## TENNESSEE DEPARTMENT OF HEALTH OD SERVICE ESTARI ISHMENT INSPECTION REPORT

| FOOD SERVICE ESTA  |         |          |         |         | BLISHMENT INSPECTION REPORT                  |  |                 |      |      |          |          |       | ON REPORT S | SCORE   |            |  |          |     |           |
|--|---------|----------|---------|---------|--|--|-----------------|------|------|----------|----------|-------|-------------|---------|------------|--|----------|-----|-----------|
| Catable broad Name   |         |          | a Nar   |         | McDonald's :                                 | # 3342                                       |                 |      |      |          |          |       |             |         |            | O Farmer's Market Food Unit  | 3(       | 2   |           |
| Establishment Name   |         |          |         |         | 4608 HWY 5                                   | 58   |                 |      |      |          | _        | Тур   | e of E      | stabli  | shme       |  |          | J   |           |
| Add  | ress    |          |         |         |  |  |                 |      |      |          | _        |       |             |         |            | O Temporary O Seasonal   |          |     |           |
| City   |         |          |         |         | Chattanooga                                  |  |                 |      | ):3  | 0 P      | ٩M       | _ A)  | / / PI      | M Tir   | me ou      | и 10:40; АМ АМ/РМ  |          |     |           |
| Insp   | ectio   | n Da     | rte     |         | 09/20/202                                    | 23 Establishment #                           | 60524936        | 3    |      | _        | Emba     | irgoe | d 0         |         |            |  |          |     |           |
| Puŋ  | pose    | of In    | spec    |         | Routine                                      | O Follow-up                                  | O Complaint     |      |      | -        | elimin   |       |             |         | ) Cor      | nsultation/Other   |          |     |           |
| Rick   | Cat     | legor    |         |         | 01   | 80(2   | 03              |      |      | 04       |          | 2     |             | Ec      |            | up Required O Yes 翼 No Number  | of Seats | 5   | 4         |
| 1.00   | 100     |          | isk I   | act     | ors are food prep                            | aration practices                            | and employee    |      | vior | 8 mo     |          |       |             | repo    | ortec      | to the Centers for Disease Control and Pre   | rention  |     |           |
|  |         |          |         | as c    | ontributing facto                            |  |                 |      |      |          |          |       |             |         |            | control measures to prevent illness or injur   |          |     |           |
|  |         | 04       | urik de | alonat  | ed compliance status                         |  |                 |      |      |          |          |       |             |         |            | INTERVENTIONS<br>ach litem as applicable. Deduct points for category or sul                | category | A)  |           |
| IN   | ⊨in c   | ompli    |         |         |  | ce NA=not applicable                         | NO=not observe  |      |      |          |          | _     |             |         |            | pection R=repeat (violation of the same code pr  |          |     |           |
|  | _       | _        | _       | _       |  | liance Status                                |                 | COS  | R    |          |          |       |             | _       | _          | Compliance Status  | _        | R   | WT        |
|  | IN      | OUT      | NA      | NO      |  | Supervision                                  |                 |      |      |          |          | IN    | ουτ         | NA      | NO         | Cooking and Roheating of Time/Temperatur<br>Control For Safety (TCS) Foods                 | ·        |     |           |
| 1  | 8       | 0        |         |         | Person in charge pro<br>performs duties      | resent, demonstrates k                       | nowledge, and   | 0    | 0    | 5        | 16       | 0     | 0           | 0       | ×          | Proper cooking time and temperatures   | - 0      | То  |           |
|  |         |          | NA      | NO      | Management and fo                            | Employee Health                              | or mosting      | ~    |      |          | 17       | 0     | 0           | 0       | X          | Proper reheating procedures for hot holding  | _        | 00  | <u>1°</u> |
|  | XX      | 0        |         |         | Proper use of restric                        | ction and exclusion                          | ss, reporting   | 0    | 0    | 5        |          | IN    | оυт         | NA      | NO         | Cooling and Holding, Date Marking, and Time<br>a Public Health Control                     |          |     |           |
| -  | _       |          | NA      | NO      |  | d Hygienic Practice                          |                 | ÷    | -    | -        | 18       | 0     | 0           | 0       | <u>8</u> 3 | Proper cooling time and temperature  | - 0      | Το  |           |
| 4  | 25      | 0        |         |         |  | ng, drinking, or tobacco                     | use             | 0    |      | 5        | 19       | 黨     | 0           | 0       | 0          | Proper hot holding temperatures  | 0        | 10  | 1         |
| 5  | 1       |          | NA      |         |  | eyes, nose, and mouth<br>ag Contamination by | , Manda         | 0    | 0    | <u> </u> | 20       | 黨     | 00          | 8       |            | Proper cold holding temperatures<br>Proper date marking and disposition                    | - 8      | 8   | 5         |
| 6  | 23      |          | 1404    |         | Hands clean and pr                           | operly washed                                |                 | 0    | 0    |          |          | 8     | o           | ō       |            | Time as a public health control: procedures and record                                     |          | 6   | 1         |
| 7  | 胀       | 0        | 0       | 0       | No bare hand conta<br>alternate procedure    | ct with ready-to-eat foo                     | ods or approved | 0    | 0    | 5        | "        | ín IN | OUT         | -       | NO         | Consumer Advisory  | » V      | 10  |           |
| 8  | ×       | 0        |         |         | Handwashing sinks                            | properly supplied and                        | accessible      | 0    | 0    | 2        | 23       |       | 0           | 12      |            | Consumer advisory provided for raw and undercooked   | 0        | То  | 1         |
|  | IN<br>宸 |          | NA      |         |  | Approved Source                              |                 | _    | 0    | _        | 23       | IN    | OUT         |         | 10         | food<br>Highly Susceptible Populations   |          | 10  |           |
| 9  | 췽       | 8        | 0       |         | Food obtained from<br>Food received at pro   |  |                 | 8    |      |          |          |       |             |         | NO         |  |          | Le  | 1         |
| 11   | ×       | õ        |         |         | Food in good condit                          | tion, safe, and unadulte                     |                 | õ    | õ    | 5        | 24       | 0     | 0           | ×       |            | Pasteurized foods used; prohibited foods not offered                                       | 0        | 0   | 5         |
| 12   | 0       | ο        | Ж       | 0       | Required records av<br>destruction           | vailable: shell stock tag                    | s, parasite     | 0    | 0    |          |          | IN    | OUT         | NA      | NO         | Chemicals  |          |     |           |
|  |         |          | NA      | NO      | Protect                                      | tion from Contamin                           | ation           |      |      |          |          | 0     | 0           | X       |            | Food additives: approved and properly used   | 0        | 0   | 5         |
| 13   | <u></u> | 0        | 0       |         | Food separated and<br>Food-contact surface   | d protected<br>ces: cleaned and sanitiz      | and .           | 8    | 8    | 4        | 26       | N N   | _           | NA      | NO         | Toxic substances properly identified, stored, used<br>Conformance with Approved Procedures | 0        | 0   |           |
|  | ž       | ō        | Ť       |         |  | of unsafe food, returned                     |                 | ō    | ō    | 2        | 27       | _     | 0           | 2       | _          | Compliance with variance, specialized process, and   | 0        | То  | 5         |
|  | ~       | •        |         |         | served                                       |  |                 | Ū    | •    | •        | - "      | •     | •           | ~       |            | HACCP plan   |          | 10  | ľ         |
|  |         |          |         | Goo     | d Retail Practice                            | es are preventive r                          | neasures to co  | ntro | the  | intr     | oduc     | tion  | of p        | atho    | gens       | , chemicals, and physical objects into foods   |          |     |           |
|  |         |          |         |         |  |  |                 | GOO  | D R  | ar A     | L PR     | АСТ   | ICE         | ;       |            |  |          |     |           |
| COOD Ref (CIS)   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 COS   R   WT |         |          |         |         |  |  |                 |      | 1.0  | 1 407    |          |       |             |         |            |  |          |     |           |
|  |         | OUT      |         |         |  | liance Status<br>ood and Water               |                 | cos  | ĸ    | WI       |          | 0     | UT          |         |            | Compliance Status<br>Utensils and Equipment  |          | S R | WT        |
| 2  |         |          |         |         | d eggs used where i                          |  |                 | 0    | 0    | 1        | 4        |       | 5 F         |         |            | nfood-contact surfaces cleanable, properly designed,                                       | 0        | Το  | 1         |
| 2  | 9       |          |         |         | ice from approved s<br>btained for specializ | source<br>ted processing methods             | 5               | 8    | 00   | 2        | $\vdash$ | +     |             |         |            | and used   |          | +   |           |
|  |         | OUT      |         |         |  | nperature Control                            | -               |      |      |          | 4        |       |             |         |            | g facilities, installed, maintained, used, test strips                                     | 0        | 0   | 1         |
| 3  | 1       | 0        | Prop    |         | ling methods used;                           | adequate equipment fo                        | or temperature  | 0    | 0    | 2        | 47       |       | Σ N<br>UT   | lonfoo  | d-con      | itact surfaces clean   | 0        | 0   | 1         |
| 3  | 2       | 0        |         |         | properly cooked for                          | hot holding                                  |                 | 0    | 0    | 1        | 4        | -     |             | lot and | f cold     | Physical Facilities  | 0        | 10  | 2         |
| _  | 3       | 0        | Appr    | oved    | thawing methods use                          | ed   |                 | 0    | 0    | 1        | 45       | _     | D P         | lumbir  | ng ins     | stalled; proper backflow devices   | 0        | 0   | 2         |
| 3  | 4       | O<br>OUT |         | mome    | eters provided and a                         | courate<br>Identification                    |                 | 0    | 0    | 1        | 50       | _     | _           |         |            | waste water properly disposed<br>is: properly constructed, supplied, cleaned               | - 00     | 8   |           |
| 3  | 5       | 001      | _       | 1 peppe |  | container; required rec                      | ords available  | 0    | 0    | 1        | 5        | _     |             |         |            | use properly disposed; facilities maintained   | -0       | 6   |           |
| -  | -       | OUT      |         | , prop  | ,  | Food Contaminatio                            |                 | -    |      | -        | 53       |       | -           | -       |            | ities installed, maintained, and clean   | -0       | -   |           |
| 3  | 6       | -        | Inse    | ts, ro  | dents, and animals r                         |  |                 | 0    | 0    | 2        | 54       | -+    | _           |         |            | ntilation and lighting; designated areas used  | ŏ        | 6   | -         |
| 3  |         | 0        |         |         |  | ng food preparation, sto                     | rane & disclay  | 0    | 0    | 1        |          | -     | UT          |         |            | Administrative Items   |          | 1   | 1         |
| 3  | _       | -        |         |         | leanliness                                   | of rows breparation, see                     | noge a aistraly | 0    | 0    | 1        | 54       |       |             | umont   | Dece       | nit posted   | -        | 0   | 1         |
| _  | 9       |          |         |         | ths; properly used an                        | nd stored                                    |                 | ŏ    |      | 1        |          | _     |             |         |            | inspection posted  | 0        | 0   | 1 °       |
| 4  | 0       | 0        | Was     |         | ruits and vegetables                         |  |                 |      |      | 1        |          |       |             |         |            | Compliance Status  |          |     | WT        |
| 4  | _       | OUT      |         | e ute   | Proper<br>nsils; properly stored             | Use of Utensils                              |                 | 0    | 0    | 1        | 57       | 7     | - 0         | ompli   | ance       | Non-Smokers Protection Act<br>with TN Non-Smoker Protection Act                            | - 17     | TO  | 1         |
| 4  | 2       | 0        | Uten    | sils, e | quipment and linens                          | ; properly stored, dried                     |                 | 0    | 0    | 1        | 58       | 8     | T           | obacc   | o pro      | ducts offered for sale   | Ő        | 0   | •         |
|  | 3<br>4  |          |         |         | /single-service articl<br>ed properly        | les; properly stored, use                    | ed              |      | 8    |          | 55       | 9     | lf          | tobac   | co pr      | oducts are sold, NSPA survey completed   | 0        | 0   | 1         |

ns 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 foo 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 conspicuou to corre d as o ost 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 thi 68-14-700, 68-14-706 d post the m

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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.gow/health/article/eh-foodservice \*\*\*\* Free food safety training classes are available each month at the county health department. Please call ( ) 4232098110 to sign-up for a class. PH-2267 (Rev. 6-15) RDA 629

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



#### Establishment Information

Establishment Name: McDonald's # 3342 Establishment Number # 605249363

| 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<br>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.  |  |
| Smoking observed where smoking is prohibited by the Act.   |  |

| Warewashing Info             |                |           |                          |  |  |  |  |  |  |
|------------------------------|----------------|-----------|--------------------------|--|--|--|--|--|--|
| Machine Name                 | Sanitizer Type | PPM       | Temperature (Fahrenheit) |  |  |  |  |  |  |
| Triple sink<br>CL dishwasher | QA<br>CL       | 200<br>50 |                          |  |  |  |  |  |  |

| Equipment l'emperature |                          |  |  |  |  |  |
|------------------------|--------------------------|--|--|--|--|--|
| Description            | Temperature (Fahrenheit) |  |  |  |  |  |
| Walk in cooler         | 37                       |  |  |  |  |  |
| Reach in cooler        | 38                       |  |  |  |  |  |
|                        |                          |  |  |  |  |  |
|                        |                          |  |  |  |  |  |

| Food Temperature             | od Temperature |                          |  |  |  |  |
|------------------------------|----------------|--------------------------|--|--|--|--|
| Description                  | State of Food  | Temperature ( Fahrenheit |  |  |  |  |
| Raw hamburger (walk in)      | Cold Holding   | 37                       |  |  |  |  |
| Chicken breast               | Hot Holding    | 149                      |  |  |  |  |
| Egg patty (walk in cooler)   | Cold Holding   | 38                       |  |  |  |  |
| Sausage                      | Hot Holding    | 162                      |  |  |  |  |
| Breakfast burrito (reach in) | Cold Holding   | 38                       |  |  |  |  |
|                              |                |                          |  |  |  |  |
|                              |                |                          |  |  |  |  |
|                              |                |                          |  |  |  |  |
|                              |                |                          |  |  |  |  |
|                              |                |                          |  |  |  |  |
|                              |                |                          |  |  |  |  |
|                              |                |                          |  |  |  |  |
|                              |                |                          |  |  |  |  |
|                              |                |                          |  |  |  |  |
|                              |                |                          |  |  |  |  |
|                              |                |                          |  |  |  |  |

#### Observed Violations

Total # 2

Repeated # 0

47: Excessive ice build up in walk in freezer.

53: Floor dirty in walk in freezer.

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



#### Establishment Information

Establishment Name: McDonald's # 3342

Establishment Number : 605249363

#### 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: (IN): good 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: (IN): Food from approved sources.

- 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 products cooked at facility during time of inspection.
- 17: (NO) No TCS foods reheated during inspection.
- 18: (NO): no cooling of TCS foods observed.

19: (IN): See temperatures.

20: (IN): See temperatures.

- 21: (IN) Verified date marking system in place for all ready-to-eat TCS foods that are held longer than 24 hours.
- 22: (IN): Establishmemt using TILT procedures correctly.
- 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: McDonald's # 3342

Establishment Number : 605249363

Comments/Other Observations (cont'd)

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

#### Establishment Information

Establishment Name: McDonald's # 3342

Establishment Number # 605249363

| Sources      |       |         |        |  |
|--------------|-------|---------|--------|--|
| Source Type: | Water | Source: | Public |  |
| Source Type: |       | Source: |        |  |
| Source Type: |       | Source: |        |  |
| Source Type: |       | Source: |        |  |
| Source Type: |       | Source: |        |  |

## Additional Comments