TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

																			ľ			,	
Establishment Name		Тасо	Bell #0	34026											O Farmer's Market Food		9						
Address			3210 Cummings Hwy. Type of Establishment O Temporary O Seasonal																				
City			Chattanooga Time in 09:45 AM AM / PM Time out 10:15: AM AM / PM																				
Inspection Date			07/1	3/202	23 Establi	shment#_60	_					argoe											
Purp					ORoutir		優 Follow-u		O Complaint			- O Pr			-		Cor	nsuitation/Other	L				
Risk					01		SEC2	-	03			04				Fo	ilow-i	up Required O Yes	赋 No	Number of 8	ieats	90	
																		to the Centers for Dise control measures to pre		ol and Preven		_	
					-one ipe	ung race												INTERVENTIONS	ivent nine	as or injury.			
	(Mark designated compliance status (IH, OUT, HA, HO) for each numbered Item. For Items marked OUT, mark COS or R for each Item as applicable. Deduct points for category or subcategory.)																						
IN-	in ci	ampa	ance	_	OUT-not		liance Stat		O=not observe	cos	R		5=00	mecter) on-s	ne duni	ng ins	Compliance Stat	us		on) COS	R	WT
\rightarrow	_	-	NA	NO	Doman	a abasao ne	Supervis		ulas and					IN	OUT	NA	NO	Cooking and Reheating Control For Safe					
		0	NA	NO	performs	duties	Employee	nstrates knowle	eoge, and	0	0	5		00	00	<u>×</u>		Proper cooking time and tem Proper reheating procedures	peratures		0	읽	5
2	X	0	nue -			ment and fo	od employee	e awareness; re	eporting	0		5	۳				NO	Cooling and Holding, De			-	-	-
		0	NA	NO			tion and exc d Hygienic			0	0	_	18	0	0	0		a Public He Proper cooling time and temp		al and a second s	0		_
4	1	0	-	0	Proper e	ating, tastin	g, drinking, c	or tobacco use		0		5	19	家	0	0	0	Proper hot holding temperatu	res		0	0	
	IN	OUT	NA	NO		Preventin		nation by Har	nds	0	0		20	200	ô			Proper cold holding temperat Proper date marking and disp			0	8	5
_		0	0	0	No bare	hand conta		ed -to-eat foods or	r approved	0	0 0	5	22		0	×	-	Time as a public health contr		es and records	0	0	
8	X	0	-	-	Handwa		properly sup	plied and acces	ssible	-	0	2	23	_	OUT	NA		Consumer Consumer advisory provided		undercooked	0	0	4
	IN 家		NA	NO			Approved 8 approved so			0	0	-		IN	OUT			food Highly Suscepti	bie Popula	tions	-	-	-
10 11		8	0	2			oper tempera ion, safe, and	iture d unadulterated	1	0	00	5	24	0	0	×		Pasteurized foods used; pro?	ibited foods	not offered	0	0	5
	_	0	X	0		d records av		l stock tags, pa		0	0			IN	OUT	NA	NO	Chem	icals			_	
13				NO	_	Protect parated and		ontamination	1	0		4	25 26	0	0	X		Food additives: approved and Toxic substances properly id	<u> </u>		8	응	5
14	×	0	õ	1	Food-co	ntact surfac	es: cleaned a	and sanitized 1. returned food	l a at an	ŏ	ŏ					NA	1000	Conformance with A	pproved P	rocedures		-	
15	2	0			served	isposition o	r unsate tooc	a, returned tood	a not re-	0	0	2	27	0	0	黨		Compliance with variance, sp HACCP plan	ecialized pr	ocess, and	0	٥	5
				Goo	d Retai	I Practice	s are prev	rentive meas	sures to co	ntro	l the	intr	oduc	tion	of p	atho	gens	, chemicals, and physic	al objects	into foods.			
										GOO					ICE	3							
	_		_	00	T=not in o		liance Stat		COS=corre		R		Inspe					Compliance Sta	tus	e code provision)	COS	R	WT
28	-		Past			sed where i		iter		0	0	1	4					Utensils and Equip nfood-contact surfaces cleans		y designed,	0	0	1
29 30	_						ed processin			8	0	2	4	+	0			and used g facilities, installed, maintain	nd used to	et etrice		0	÷
	-	OUT	_	xer co	olina met		adequate equ	centrel uipment for tem	nperature	-			4	_				tact surfaces clean	ra, asira, ins	yr su fro		 	1
31		0	cont	rol		cooked for				0	0	2		_	UT D H		loold	Physical Facilit water available, adequate pr				0	
33	5	Ō	Appr	roved	thawing r	methods us	ed			Õ	0	1	4	9 (ΣP	lumbir	ng ins	talled; proper backflow device	15		0	0	2
34	_	OUT		mom	eters prov	rided and a Food	courate Identificati	on		0	0	1	5	_	_			waste water properly dispose is: properly constructed, supp		1		0	2
35	;	0	Food	d prop	xerly label	ed; original	container; re	quired records	available	0	0	1	5	2 0) (larbag	e/refi	use properly disposed; facilitie	s maintaine	d	0	0	1
36	-		Inco	ote er		vention of d animals r	Feed Cont	amination		0	0	2	5	-+	-			lities installed, maintained, an ntilation and lighting; designal		ed.		0	1
30	+	-	-						9 disatau		0	1	F	-	UT	weque	ne ve			eu	-	<u> </u>	·
38	_	8	_		cleanlines		g tood prepa	ration, storage	a display	0	0	1	5	_		ument	Derm	Administrative in nit posted	ems		0	0	_
39		Ó	Wip	ng ck	oths; prop	erly used ar	nd stored			0	0	1		-	-			inspection posted			O YES	0	0
40	_	OUT					Use of Uter	nells			0							Compliance Sta Non-Smokers P		let			WI
41						perly stored t and linens		red, dried, han	dled	00	8	1	5	8				with TN Non-Smoker Protecti ducts offered for sale	on Act		8	읭	0
43	_	0	Sing	le-use		ervice articl	es; properly s				8		5	9	f	tobac	co pre	oducts are sold, NSPA survey	completed		0	0	
		corr	ect an	y viol	ations of r	sk factor iter				sion o	fyour	food						Repeated violation of an identic					
mann	er ar	nd po	st the	most	recent ins	pection report	t in a conspice	uous manner. Ye	ou have the rig	ht to r	eques							e. You are required to post the filling a written request with the C					
	/	- A.	 000	Y	Λ		100,001010	9, 68-14-711, 68-1	07/1			2		(2	J.	ρ	Eller)7/1	ວ/ວ	000
Sign	atur	e of	Pers	ion In	Charge				0//1	.312		Date	Sic	gnatu				ental Health Specialist		(Date
							Additional fo	ood safety info	rmation can	be fo				-				ealth/article/eh-foodservic	e ****				
PH-2	267 ((Rev.	6-15)			-	<i>P</i>	ning classes	s are	avai		eac	h ma	nth :	at the	cou	nty health department. p for a class.				RD	A 629

PH-2267 (Rev. 6-15)	Free food safety training cla	isses are available each mor	RDA 60	
1192201 (Nev. 0-10)	Please call () 4232098110	to sign-up for a class.	n De ca

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

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Establishment Name: Taco Bell #034026 Establishment Number #: 605255247

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.	
Smoking observed where smoking is prohibited by the Act.	

Warewashing Info										
Machine Name	Sanitizer Type	PPM	Temperature (Fahrenheit)							

Equipment Temperature	
Description	Temperature (Fahrenheit)

escription	State of Food	Temperature (Fahrenheit

Observed Violations						
Total # 4	VIVIdUVIIo					
Repeated #	0					
	U					
37:						
47:						
53:						
56. Mos	t complete recent inspection from 7/3/23 not posted.					
50. 1005						

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Establishment Information

Establishment Name: Taco Bell #034026 Establishment Number : 605255247

Comments/Other Observations		

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: Taco Bell #034026

Establishment Number : 605255247

Comments/Other Observations (cont'd)

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

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Sources		
Source Type:	Source:	

Additional Comments

Priority item #8 corrected. See original report date 7/3/23.