

Establishment Name

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

COS R WT

0 0

0 0

0 0

0 0

0 0

0 | 0 5

O Farmer's Market Food Unit Subway #31514 Remanent O Mobile Type of Establishment

8142 E Brainerd Rd O Temporary O Seasonal Address Chattanooga Time in 11:25 AM AM / PM Time out 11:55: AM

City 10/26/2021 Establishment # 605245342 Embargoed 0 Inspection Date

KRoutine O Follow-up O Complaint O Preliminary O Consultation/Other Purpose of Inspection

Number of Seats 53 Risk Category **O**3 04 Follow-up Required O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

	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						R	WT	Compliance Status					Compliance Status		
	IN	OUT	NA	NO	Supervision		0 0 5			IN	оит	NA	NO	Cooking and Reheating of Time/Temperature		
17	610	_		_	Person in charge present, demonstrates knowledge, and	_				""	001	160	110	Control For Safety (TCS) Foods		
1	黨	0			performs duties	0			16		0			Proper cooking time and temperatures		
IN OUT NA NO Employee Health					17	1	0	0	0	Proper reheating procedures for hot holding						
2	DK	0			Management and food employee awareness; reporting	0	0 0 5		Г						Cooling and Holding, Date Marking, and Time as	
3	×	0			Proper use of restriction and exclusion	0				IN	OUT	NA	NO	a Public Health Control		
	IN	OUT	NA	NO	Good Hygienic Practices				18	0	0	0	X	Proper cooling time and temperature		
4	100	0			Proper eating, tasting, drinking, or tobacco use	0	0		15		0	0		Proper hot holding temperatures		
5	黨	0			No discharge from eyes, nose, and mouth	00 0		20		0	0		Proper cold holding temperatures			
	IN OUT NA NO Preventing Contamination by Hands				21	X	0	0	0	Proper date marking and disposition						
6	黨	0		0	Hands clean and properly washed	0	0	l . l	22	0	ΙoΙ	×	0	Time as a public health control: procedures and records		
17	800	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	o	•		_			-			
ļ.,	-		_	_	alternate procedures followed			_	\vdash	IN	OUT	NA	NO			
8	5	0	NA	NO	Handwashing sinks properly supplied and accessible Approved Source	0	0 0 2		23	0	0	32		Consumer advisory provided for raw and undercooked		
-	_	-	NA.	NO		_	0.1.0.1		Н	IN	OUT	NA	NO	food Highly Susceptible Populations		
9	黨	0	_	1.000	Food obtained from approved source	0	0		\vdash	IN	OUT	NA	NO	righty ousceptible repulations		
10	0	8	0	12%	Food received at proper temperature	0	0	5	24	0	0	333		Pasteurized foods used; prohibited foods not offered		
11	150	-		_	Food in good condition, safe, and unadulterated Required records available: shell stock tags, parasite	-	-	ľ	Н	-						
12	0	0	×	0	destruction	0	0 0			IN	ОUТ	NA	NO	Chemicals		
	_	OUT	NA	NO	Protection from Contamination						25	_	0	200		Food additives: approved and properly used
13	_	_	黨		Food separated and protected	0	0	4	26	宴	0			Toxic substances properly identified, stored, used		
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Conformance with Approved Procedures		
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	×		Compliance with variance, specialized process, and HACCP plan		

GOOD RETAIL PRACTICES												
OUT=not in compliance COS=corrected on-site during inspection R-repeat (violation of the same code provision)												
	Compliance Status					COS R WT Compliance Status		Compliance Status	COS	R	WT	
	OUT Safe Food and Water							OUT	Utensiis and Equipment			
28	0	Pasteurized eggs used where required	0	0	1	1 [45	0	Food and nonfood-contact surfaces cleanable, properly designed,	0	0	•
29	0	Water and ice from approved source	0	0	2	1 L	40	•	constructed, and used	_	u	'
30		Variance obtained for specialized processing methods	0	0	1] [46 O		Warewashing facilities, installed, maintained, used, test strips		0	4
	OUT	Food Temperature Control				3 L					_	
31	0	Proper cooling methods used; adequate equipment for temperature	0	0	2	11	47	0	Nonfood-contact surfaces clean	0	0	1
31	١٠	control	0	9	2	11		OUT	Physical Facilities		_	
32	0	Plant food properly cooked for hot holding	0	0	1	11	48	0	Hot and cold water available; adequate pressure	0	ा	2
33	_	Approved thawing methods used	ō	Ō	1	11	49		Plumbing installed; proper backflow devices	ō	ō	2
34	_	Thermometers provided and accurate	0	0	1	11	50		Sewage and waste water properly disposed	0	0	2
	OUT		Ť	_		t t	51		Toilet facilities: properly constructed, supplied, cleaned	ō	ō	1
35	0	Food properly labeled; original container; required records available	0	О	1	11	52		Garbage/refuse properly disposed; facilities maintained	0	ō	1
-	OUT	Prevention of Feed Contamination	-			53 O Physical facilities installed, maintained, and clean		0	0	1		
_	-		-		_	4 6	-				$\overline{}$	
36	0	Insects, rodents, and animals not present	0	0	2	IJ	54	0	Adequate ventilation and lighting; designated areas used	0	0	1
37	0	Contamination prevented during food preparation, storage & display	0	0	1	Ш		OUT	Administrative Items			
38	0	Personal cleanliness	0	0	1	11	55	0	Current permit posted	0	ा	0
39	0	Wiping cloths; properly used and stored	0	0	1	11	56	0	Most recent inspection posted	0	0	v
40	0	Washing fruits and vegetables	0	0	1	11			Compliance Status	YES	NO	WT
	OUT	Proper Use of Utensils				1 [Non-Smokers Protection Act			
41		In-use utensils; properly stored	0	0	1	1 C	57 58		Compliance with TN Non-Smoker Protection Act	X	0	
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	1][58		Tobacco products offered for sale	0	0	0
43		Single-use/single-service articles; properly stored, used	0	0	1][59		If tobacco products are sold, NSPA survey completed	0	0	
44	0	Gloves used properly	0	0	1] ,						

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

10/26/2021 Signature of Person In Charge Date Signature of Environmental Health Specialist 10/26/2021

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: Subway #31514
Establishment Number #: 605245342

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.	Т
"No Smoking" signs or the international "Non-Smoking" symbol are not conspicuously posted at every entrance.	\top
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.	\top
Smoking observed where smoking is prohibited by the Act.	_

Warewashing Info								
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)					
3 comp sink	QA	200						

Equipment Temperature					
Description	Temperature (Fahrenheit)				
One door tall holing prepackaged milk	41				

Food Temperature						
Description	State of Food	Temperature (Fahrenheit)				
Deli turkey-prep top	Cold Holding	39				
Cooked chicken-prep top	Cold Holding	41				
Cut tomatoes-prep top	Cold Holding	38				
Tuna salad-prep top	Cold Holding	40				
Meatballs	Hot Holding	136				
Deli turkey-walk in	Cold Holding	40				
Deli ham-walk in	Cold Holding	40				
Cut tomatoes- 2 dr reach in	Cold Holding	41				

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Subway #31514 Establishment Number: 605245342

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 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: 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: No raw animal product prepared
- 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: (IN) All TCS foods are properly reheated for hot holding.
- 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
- 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:

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: Subway #31514 Establishment Number: 605245342				
Comments/Other Observations (cont'd)				
Additional Comments (cont'd)				
See last page for additional comments.				

Establishment Information

Establishment Information								
Establishment Name: Subway #31514								
Establishment Number #:	605245342							
-								
Sources								
Source Type:	Food	Source:	Reinhart					
Source Type:	Water	Source:	Water is from approved source					
Source Type:		Source:						
Source Type:		Source:						
Source Type:		Source:						
Additional Comme	ents							