

TENNESSEE DEPARTMENT OF HEALTH
FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

73

Establishment Name	Miller's Ale House #94		Type of Establishment	<input checked="" type="radio"/> Farmer's Market Food Unit
Address	2119 Gunbarrel Rd			<input checked="" type="radio"/> Permanent <input type="radio"/> Mobile
City	Chattanooga	Time in	11:00 AM	<input type="radio"/> Temporary <input type="radio"/> Seasonal
Inspection Date	05/17/2023	Time out	12:55 PM	
	Establishment #	605255932	Embargoed	47
Purpose of Inspection	<input checked="" type="radio"/> Routine <input type="radio"/> Follow-up <input type="radio"/> Complaint <input type="radio"/> Preliminary <input type="radio"/> Consultation/Other			
Risk Category	<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 Follow-up Required <input checked="" type="radio"/> Yes <input type="radio"/> No			
			Number of Seats	371

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 (IK, OUT, NA, NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.)

IN=in compliance					OUT=not in compliance					NA=not applicable					NO=not observed					COS=corrected on-site during inspection					R=repeat (violation of the same code provision)				
Compliance Status										COS			R			WT													
	IN	OUT	NA	NO	Supervision																								
1	<input type="radio"/>	<input checked="" type="radio"/>			Person in charge present, demonstrates knowledge, and performs duties					<input type="radio"/>	<input type="radio"/>	5																	
	IN	OUT	NA	NO	Employee Health																								
2	<input type="radio"/>	<input checked="" type="radio"/>			Management and food employee awareness, reporting					<input type="radio"/>	<input type="radio"/>																		
3	<input checked="" type="radio"/>	<input type="radio"/>			Proper use of restriction and exclusion					<input type="radio"/>	<input type="radio"/>	5																	
	IN	OUT	NA	NO	Good Hygienic Practices																								
4	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	Proper eating, tasting, drinking, or tobacco use					<input type="radio"/>	<input type="radio"/>	5																	
5	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	No discharge from eyes, nose, and mouth					<input type="radio"/>	<input type="radio"/>																		
	IN	OUT	NA	NO	Preventing Contamination by Hands																								
6	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	Hands clean and properly washed					<input type="radio"/>	<input type="radio"/>	5																	
7	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	No bare hand contact with ready-to-eat foods or approved alternate procedures followed					<input type="radio"/>	<input type="radio"/>																		
8	<input type="radio"/>	<input checked="" type="radio"/>			Handwashing sinks properly supplied and accessible					<input type="radio"/>	<input type="radio"/>	2																	
	IN	OUT	NA	NO	Approved Source																								
9	<input checked="" type="radio"/>	<input type="radio"/>			Food obtained from approved source					<input type="radio"/>	<input type="radio"/>	5																	
10	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	Food received at proper temperature					<input type="radio"/>	<input type="radio"/>																		
11	<input checked="" type="radio"/>	<input type="radio"/>			Food in good condition, safe, and unadulterated					<input type="radio"/>	<input type="radio"/>																		
12	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	Required records available: shell stock tags, parasite destruction					<input type="radio"/>	<input type="radio"/>																		
	IN	OUT	NA	NO	Protection from Contamination																								
13	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		Food separated and protected					<input type="radio"/>	<input type="radio"/>	4																	
14	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		Food-contact surfaces: cleaned and sanitized					<input type="radio"/>	<input type="radio"/>	5																	
15	<input checked="" type="radio"/>	<input type="radio"/>			Proper disposition of unsafe food, returned food not re-served					<input type="radio"/>	<input type="radio"/>	2																	

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

Good Retail Practices are preventive measures to control the introduction of pathogens, chemicals, and physical objects into foods.

GOOD RETAIL PRACTICES

OUT=not in compliance

COS=corrected on-site during inspection

Compliance Status				COS	R	WT
	OUT	Safe Food and Water				
28	<input type="radio"/>	Pasteurized eggs used where required		<input type="radio"/>	<input type="radio"/>	1
29	<input type="radio"/>	Water and ice from approved source		<input type="radio"/>	<input type="radio"/>	2
30	<input type="radio"/>	Variance obtained for specialized processing methods		<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Temperature Control				
31	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control		<input type="radio"/>	<input type="radio"/>	2
32	<input type="radio"/>	Plant food properly cooked for hot holding		<input type="radio"/>	<input type="radio"/>	1
33	<input type="radio"/>	Approved thawing methods used		<input type="radio"/>	<input type="radio"/>	1
34	<input type="radio"/>	Thermometers provided and accurate		<input type="radio"/>	<input type="radio"/>	1
	OUT	Food Identification				
35	<input type="radio"/>	Food properly labeled; original container; required records available		<input type="radio"/>	<input type="radio"/>	1
	OUT	Prevention of Food Contamination				
36	<input type="radio"/>	Insects, rodents, and animals not present		<input type="radio"/>	<input type="radio"/>	2
37	<input type="radio"/>	Contamination prevented during food preparation, storage & display		<input type="radio"/>	<input type="radio"/>	1
38	<input type="radio"/>	Personal cleanliness		<input type="radio"/>	<input type="radio"/>	1
39	<input type="radio"/>	Wiping cloths; properly used and stored		<input type="radio"/>	<input type="radio"/>	1
40	<input type="radio"/>	Washing fruits and vegetables		<input type="radio"/>	<input type="radio"/>	1
	OUT	Proper Use of Utensils				
41	<input checked="" type="radio"/>	In-use utensils; properly stored		<input type="radio"/>	<input type="radio"/>	1
42	<input checked="" type="radio"/>	Utensils, equipment and linens; properly stored, dried, handled		<input type="radio"/>	<input type="radio"/>	1
43	<input type="radio"/>	Single-use/single-service articles; properly stored, used		<input type="radio"/>	<input type="radio"/>	1
44	<input type="radio"/>	Gloves used properly		<input type="radio"/>	<input type="radio"/>	1

R-repeat (violation of the same code provision)

Compliance Status				COS	R	WT
	OUT	Utensils and Equipment				
45	<input type="radio"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		<input type="radio"/>	<input type="radio"/>	1
46	<input type="radio"/>	Warewashing facilities, installed, maintained, used, test strips		<input type="radio"/>	<input type="radio"/>	1
47	<input checked="" type="radio"/>	Nonfood-contact surfaces clean		<input type="radio"/>	<input type="radio"/>	1
	OUT	Physical Facilities				
48	<input type="radio"/>	Hot and cold water available; adequate pressure		<input type="radio"/>	<input type="radio"/>	2
49	<input type="radio"/>	Plumbing installed; proper backflow devices		<input type="radio"/>	<input type="radio"/>	2
50	<input type="radio"/>	Sewage and waste water properly disposed		<input type="radio"/>	<input type="radio"/>	2
51	<input type="radio"/>	Toilet facilities; properly constructed, supplied, cleaned		<input type="radio"/>	<input type="radio"/>	1
52	<input type="radio"/>	Garbage/refuse properly disposed; facilities maintained		<input type="radio"/>	<input type="radio"/>	1
53	<input checked="" type="radio"/>	Physical facilities installed, maintained, and clean		<input type="radio"/>	<input type="radio"/>	1
54	<input checked="" type="radio"/>	Adequate ventilation and lighting; designated areas used		<input type="radio"/>	<input type="radio"/>	1
	OUT	Administrative Items				
55	<input type="radio"/>	Current permit posted		<input type="radio"/>	<input type="radio"/>	0
56	<input type="radio"/>	Most recent inspection posted		<input type="radio"/>	<input type="radio"/>	
		Compliance Status		YES	NO	WT
		Non-Smokers Protection Act				
57		Compliance with TN Non-Smoker Protection Act		<input checked="" type="radio"/>	<input type="radio"/>	
58		Tobacco products offered for sale		<input type="radio"/>	<input type="radio"/>	0
59		If tobacco products are sold, NSPA survey completed		<input type="radio"/>	<input type="radio"/>	

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 report. T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320.

 _____ Signature of Person In Charge	05/17/2023 _____ Date	 _____ Signature of Environmental Health Specialist	05/17/2023 _____ Date
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**** Additional food safety information can be found on our website. <http://tn.gov/health/article/eh-foodservice> ****

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



Establishment Information

Establishment Name: Miller's Ale House #94
Establishment Number #: 605255932

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)
Sanitizer bucket	QA	200	
Dish machine	High temp		144

Equipment Temperature

Description	Temperature (Fahrenheit)

Food Temperature

Description	State of Food	Temperature (Fahrenheit)
Raw shrimp	Cold Holding	40
Black beans	Hot Holding	140
Diced tomatoes	Cold Holding	40
Cooked chicken	Cold Holding	40
Sliced tomatoes	Cold Holding	40
Pico de gallo	Cold Holding	40
Raw salmon	Cold Holding	40
Spinach dip	Cold Holding	40
Ribs	Cold Holding	40
Raw ground beef	Cold Holding	40
Raw chicken	Cold Holding	40
Raw fish	Cold Holding	40
Spare ribs	Hot Holding	138
Whiting fish	Cooking	171
Rice	Hot Holding	155

Observed Violations

Total # 13

Repeated # 0

- 1: Multiple foodborne illness risk factors out of compliance. PIC not in control or knowledgeable about foodborne illness risk factors.
- 2: PIC not knowledgeable about illness policy and symptoms and illnesses associated with it.
- 8: One hand sink in kitchen without paper towels. Other hand sink was not dispensing paper towels properly.
- 14: High temp dish machine not sanitizing at minimum required temperature to sanitize properly. Dish temp must reach 160 degrees F. Instructed PIC to sanitize dishes at triple sink with QA.
- 14: One sanitizer bucket at 0 ppm.
- 20: Two lowboy coolers holding TCS foods between 50 and 60 degrees F. Must be 41 degrees F or below. Embargoed 6 lbs mixed cheese shredded, 6 lbs sliced tomatoes, 4 lbs black bean salad, 3.5 lb pico, 1.5 lb shredded cabbage, 5 lb meatloaf, 2 lb pulled pork, 1 lb prime rib! 2 lb rice, 10 lbs raw chicken, 1 lb cooked onions, 1 lb cooked mushrooms, 1 lb cooked bell peppers, 3 lbs veggies in butter
- 21: Prime rib in walk in cooler without date mark. *COS*
- 41: Multiple utensil handles touching food product.
- 42: Wet stacking of dishes.
- 47: Inside of ice machine dirty.
- 53: Missing floor tiles.
- 53: Floor dirty underneath dry storage shelving.
- 54: Multiple employee beverages stored improperly in kitchen.

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Establishment Information

Establishment Name: Miller's Ale House #94

Establishment Number : 605255932

Comments/Other Observations

- 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: Proper handwashing observed.
7: (IN) Employees are observed using suitable utensils or gloves to prevent bare hand (or arm) contact with ready-to-eat foods.
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: (IN) All raw animal foods cooked to proper temperatures.
17: (NO) No TCS foods reheated during inspection.
18: Observed rice, sauteed onions, and pork in walk in cooler cooling on sheet pans at correct temperature after less than 4 hours from being cooked.
19: Proper hot holding temperatures observed.
22: (NA) No food held under time as a public health control.
23: Consumer advisory located on menu.
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: Miller's Ale House #94

Establishment Number : 605255932

Comments/Other Observations (cont'd)**Additional Comments (cont'd)*****See last page for additional comments.***

Establishment Information

Establishment Name: Miller's Ale House #94

Establishment Number #:	605255932
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Sources

Source Type:	Food	Source:	Cheney, dixie
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Source Type:	Water	Source:	Public
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Source Type: _____ Source: _____

Source Type:	Source:
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Source Type:	Source:
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Additional Comments