

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

Follow-up Required

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SCORE

O Farmer's Market Food Unit C & K Snowy Delights (Mobile) O Permanent MMobile Establishment Name Type of Establishment 8986 Wandering Way O Temporary O Seasonal Address Ooltewah Time in 10:30 AM AM / PM Time out 11:00: AM City 05/28/2023 Establishment # 605309845 Embargoed 0 Inspection Date O Follow-up **K**Routine O Complaint O Preliminary O Consultation/Other Purpose of Inspection

О3

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

| 112 | ¥=in c | ompli | ance | | OUT=not in compliance NA=not applicable NO=not observe | id | | 0 |
|-----|--------|-------|------|----|---|-----|---|----|
| | | | | | Compliance Status | cos | R | WT |
| | IN | OUT | NA | NO | Supervision | | | |
| 1 | Ħ | 0 | | | Person in charge present, demonstrates knowledge, and performs duties | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Employee Health | | | |
| 2 | TXC | 0 | | | Management and food employee awareness; reporting | 0 | 0 | |
| 3 | × | 0 | | | Proper use of restriction and exclusion | 0 | 0 | 5 |
| | IN | OUT | NA | NO | Good Hygienic Practices | | | |
| 4 | X | 0 | | 0 | Proper eating, tasting, drinking, or tobacco use | 0 | 0 | |
| 5 | * | 0 | | 0 | No discharge from eyes, nose, and mouth | 0 | 0 | 0 |
| | IN | OUT | NA | NO | Preventing Contamination by Hands | | | |
| 6 | 0 | 0 | | 3% | Hands clean and properly washed | 0 | 0 | |
| 7 | 왮 | 0 | 0 | 0 | No bare hand contact with ready-to-eat foods or approved alternate procedures followed | 0 | 0 | 5 |
| 8 | × | 0 | | | Handwashing sinks properly supplied and accessible | 0 | 0 | 2 |
| | IN | OUT | NA | NO | Approved Source | | | |
| 9 | 嵩 | 0 | | | Food obtained from approved source | 0 | 0 | |
| 10 | 0 | 0 | 0 | × | Food received at proper temperature | 0 | 0 | |
| 11 | × | 0 | | | Food in good condition, safe, and unadulterated | 0 | 0 | 5 |
| 12 | 0 | 0 | × | 0 | Required records available: shell stock tags, parasite destruction | 0 | 0 | |
| | IN | OUT | NA | NO | Protection from Contamination | | | |
| 13 | 0 | 0 | 1 | | Food separated and protected | 0 | 0 | 4 |
| 14 | × | 0 | 0 | | Food-contact surfaces: cleaned and sanitized | 0 | 0 | 5 |
| 15 | Ħ | 0 | | | Proper disposition of unsafe food, returned food not re- | 0 | 0 | 2 |

| | | | | | Compliance Status | cos | R | WT |
|----|----|-----|------|----|---|-----|---|----|
| | IN | OUT | NA | NO | Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods | | | |
| 16 | 0 | 0 | 寒 | 0 | Proper cooking time and temperatures | 0 | 0 | 5 |
| 17 | 0 | 0 | 300 | 0 | Proper reheating procedures for hot holding | 0 | 0 | ٠ |
| | 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 | 文 | 0 | Proper hot holding temperatures | 0 | 0 | |
| 20 | 0 | 0 | 36 | | Proper cold holding temperatures | 0 | 0 | 5 |
| 21 | 0 | 0 | 386 | 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 | M | | Pasteurized foods used; prohibited foods not offered | 0 | 0 | 5 |
| | IN | OUT | | NO | Chemicals | | | |
| 25 | 0 | 0 | - XX | | Food additives: approved and properly used | 0 | 0 | 5 |
| 26 | 菜 | 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 |

O Yes 疑 No

s, chemicals, and physical objects into foods.

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|----|-----|--|-----|---|----|
| | | OUT=not in compliance COS=corr | | | |
| | | Compliance Status | cos | R | WT |
| | OUT | | | | |
| 28 | _ | Pasteurized eggs used where required | 0 | 0 | 1 |
| 29 | | Water and ice from approved source | 0 | 0 | 2 |
| 30 | | 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 | 2 |
| 32 | 0 | Plant food properly cooked for hot holding | 0 | 0 | 1 |
| 33 | 0 | Approved thawing methods used | 0 | 0 | 1 |
| 34 | 0 | Thermometers provided and accurate | 0 | 0 | 1 |
| | OUT | Food Identification | | | |
| 35 | 0 | Food properly labeled; original container; required records available | 0 | 0 | 1 |
| | OUT | Prevention of Food Contamination | | | |
| 36 | 0 | Insects, rodents, and animals not present | 0 | 0 | 2 |
| 37 | 0 | Contamination prevented during food preparation, storage & display | 0 | 0 | 1 |
| 38 | 0 | Personal cleanliness | 0 | 0 | 1 |
| 39 | 0 | Wiping cloths; properly used and stored | 0 | 0 | 1 |
| 40 | 0 | Washing fruits and vegetables | 0 | 0 | 1 |
| | OUT | Proper Use of Utensils | | | |
| 41 | 0 | In-use utensils; properly stored | 0 | 0 | 1 |
| 42 | 0 | Utensils, equipment and linens; properly stored, dried, handled | 0 | 0 | 1 |
| 43 | 12% | Single-use/single-service articles; properly stored, used | 0 | 0 | 1 |
| 44 | | Gloves used properly | | | |

| pecti | on | R-repeat (violation of the same code provision | | - | 140 |
|-------|-----|--|-------|----|-----|
| | | Compliance Status | cos | R | W |
| | OUT | Utensils and Equipment | | _ | _ |
| 45 | 0 | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used | 0 | 0 | 1 |
| 46 | 羅 | Warewashing facilities, installed, maintained, used, test strips | 0 | 0 | 4 |
| 47 | 黨 | Nonfood-contact surfaces clean | 0 | 0 | |
| | 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 | - 3 |
| 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 | Т | | |
| 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 | - 100 | 0 | |
| 58 | | Tobacco products offered for sale | 0 | 0 | ١ (|
| 59 | | If tobacco products are sold, NSPA survey completed | 0 | 0 | |

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

05/28/2023

Signature of Person In Charge

Date Signature of Environmental Health Specialist

05/28/2023 Date

**** 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: C & K Snowy De | | | | | |
| Establishment Number #: 605309845 | | | | | |
| | | | | | |
| NSPA Survey – To be completed if | | | | | |
| Age-restricted venue does not affirmatively rest twenty-one (21) years of age or older. | | | | | |
| Age-restricted venue does not require each per | rson attempting to gain entry | to submit acceptable form | of identification. | | |
| "No Smoking" signs or the international "Non-S | moking" symbol are not cons | picuously posted at every | entrance. | | |
| Garage type doors in non-enclosed areas are n | not completely open. | | | | |
| Tents or awnings with removable sides or vents | s in non-enclosed areas are r | not completely removed o | r open. | | |
| Smoke from non-enclosed areas is infiltrating in | nto areas where smoking is p | rohibited. | | | |
| Smoking observed where smoking is prohibited | d by the Act. | | | | |
| | | | | | |
| Warewashing Info | | | I = 1 1 | | |
| Machine Name | Sanitizer Type | PPM | Temperature (Fah | renhelt) | |
| Not Set up | | | | | |
| | | | | | |
| | | | | | |
| Equipment Temperature | | | | | |
| Description | | | Temperature (Fah | renhelt) | |
| No TCS foods | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| Food Temperature | | | | | |
| Description | | State of Food | Temperature (Fahi | renhelt) | |
| No TCS foods | | | | | |
| 140 100 10003 | | | | | |
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| Observed Violations |
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| Total # B |
| Repeated # () |
| 43: Single service products stored on floor. All single service products must be at least 6" off floor to avoid contamination and moisture. |
| 46: No drainboards provided for triple sink. Must provide 2 attached drainboards on each side of triple sink or provide one drainboard and a movable dish cart. |
| 47: Some non food contact surfaces dirty. |
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TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: C & K Snowy Delights (Mobile)

Establishment Number: 605309845

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by having no violations of priority violations during current inspection.
- 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: (NO) Did not observe a situation that required employees to wash hands during the inspection.
- 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 products obtained from approved sources.
- 10: (IN) All food received was in good condition and at the proper temperature.
- 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 products served/stored/cooked or prepared 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: (NA) Establishment does not cool TCS foods.
- 19: (NA) Establishment does not hot hold TCS foods.
- 20: (NA) Establishment does not cold hold TCS foods.
- 21: (NA) No Ready-to-eat, TCS foods prepared on premise and held, or commercial containers of ready-to-eat food opened and held, over 24 hours.
- 22: (NA) No food held under time as a public health control.
- (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: (IN) Establishment does not allow smoking inside facility and is in compliance with the State of TN non-smokers protection act.
- 58: (IN) Tobacco products not sold at establishment.

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 Name: C & K Snowy Delights (Mobile) | | |
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| Establishment Number: 605309845 | | |
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| Comments/Other Observations (cont'd) | | |
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| Additional Comments (cont'd) | | |
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Establishment Information

| Establishment Information Establishment Name: C & K Snowy Delights (Mobile) | | | | | |
|--|-----------|---------|------------------------|--|--|
| Stablishment Number #: | 605309845 | | | | |
| Sources | | | | | |
| Source Type: | Food | Source: | Approved sources noted | | |
| Source Type: | Water | Source: | Public Water Supply | | |
| Source Type: | | Source: | | | |
| Source Type: | | Source: | | | |
| Source Type: | | Source: | | | |
| Additional Comme | ents | | | | |
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