TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

Esta	Establishment Name							Type of Establishment O Fermanent O Mobile							r)			
Add	ress				1301 Dorche	ster Road, Su	ite 101					тур	e or E	state	snme	O Temporary O Seasonal			
City Chattanooga Time								02	<u>2:4</u>	0 F	M	AJ	/ PN	A Tir	me ou	ut 03:00: PM AM / PM			
Inspection Date 03/24/2023 Establishment # 605252397								7			Emba	rgoe	d 0						
Purpose of Inspection O Routine A Follow-up O Complaint									O Pro	Nimin	ary		0	Cor	nsultation/Other				
Risi	(Cat	legor			01	31 02	O 3			O 4						up Required O Yes 貿 No Number o		14	-
																I to the Centers for Disease Control and Prev control measures to prevent illness or injury.	ntion		
		(1)	urik de	elgnet	ed compliance status											INTERVENTIONS ach Item as applicable. Deduct points for category or subc	tegory.	,	
IN	⊨in c	ompii			OUT=not in compliance	e NA=not applicable	NO=not observe	ю		00						spection R*repeat (violation of the same code pro-	ision)		
	IN	OUT	NA	NO	Comp	liance Status Supervision		cos	R	WT	Ь		010		NO	Compliance Status Cooking and Reheating of Time/Temperature	COS	R	WT
1	黨	0				esent, demonstrates kn	nowledge, and	0	0	5		IN		NA		Control For Safety (TCS) Foods			
		-	NA	NO	performs duties	Employee Health		-			16	00	0	0		Proper cooking time and temperatures Proper reheating procedures for hot holding	8	00	5
	Ř					od employee awarenes	ss; reporting		2	5		IN	оυт	NA	NO	Cooling and Holding, Date Marking, and Time a	•		
	8	0	NA		Proper use of restric	tion and exclusion d Hygienic Practices		0	0	_	18	0	0	0	84	Public Health Centrol Proper cooling time and temperature	-	0	
4	1	0	-	0	Proper eating, tastin	g. drinking, or tobacco		0	0	5	19	×	0	0		Proper hot holding temperatures	0	0	
5	黨 IN	OUT	NA			yes, nose, and mouth g Contamination by	Hands	0	0	-		100	00	8	0	Proper cold holding temperatures Proper date marking and disposition	8	8	5
6	黛	0			Hands clean and pro	operly washed		0	0	5		0	0	X		Time as a public health control: procedures and records	0	0	
7	鬣	0	0	0	alternate procedures			0	0			IN	OUT		NO	Consumer Advisory			
8	N IN	애	NA			properly supplied and a Approved Source	accessible	0	0	2	23	0	0	X		Consumer advisory provided for raw and undercooked food	0	0	4
	黨				Food obtained from				0			IN	OUT	NA	NO	Highly Susceptible Populations			
10	8	8	0		Food received at pro Food in good condit	oper temperature ion, safe, and unadulter	rated	8	0	5	24	0	0	X		Pasteurized foods used; prohibited foods not offered	0	0	5
12	0	0	×	0	Required records av destruction	ailable: shell stock tag	s, parasite	0	0			IN	OUT	NA	NO	Chemicals			
				NO	Protect	ion from Contamina	ition	~			25	0		X		Food additives: approved and properly used	0	0	5
13	区区	8	<u>家</u> 0		Food separated and Food-contact surface	es: cleaned and sanitiz	red		0		26		O OUT	NA	NO	Toxic substances properly identified, stored, used Conformance with Approved Procedures	10		
	篾	_		, 	Proper disposition or served	f unsafe food, returned	food not re-	0	0	2	27	X	0	0		Compliance with variance, specialized process, and HACCP plan	0	0	5
				Goo	d Retail Practice	s are preventive n	neasures to co	ontro	the	intro	oduc	tion	of p	atho	gens	, chemicals, and physical objects into foods.			
										∃T/Al			ICE	3					
				00	fenot in compliance Compl	iance Status	COS=corre		R R		inspe	ction				R-repeat (violation of the same code provision Compliance Status		R	WT
2	_	OUT	Dact	0.0570	Safe Fe d eggs used where r	ood and Water		0	0	-			UT	ood ar	ad no	Utensils and Equipment mod-contact surfaces cleanable, properly designed,			
2	9	0	Wate	er and	ice from approved s	ource		0	0	2	4	5 0				and used	0	0	1
3	0	OUT		ince c		ed processing methods perature Control	;	0	0	1	4	5 0	o v	/arew	ashin	g facilities, installed, maintained, used, test strips	0	0	1
3	1	0			ling methods used;	adequate equipment fo	r temperature	0	0	2	4	_	_	onfoo	d-cor	tact surfaces clean	0	0	1
3	2	0	Contr		properly cooked for	hot holding		0	0	1	4	_	UT DH	ot and	1 cold	Physical Facilities	0		2
_	3	0	Appr	oved	thawing methods use	ed		0	0	1	49	_	_			stalled; proper backflow devices	0	0	2
3	4	OUT		mome	ters provided and ac Food I	identification		0	0	1	5	_	-			waste water properly disposed s: properly constructed, supplied, cleaned	8	0	2
3	5	0	Food	i prop	erly labeled; original	container; required rec	ords available	0	0	1	5	2 0	5 G	arbag	e/refi	use properly disposed; facilities maintained	0	0	1
		OUT			Prevention of	Food Contaminatio	n				5	5 0	D P	hysica	al faci	lities installed, maintained, and clean	0	0	1
3	6	ο	Insec	cts, ro	dents, and animals n	ot present		0	0	2	5	1	D A	dequa	de ve	ntilation and lighting; designated areas used	0	0	1
3	7	X	Cont	amina	tion prevented durin	g food preparation, sto	rage & display	0	0	1		0	UΤ			Administrative items			
3	_	-			leanliness			0	0	1	5		_		-	nit posted	0	0	0
_	9 0				ths; properly used ar uits and vegetables	nd stored			0	1	54	\$ (o ∣M	lost re	cent	Compliance Status		0 NO	WT
		OUT			Proper	Use of Utensils										Non-Smokers Protection Act			
4	1 2				usils; properly stored quipment and linens;	properly stored, dried,	handled	0		1	5	5				with TN Non-Smoker Protection Act ducts offered for sale	0	8	0
	43 Single-use/single-service articles; properly stored, used O O 1 44 O Gloves used properly O O 1																		
	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																		
serv	ice et	stabli:	shmer	st perm	it. Items identified as o	constituting imminent hea	alth hazards shall be	e corre	cted is	mmedi	ately	or ope	ration	s shall	ceas	e. You are required to post the food service establishment per	mit in a	consp	icuous
	namer 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 68-14-708, 68-14-708, 68-14-709, 68-14-718, 68-14-715, 68-14-716, 4-5-320.																		
<	_	~		~			03/2	24/2	023	3			$\overline{}$	X-	ト		03/2	24/2	2023
Sig	natu	re of	Pers	on In	Charge				0	Date	Sig	natu	re of	Envir	onme	ental Health Specialist			Date

••••	Addition	al foor	d safety	/ inform	ation can	be found on our website	http://tn.	gov/health/a	rticle/el	h-foodservic	ce ****	
						10.00						

PH-2267 (Rev. 6-15)	Free food safety training class	es are available each mont	h at the county health department.	RDA 629
1192201 (1001: 0-10)	Please call () 4232098110	to sign-up for a class.	101.025

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Southern Squeeze Establishment Number #: 605252397

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							

Equipment Temperature	
Decoription	Temperature (Fahrenheit)

ecoription	State of Food	Temperature (Fahrenheit

Observed Violations		
Total # 4 Repeated # ()		
Repeated # 0		
34:		
37:		
57.		
39:		
13:		

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Southern Squeeze Establishment Number : 605252397

Comments/Other Observations	
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2:	
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2:	
0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 0: 1: 2: 3: 4: 5: 6: 7: 8: 9: 5: 6: 7: 8: 9: 7: 8: 9: 5: 6: 7: 8: 9: 5: 6: 7: 8: 9: 5: 6: 7: 8: 9: 5: 6: 7: 8: 9: 5: 6: 7: 8: 5: 6: 7: 8: 5: 6: 7: 8: 5: 6: 7: 8: 5: 6: 7: 7: 8: 8: 7: 7: 8: 8: 7: 7: 8: 8: 7: 7: 8: 8: 7: 7: 8: 7: 7: 8: 8: 7: 7: 7: 8: 8: 7: 7: 8: 8: 7: 7: 7: 8: 8: 7: 7: 7: 8: 8: 7: 7: 7: 8: 8: 7: 7: 7: 8: 7: 7: 7: 7: 8: 7: 7: 7: 7: 7: 7: 7: 7: 7: 7	
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-).).	

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: Southern Squeeze Establishment Number: 605252397

Comments/Other Observations (cont'd)

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

Establishment Information

Establishment Name: Southern Squeeze
Establishment Number # 605252397

Sources		
Source Type:	Source:	

Additional Comments

Handwash sinks are stocked and accessible today. Toxics are labeled properly.