TENNESSEE DEPARTMENT OF HEALTH

FOOD SERVICE ESTAB										ON REPORT	SCO									
Establishment Name							Tur	w of F	Establis	ihma	Farmer's Market Food Unit Ø Permanent O Mobile	10								
Add	ress				2014 Gunbarrel Rd O Temporary O Seasonal												/			
City					Chattanooga		Time in	10):4	5 A	M	AJ	M/PI	M Tin	ne ou	ат <u>11:06</u> : <u>АМ</u> АМ/РМ				
Insp	ectio	n Da	rte		08/04/202	1 Establishment #					Emba									
			spect		ORoutine	O Follow-up	Complaint			-	limin	-			Cor	suitation/Other				
Risk	Cat	egon	,		O 1	\$2(2	03			04				Fo	low-i	up Required O Yes 🕱 No	Number of Se	ats	38	0
		R														to the Centers for Disease Contro control measures to prevent illnes	and Prevent		_	
						FOODBOR	NE ILLNESS RI	SK F/	ACTO	ORS	AND	PU	BLIC	HEA	5112	INTERVENTIONS				
134	⊧in co			lgnat	OUT=not in compliance				items							ach item as applicable. Deduct points for cat pection R=repeat (violation of the s				
				_		ance Status	NO-not coserve		R		Ĩ	00.00	u on-s	ane duri	ay ins	Compliance Status		cos	R	WΤ
	-	_	NA		Person in charge pre	Supervision	mowledge and			_		IN	ουτ	NA	NO	Cooking and Reheating of Time/Te Control For Safety (TCS) Fo				
1		0	NA		performs duties	Employee Health	anomeoge, and	0	0	5		0	0			Proper cooking time and temperatures Proper reheating procedures for hot holding	0	8	읽	5
2	0	0	144	110	Management and foo	od employee awaren	ess; reporting		0	5	H.			NA	NO	Cooling and Holding, Date Marking,		-	<u> </u>	
3	_	0	NA	NO	Proper use of restrict	tion and exclusion I Hygienic Practice		0	0	Ť	12	0				a Public Health Control Proper cooling time and temperature		0		_
4	0	0	nun	0	Proper eating, tasting	g. drinking, or tobacci	o use	0	0	5	19	0	ō	ō	0	Proper hot holding temperatures		0	0	
5	O IN		NA		No discharge from ey Preventing	yes, nose, and mouth g Contamination b		0	0	-		e	8	8		Proper cold holding temperatures Proper date marking and disposition		8	윙	5
6	_	0			Hands clean and pro No bare hand contac		ode or approved		0	5	22	0	0	-	0	Time as a public health control: procedures		_	0	
7	0	0	٥	0	alternate procedures Handwashing sinks p	followed		0	0	_		_	_	NA		Consumer Advisory Consumer advisory provided for raw and u	o do se o blo d	-	4	
	IN C	OUT	NA	NO	, i i i i i i i i i i i i i i i i i i i	Approved Source	accessible			-	23	0	0	0		food		<u> </u>	이	4
	8		0		Food obtained from a Food received at pro			0				-		NA	NO	Highly Susceptible Populati				
11	0	0	_		Food in good condition Required records available	on, safe, and unadult		0	0	5	24	0	0	0		Pasteurized foods used; prohibited foods n	ot offered	0	0	5
	-	0	O NA	0	destruction	ion from Contamin		0	0		25		OUT		NO	Chemicals Food additives: approved and properly use	4	0		
13	0	0	0		Food separated and	protected			0		26	0	0			Toxic substances properly identified, stored	d, used	ŏ	ŏ	5
14 O O O 15 O O Proper disposition of unsafe food, returned food not re-		0	0 0	5	27	IN O	OUT	NA		Conformance with Approved Pro Compliance with variance, specialized proc	and and	0	0	5						
	-	-			served									-		HACCP plan		-	-	
				Goo	d Retail Practice:	s are preventive	measures to co						_		jens	, chemicals, and physical objects i	into foods.			
				00	F=not in compliance		COS=corre		n-site (during				3		R-repeat (violation of the same			_	
		OUT				ance Status ood and Water		cos	R	WT		0	UT			Compliance Status Utensils and Equipment		005	R	WT
2	_				d eggs used where re ice from approved so			8	8	1	45	5 (nfood-contact surfaces cleanable, properly and used	designed,	0	0	1
3	0	_			btained for specialize		\$	ŏ	ŏ	1	46	; (-			g facilities, installed, maintained, used, test	strips	0	0	1
3		0			ing methods used; a		for temperature	0	0	2	47	_	-	lonfood	5-con	tact surfaces clean		0	0	1
3		-	contr Plant		properly cooked for h	not holding		-	0		48		UT O H	lot and	cold	Physical Facilities water available; adequate pressure		0	0	2
3	_	0	Appr	oved	thawing methods use	d		0	0	1	49	_	_		-	talled; proper backflow devices		0		2
3	_	OUT	Them	nome	eters provided and acc Food In	dentification		0	0	1	50	_	-			waste water properly disposed s: properly constructed, supplied, cleaned			8	2
3	5	0	Food	prop	erly labeled; original c	container; required re	cords available	0	0	1	52	2	o g	Sarbag	e/refu	use properly disposed; facilities maintained		0	0	1
	_	OUT				Food Contaminati	on				53	-	_		_	ities installed, maintained, and clean		_	0	1
3	6	0	Insec	ts, ro	dents, and animals no	ot present		0	0	2	54		-	vdequa	te ve	ntilation and lighting; designated areas used	d	0	이	1
3	_				ition prevented during	g food preparation, st	orage & display	0	0	1			UT			Administrative items		- 1	- 1	
38 O Personal cleanliness 39 O Wiping cloths; properly used and stored			0			55	_				nit posted inspection posted		0	0	0					
4	-	O OUT	Wast	ning f	ruits and vegetables	Jse of Utensils		0	0	1						Compliance Status Non-Smokers Protection Ac		YES	NO	WT
4	1	0			nsils; properly stored				0		57					with TN Non-Smoker Protection Act		श्च	의	
4	3	0	Singl	e-use	quipment and linens; /single-service article			0	0	1	58 59					ducts offered for sale oducts are sold, NSPA survey completed		0	8	0
4					ed properly				0	_										
servi	ce es	tablis	hmen	t perm	sit. Items identified as o	constituting imminent h	ealth hazards shall be	e corre	cted is	mmedi	ately o	er ope	eration	ns shall	cease	Repeated violation of an identical risk factor m e. You are required to post the food service est	ablishment permit	in a c	onspi	cuous
						t in a conspicuous man -708, 68-14-709, 68-14-71				ahea	nng n	gard	ing thi	rs repor	t by f	ling a written request with the Commissioner wi	man ten (10) days o	of the	date	ot this

>c []

08/04/2021

M 21 Signature of Environmental Health Specialist

08/04/2021

Signature of Person In Charge	
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Contraction of the second

Date

****	Additional food safety information can be found on our website, http://tn.gow/health/article/eh-foodservice ****
	Eres feed cafety training classes are available each month at the county health department

PH-2267 (Rev. 6-15)	Free food safety training cla		nth at the county health department.	RDA 629
1192201 (1001. 0-10)	Please call () 4232098110	to sign-up for a class.	10000

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Cheddar's Establishment Number #: 605249517

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							

Equipment Temperature								
Decoription	Temperature (Fahrenheit)							

ecoription	State of Food	Temperature (Fahrenheit

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Cheddar's Establishment Number: 605249517

Comments/Other Observations

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: Cheddar's

Establishment Number: 605249517

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Cheddar's Establishment Number # 605249517

Sources		
Source Type:	Source:	

Additional Comments

Complaint states 2 roaches were seen by bar close to patio.

Did not see any roaches during visit. Person in charge states Ecolab comes regularly for pest control and was here about 3 weeks ago. Will have pest comtrol come out again.