TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

| | | | | | | | | 7 | | | | | | | | | | | |
|---|---|----------------|--------------|--|---------------------------------------|--|------------------------------------|---|--------|--|----------------------|--|--------|--|------------|---|------|----------|------|
| Establishment Name | | | | | | | | Tur | o of f | Tetalali | ie lie oos o | O Farmer's Market Food Unit ent Ø Permanent O Mobile | | | | | | | |
| Address | | | | 5231 Brainerd Rd. Type of Establishment O Temporary O Seasonal | | | | | | | | | | | | | | | |
| City Chattanooga Time in | | | 12 | 2:1 | 5 P | M | A | M/PI | и ті | me o | ut 01:00; PM AM / PM | | | | | | | | |
| Inspection Date 10/04/2023 Establishment # 605201270 | | | | | | | _ | d 0 | | | | | | | | | | | |
| Purpose of Inspection KRoutine O Follow-up O Complaint | | | | | - O Pre | | | - | | Cor | nsultation/Other | | | | | | | | |
| Risk Category O1 32 O3 O4 F | | | | | Fo | ollow- | up Required O Yes 😰 No Number of S | eats | 50 | | | | | | | | | | |
| | 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 | | | | | | | | | | | | | | | | | | |
| 134 | in e | (Lin ompilu | | algna | | tes (IN, OUT, HA, HO) for a ance NA=not applicable | NO=not observe | | ltema | | | | | | | such Item as applicable. Deduct points for category or subcate spection R=repeat (violation of the same code provisio | | | |
| _ | _ | _ | _ | _ | | npliance Status | NO-IN ODDEN | | R | And in case of the local division of the loc | Ĩ | | u un-s | ne que | - 19 - 110 | Compliance Status | | R | WT |
| Ц | - | OUT | NA | NO | Dorson in chaspo | Supervision present, demonstrates kr | house and | | | | | IN | ουτ | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | |
| | × | 0 | | | performs duties | | iowieoge, and | 0 | 0 | 5 | | 12 | 0 | 0 | - | Proper cooking time and temperatures | 00 | 2 | 5 |
| 2 | | | NA | NO | Management and | Employee Health I food employee awarenee | ss; reporting | 0 | 0 | | ۳ | 0 | 0 | 0 | | Proper reheating procedures for hot holding Ceeling and Helding, Date Marking, and Time as | 0 | 0 | |
| | × | 0 | | | Proper use of res | triction and exclusion | | 0 | 0 | 5 | | IN | OUT | NA | NO | a Public Health Control | | | |
| 4 | | OUT O | NA | | | ood Hygionic Practice sting, drinking, or tobacco | | | | | | Š | 0 | <u> 0</u> 夏 | _ | Proper cooling time and temperature Proper hot holding temperatures | 0 | | |
| 5 | 1 | 0 | | 0 | | meyes, nose, and mouth | 494 | ŏ | ŏ | 5 | 20 | 25 | 0 | 0 | 0 | Proper cold holding temperatures | 0 | 0 | 5 |
| | IN 演 | OUT O | NA | | Preven Hands clean and | ting Contamination by | / Hands | 0 | 0 | | | * | | | - | Proper date marking and disposition | 0 | | * |
| 7 | R | ŏ | 0 | ŏ | No bare hand cor | ntact with ready-to-eat foo | ds or approved | ŏ | ŏ | 5 | 22 | 0 | 0 | × | | Time as a public health control: procedures and records | 0 | 0 | |
| 8 | X | 0 | - | - | alternate procedu Handwashing sin | ires followed ks properly supplied and a | accessible | | 0 | 2 | 23 | IN O | OUT | NA | NO | Consumer Advisory Consumer advisory provided for raw and undercooked | 0 | 0 | - |
| 9 | | | NA | NO | Food obtained fro | Approved Source | | 0 | 0 | _ | | IN | OUT | | NO | food Highly Susceptible Populations | _ | - | - |
| 10 | 0 | 0 | 0 | 20 | Food received at | proper temperature | | 0 | 0 | | 24 | - | 0 | 20 | 110 | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| 11 | | | ~ | | | dition, safe, and unadulte available: shell stock tag | | 0 | 0 | 5 | - | _ | | - | | | _ | <u> </u> | - |
| | 0 | 0 | X | O NO | destruction | | | 0 | 0 | | 25 | IN O | OUT | | | | 0 | | |
| | | 0 | | NO | Food separated a | and protected | ltion | 0 | 0 | 4 | 29 | × | 0 | X | J | Food additives: approved and properly used Toxic substances properly identified, stored, used | 0 | ö | 5 |
| 14 | × | 0 | | | | faces: cleaned and sanitiz | | 0 | 0 | 5 | | IN | OUT | NA | | | | | |
| 15 | 2 | 0 | | | proper disposition served | n of unsafe food, returned | food not re- | 0 | 0 | 2 | 27 | 0 | 0 | 邕 | | Compliance with variance, specialized process, and HACCP plan | 0 | 0 | 5 |
| | | | | Goo | d Retail Practi | ices are preventive n | neasures to co | ontro | l the | intro | duc | tion | ofp | atho | gens | s, chemicals, and physical objects into foods. | | | |
| | | | | | | - | | GOO | D R | IATE | . PR | ACT | TICES | 5 | _ | | | | |
| | | | | 00 | Tenot in compliance | pliance Status | COS=corre | ected o | | during | | | | | | R-repeat (violation of the same code provision) Compliance Status | 0.08 | ъT | WT |
| | | OUT | | | Safe | Food and Water | | 008 | | | | 0 | UT | | | Utensils and Equipment | 000 | ~ 1 | |
| 2 | | | | | d eggs used when lice from approve | | | 8 | 8 | 1 | 4 | 5 1 | | | | onfood-contact surfaces cleanable, properly designed, and used | 0 | 0 | 1 |
| 3 | _ | Õ | | | obtained for specia | alized processing methods | \$ | ŏ | ŏ | 1 | 4 | 6) | | | | ing facilities, installed, maintained, used, test strips | 0 | 0 | 1 |
| | | OUT | Prop | er co | | emperature Control d; adequate equipment fo | r temperature | L | | | 4 | | | | | ntact surfaces clean | 0 | 0 | 1 |
| 3 | 1 | | contr | | | a, accelence oderbruere re | | 0 | 0 | 2 | | 0 | UT | | | Physical Facilities | | | |
| 3 | | | | | properly cooked f thawing methods | | | | 8 | 1 | 4 | _ | - | | | d water available; adequate pressure stalled; proper backflow devices | 8 | 응 | 2 |
| 3 | _ | | <u> </u> | | eters provided and | | | ŏ | ŏ | 1 | 5 | _ | _ | Sewage and waste water property disposed | | | 0 | 0 | 2 |
| | | OUT | | | Fee | d identification | | | | | 5 | _ | _ | Toilet facilities: properly constructed, supplied, cleaned | | | | 0 | 1 |
| 3 | 5 | | Food | l prop | | al container; required rec | | 0 | 0 | 1 | 5 | | - | - | · | use properly disposed; facilities maintained | 0 | 0 | 1 |
| 3 | , | OUT | Incor | de es | | of Feed Contaminatio | 'n | 0 | 0 | 2 | 5 | | | | | ilities installed, maintained, and clean | - | 0 | 1 |
| | - | - | | | dents, and animal | | | | + | _ | F | - | - | deque | ne ve | entilation and lighting; designated areas used | 0 | 0 | ' |
| 3 | | | | | | ring food preparation, sto | rage & display | 0 | 0 | 1 | | | UT | | | Administrative items | - | | |
| 38 O Personal cleanliness 39 O Wiping cloths; properly used and stored | | 0 | 0 | 1 | 5 | | | | | nit posted inspection posted | 0 | 8 | 0 | | | | | | |
| 40 O Washing fruits and vegetables | | | | 0 | | | | | | | Compliance Status | | | WT | | | | | |
| OUT Proper Use of Utensils In-use utensils; properly stored | | | | 0 | 0 | 1 | | 57 Compliance with TN Non-Smoker Protection Act | | | | 26 | | | | | | | |
| 4 | | 0 | Uten | sils, e | quipment and line | ins; properly stored, dried, | | 0 | 0 | 1 | 5 | 8 | T | obacc | o pro | oducts offered for sale roducts are sold, NSPA survey completed | 0 | 0 | 0 |
| 4 | _ | | | | ed properly | ticles; properly stored, use | | | 8 | | x | a | 1 | 10080 | co pr | www.s are solu, rear A survey completed | 0 | 0 | |
| | | | | | | | | | | | | | | | | Repeated violation of an identical risk factor may result in revoc | | | |
| | | | st the | most | recent inspection re | port in a conspicuous mann | er. You have the rig | the to r | eques | | | | | | | ie. You are required to post the food service establishment permit filing a written request with the Commissioner within ten (10) days | | | |
| repo | t. T. | CA . | ectio | | | -14-708, 68-14-709, 68-14-711 | | | | | | | | / | | 1 | | | |
| | | - | $ \uparrow $ | | L. | XI | 10/0 |)4/2 | 023 | 3 | 2 | 7 | | | 1 | 1 | .0/0 | 4/2 | 2023 |

Signature of Person In Charge

| 10/04/2023 |
|------------|
|------------|

Date Signature of Environmental Health Specialist

SCORE

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

| PH-2267 (Rev. 6-15) | Free food safety training cla | RDA 629 | | |
|---------------------|-------------------------------|--------------|-------------------------|---------|
| 1192201 (Nev. 0-10) | Please call (|) 4232098110 | to sign-up for a class. | nue des |

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Heavenly Flavored Wings Establishment Number # 605201270

| 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 | Chlorine | 50 | | | | | | | | |

| Equipment Temperature | | | | | | | |
|-----------------------|--------------------------|--|--|--|--|--|--|
| Description | Temperature (Fahrenheit) | | | | | | |
| Walk in cooler | 38 | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| Food Temperature Decoription | State of Food | Temperature (Fahrenheit |
|---------------------------------|---------------|-------------------------|
| Raw chicken-RIC | Cold Holding | 39 |
| Raw chicken WIC | Cold Holding | 38 |
| Chicken gizzards | Cold Holding | 38 |
| Chicken wings after 1 hour | Cooling | 100 |
| Chicken wings | Cooking | 204 |
| | | |
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| | | |

Observed Violations

Total # 3

Repeated # ()

45: Cardboard lining shelves; rusted equipment and surfaces.

46: No test strips. 53: Floor and wall in poor repair.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Heavenly Flavored Wings

Establishment Number : 605201270

Comments/Other Observations

1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.

2: Manager knowledgable of symptoms. Copy sent to manager.

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: Good hand washing 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: Sysco, Gordons.

- 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.
- 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: Chicken wings cooked to 204 F.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Chicken wings cooling uncovered in the freezer-temping 100 F after 1 hour.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: All TCS foods holding at or below 41 F.
- 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.

Establishment Information

Establishment Name: Heavenly Flavored Wings Establishment Number: 605201270

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Heavenly Flavored Wings Establishment Number #: 605201270

| Sources | | | | |
|--------------|-------|---------|--------|--|
| Source Type: | Water | Source: | Public | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |
| Source Type: | | Source: | | |

Additional Comments