
14: Sanitizer bucket in use measured at 170 (sink and surface). Ensure proper sanitizer concentration is used (min 272). This was corrected onsite								
21: Several items observed in 2 door unit and walk in are date marked on								
12/3/21 and have exceeded 7 days. Employee stated they have not purged food								
today. Ensure proper date marking is followed and discard food after 7th day.								

[&]quot;"See page at the end of this document for any violations that could not be displayed in this space.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



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Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: (IN): PIC has knowledge of symptoms and diseases of foodborne illnesses.
- 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 proper handwashing by employees.
- 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 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: (IN) All raw animal food is separated and protected as required.
- 15: (IN) No unsafe, returned or previously served food served.
- 16: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: Hot holding temperatures are held at 135F or above
- 20: Cold holding temperatures are held at 41F or below
- 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:

Additional Comments

See last page for additional comments.

^{***}See page at the end of this document for any violations that could not be displayed in this space.

^{***}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: WXYZ Kitchen	
Establishment Number: 605307002	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	

Establishment Information							
Establishment Name: WXYZ Kitchen							
Establishment Number #:	605307002						
Sources							
Source Type:	Food	Source:	US Food				
Source Type:	Water	Source:	Water is from approved source				
Source Type:		Source:					
Source Type:		Source:					
Source Type:		Source:					
Additional Commen	ts						
Upon arrival, both har handwashing on a rou	ndwash sinks in kitche utine basis and does i	en are observed dry. Employ not know why they are dry. U	vee stated he used sinks for Jse designated handwash sinks routinely.				