

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit City Café Diner O Permanent O Mobile Establishment Name Type of Establishment 901 Carter St. O Temporary O Seasonal Address Chattanooga Time in 10:00 AM AM / PM Time out 11:00: AM AM / PM City 09/29/2021 Establishment # 605171262 Embargoed Inspection Date **K**Routine O Follow-up O Complaint O Preliminary O Consultation/Other Purpose of Inspection

04

О3

Number of Seats 127

Follow-up Required

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

117	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		Ö
					Compliance Status	cos	R	WT
	IN	OUT	NA	NO	Supervision			
1	邕	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5
	IN	OUT	NA	NO	Employee Health			
2	- DAG	0			Management and food employee awareness; reporting	0	0	
3	寒	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	黨	0		0	No discharge from eyes, nose, and mouth	0	0	°
	IN	OUT	NA	NO	Preventing Contamination by Hands			
6	黨	0		0	Hands clean and properly washed	0	0	
7	鼷	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	黨	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	Ж	0	Required records available: shell stock tags, parasite destruction	0	0	
	IN	OUT	NA	NO	Protection from Contamination			
13	黛	0	0		Food separated and protected	0	0	4
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5
15	涎	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	凝	0	0	0	Proper cooking time and temperatures	0	0	5
17	0	186	0	0	Proper reheating procedures for hot holding	0	0	۰
	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	2	0	0	0	Proper hot holding temperatures	0	0	
20	0	×	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	*
22	0	羅	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	×		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	X		Food additives: approved and properly used	0	0	5
26	2	0			Toxic substances properly identified, stored, used	0	0	۰
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	×		Compliance with variance, specialized process, and HACCP plan	0	0	5

级 Yes O No

the introduction of pathogo s, chemicals, and physical objects into foods.

L PRACTICES

			GOO		
		OUT=not in compliance COS=con			
		Compliance Status	cos	R	W
	OUT	Caro i con amo i i mori	_		_
28	0	Pasteurized eggs used where required	0	0	1
29	0		0	0	_;
30	0	Variance obtained for specialized processing methods	0	0	'
	OUT	Food Temperature Control			
31	0	Proper cooling methods used; adequate equipment for temperature control	0	0	:
32	0	Plant food properly cooked for hot holding	0	0	Г
33	0	Approved thawing methods used	0	0	1
34	0	Thermometers provided and accurate	0	0	Г
	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	1
37	0	Contamination prevented during food preparation, storage & display	0	0	1
38	0	Personal cleanliness	0	0	Г
39	188	Wiping cloths; properly used and stored	0	0	
40	0	Washing fruits and vegetables	0	0	
	OUT	Proper Use of Utensils			
41	0	In-use utensils; properly stored	0	0	г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0		0	0	Г
44		Gloves used properly	0	0	

nspection R-repeat (violation of the same code provision)						
	COS	R	WT			
	OUT Utensils and Equipment					
45	45 O Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		0	0	1	
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1	
47	凝	Nonfood-contact surfaces clean	0	0	1	
	OUT	Physical Facilities				
48	0	Hot and cold water available; adequate pressure	0	0	2	
49	0	Plumbing installed; proper backflow devices	0	0	2	
50	0	Sewage and waste water properly disposed	0	0	2	
51	0	Toilet facilities: properly constructed, supplied, cleaned	0	0	1	
52	0	Garbage/refuse properly disposed; facilities maintained	0	0	1	
53	3%	Physical facilities installed, maintained, and clean	0	0	1	
54 O Adequate ventilation ar		Adequate ventilation and lighting; designated areas used	0	0	1	
	OUT	Administrative Items	Т			
55	0	Current permit posted	0	0	0	
56	0	Most recent inspection posted	0	0		
\Box		Compliance Status	YES	NO	WT	
Non-Smokers Protection Act						
57		Compliance with TN Non-Smoker Protection Act	- X	0		
58		Tobacco products offered for sale	0	0	0	
59		If tobacco products are sold, NSPA survey completed	0	0		

er and post the most recent inspection report in a conspicuous manner. You have the right to requ . T.C.A. sections 68-14-703, 68-14-706, 68-14-708, 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-329 er. You have the right to request a h n ten (10) days of the date of the

09/29/2021

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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 ****

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA

Smoking observed where smoking is prohibited by the Act.



Establishment Information

Establishment Name: City Café Diner
Establishment Number #: 605171262

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.	

Warewashing Info						
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)			
Dish Machine sanitizer Bucket	Chlorine QA	50 200				

Equipment Temperature						
Description		Temperature (Fahrenheit)				

Food Temperature		
Description	State of Food	Temperature (Fahrenheit)
Tomato	Cold Holding	46
Slaw	Cold Holding	48
Chicken Salad	Cold Holding	38
Guacamole	Cold Holding	37
Onion	Cold Holding	38
Pico de gallo	Cold Holding	37
Chicken	Cold Holding	37
Burger	Hot Holding	154
Sausage	Hot Holding	135

Observed Violations							
Total # 6							
Repeated # ()							
17: Chili recently placed on steam table holding at 56 in some areas.							
20: Multiple TCS food items held above 41°F in far lowboy and grill drawers.							
22: No documentation for TILT observed.							
39: Wiping cloth observed serving as fryer cover.							
47: Nonfood-contact surfaces soiled/dirty.							
53: Floor of walk-in freezer in poor repair.							
33. I loof of Walk III freezer III poor repair.							

[&]quot;"See page at the end of this document for any violations that could not be displayed in this space.

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: City Café Diner Establishment Number: 605171262

Comments/Other Observations

- 1: (IN): ANSI Certified Manager present.
- 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: Proper 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: Source approved.
- 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: (IN) All raw animal foods cooked to proper temperatures.
- 18: (N.O.) No cooling of TCS foods during inspection.
- 19: See temperatures.
- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 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 Information	
Establishment Number: 605171262 Comments/Other Observations (cont'd) Additional Comments (cont'd)	Establishment Name: City Café Diner	
Additional Comments (cont'd)	Establishment Number : 605171262	
Additional Comments (cont'd)		
Additional Comments (cont'd)	Comments/Other Observations (cont'd)	
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See last page for additional comments.		
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Establishment Information							
Establishment Name: City Café Diner							
Establishment Number #: 605171262							
Sources							
Source Type: Water	Source:	Public					
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Source Type:	Source:						
Additional Comments							