### TENNESSEE DEPARTMENT OF HEALTH FOOD REDVICE FRARI IRUMENT INRECTION DEBORT

				FOOD SER	VICE ESTA	BL	ISH	IME	ENT	r II	<b>NSI</b>	PEC	TIC	DN REPORT	SCO			$\neg$		
Establishment Name				Greg's Sandwich Works								10								
Address				6337 East Brainerd Road Type of Establishment												/				
City					Chattanooga Time in 02:45 PM AM / PM Time out 03:15; PM AM / PM															
				11/11/2022 Establishment # 605243470 Embargoed 0																
Inspe					KRoutine		O Complaint			_			a =		0	nsultation/Other				
Purpo					_	O Follow-up				O Pro	eaman	ary							03	
Risk (	Categ				O1 ors are food pr	eparation practice	O3 s and employee	beha		04	et c	omn	nonh			up Required O Yes 🐹 No I to the Centers for Disease Control	Number of S		35	
			_	LS C	ontributing fac											control measures to prevent illness	s or injury.			
		(Marr	k des	ignet	ed compliance sta											INTERVENTIONS ach item an applicable. Deduct points for cate	egory or subcate	pory.)		
IN=i	n con	ıpiiar	nce			ance NA=not applicab	le NO=not observe		_		S=co	recte	d on-s	site duri	ng ins	pection R=repeat (violation of the se				
			NA	110	Cor	mpliance Status		cos	R	WT				_		Compliance Status Cooking and Reheating of Time/Ter		cos	R	WT
		-	NA		Person in charge	Supervision present, demonstrate	s knowledge, and					IN	ουτ	NA	NO	Control For Safety (TCS) For				
		2 U	NA		performs duties		÷ .	0	0	5		00				Proper cooking time and temperatures		8	읽	5
2			NA		Management and	Employee Health d food employee award		0	o		"					Proper reheating procedures for hot holding Cooling and Holding, Date Marking, a		01	0	_
		Þ			Proper use of res	striction and exclusion		0	0	5		IN	OUT	NA	NO	a Public Health Control				
	N O		NA	NO		ood Hygienic Pract						0 家	0	-		Proper cooling time and temperature Proper hot holding temperatures		8	힞	
4 3 5 3		8			No discharge fro	sting, drinking, or toba m eyes, nose, and mo	uth	0	0	5	20	25	0			Proper cold holding temperatures		0	0	5
1	N O		NA		Preven Hands clean and	ting Contamination properly washed	by Hands	0	0	_		*		-	0	Proper date marking and disposition		_	0	ľ
		_	0	0	No bare hand co	ntact with ready-to-eat	foods or approved	ŏ	ŏ	5	22		0	~	-	Time as a public health control: procedures	and records	0	이	
8 8			-		alternate procedu Handwashing sin	iks properly supplied a	nd accessible	-	0	2	23	IN O	001	_	NO	Consumer Advisory Consumer advisory provided for raw and un	ndercooked			
	N O	UT	NA		Eand obtained for	Approved Source				_	23	IN	O		10	food Highly Susceptible Populatio		0	이	4
			0			om approved source proper temperature		6	0						NO					
11 3	20	2	_		Food in good cor	dition, safe, and unad available: shell stock		0	0	5	24		0			Pasteurized foods used; prohibited foods no	ot offered	0	이	5
	- 1 -	- I I	×	~	destruction			0	0				OUT		NO	Chemicals				
13 X	NO	UT D	NA O	NO	Food separated a	ection from Contan and protected	lination	0		4		<b>0</b>	8	X		Food additives: approved and properly user Toxic substances properly identified, stored		8	읭	5
14 8	Ř (	ō l	ŏ		Food-contact sur	faces: cleaned and sa		ŏ	Õ	5		IN		NA	NO	Conformance with Approved Pro	cedures	_		
15 8	8	٥			Proper dispositio served	n of unsafe food, retur	ned food not re-	0	0	2	27	0	0	黨		Compliance with variance, specialized proc HACCP plan	cess, and	٥	٥	5
				Goo	d Retail Pract	ices are preventiv	e measures to co	ntro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physical objects i	nto foods.			
										ar/A				8						
				001	F=not in compliance Con	npliance Status	COS=corre		R		inspe	ction				R-repeat (violation of the same of Compliance Status		COS	R	WT
28		UT	hasta	1100.000	Safe d eggs used whe	Food and Water		_		_		_	UT	and a		Utensils and Equipment nfood-contact surfaces cleanable, properly of	declared	_	_	
29		o iv	Water	r and	ice from approve	ed source		0	0	2	4	5 (				and used	designed,	0	0	1
30		י C עו	Variar	nce o		alized processing meth emperature Control		0	0	1	4	6 0	o  v	Narews	ashin	g facilities, installed, maintained, used, test	strips	0	0	1
31						d; adequate equipmen		0	0	2	4	_	-	Vonfoo	d-con	tact surfaces clean		0	0	1
32		-  ¢	Diant		properly cooked f	for hot holding			0				UT O F	lot and	Look	Physical Facilities water available; adequate pressure		0		2
33					thawing methods			ŏ	0							talled; proper backflow devices		0	0	2
34	_	Г C UT	Them	nome	eters provided and	d accurate of identification		0	0	1	5	_	_			waste water properly disposed s: properly constructed, supplied, cleaned			8	2
35	-	_	Food	0000		nal container; required	records available	0	0	1	5	_				use properly disposed; facilities maintained		0	5	1
		UT	~~~~	prop		of Food Contamina		ľ		-			-	-		ities installed, maintained, and clean			0	1
36		_	nsec	ts, ro	dents, and anima			0	0	2	5	_	_			ntilation and lighting; designated areas used	t t	_	ō	1
37	-	•	Conta	mina	ition prevented d	uring food preparation,	storage & display	0	0	1		0	UΤ			Administrative Items				
38					leanliness			0	0	1						nit posted		0	0	0
39 40	_				ths; properly used ruits and vegetabl			8	8		F	6 (		viost re	cent	Compliance Status		O YES	NO	WT
	0	UT			Prop	er Use of Utensils			· · ·							Non-Smokers Protection Ac	t		_	
41 42					nsils; properly sto quipment and line	red ens; properly stored, dr	ied, handled	0		1	5	7				with TN Non-Smoker Protection Act ducts offered for sale		8	8	0
43		<b>D</b> [5	Single	-use	/single-service ar	ticles; properly stored,			8	1		9	1	ftobac	co pr	oducts are sold, NSPA survey completed		0	0	
44 O Gloves used properly O			<u> </u>																	

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, 68-14-708, 68-14-709, 68-14-715, 68-14-716, 4-5-320.

4	11/11/2022		11/11/2022					
Signature of Person In Charge	Date	Signature of Environmental Health Specialist	Date					
**** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****								

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PH-2267 (Rev. 6-15)			th at the county health department.	RDA 629
	Please call (	) 4232098110	to sign-up for a class.	

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



### Establishment Information

Establishment Name: Greg's Sandwich Works Establishment Number # 605243470

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 inflitrating 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	Chlorine	50							

Equipment l'emperature	
Description	Temperature (Fahrenheit)

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Sliced tomatoes	Cold Holding	40
Sliced ham	Cold Holding	40
Egg salad	Cold Holding	40
Coleslaw	Cold Holding	40
Shredded lettuce	Cold Holding	40
Chili	Hot Holding	155
Tomato soup	Hot Holding	140
Chopped chicken	Cold Holding	40

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



#### Establishment Information

Establishment Name: Greg's Sandwich Works Establishment Number : 605243470

#### 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:

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.

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: (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: (NO) No raw animal foods cooked during inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: Proper hot holding temperatures observed.
- 20: Proper cold holding temperatures observed.
- 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: Greg's Sandwich Works Establishment Number : 605243470

Comments/Other Observations (cont'd)

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

# Establishment Information

Establishment Name: Greg's Sandwich Works

Establishment Number # 605243470

Sources				
Source Type:	Water	Source:	Public	
Source Type:	Food	Source:	PFG	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		

## Additional Comments