

Risk Category

TENNESSEE DEPARTMENT OF HEALTH FOOD SERVICE ESTABLISHMENT INSPECTION REPORT

SCORE

O Farmer's Market Food Unit Subway Remanent O Mobile Establishment Name Type of Establishment 3641 Brainerd Road, Suite A O Temporary O Seasonal Address Chattanooga Time in 02:10 PM AM / PM Time out 02:50; PM AM / PM City

01/09/2024 Establishment # 605240190 Embargoed 0 Inspection Date

KRoutine O Follow-up O Complaint O Preliminary O Consultation/Other Purpose of Inspection О3

04

Number of Seats 20 O Yes 疑 No

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

s (IN, OUT, NA, NO) for ea

Follow-up Required

10	¥=in c	ompli	ance		OUT=not in compliance NA=not applicable NO=not observe	ed		C)\$=co	rrecte	d on-si	te dur	ing ins	spection R=reper
					Compliance Status	cos	R	WT						Compliance S
	IN	оит	NA	NC						IN	оит	NA	NO	Cooking and Reheat Control For S
1	氮	0			Person in charge present, demonstrates knowledge, and performs duties	0	0	5	16	0	0	XX.	0	Proper cooking time and t
	IN	OUT	NA	NC	periodical decision and the second se				17		O	Õ	XX.	Proper reheating procedu
2	300	0		_	Management and food employee awareness; reporting	0	0							Cooling and Holding,
3	×	0			Proper use of restriction and exclusion	0	0	5		IN	ОUТ	NA	NO	a Public
	IN	OUT	NA	NC	Good Hygienic Practices				18	0	0	0	×	Proper cooling time and to
4	X	0		0	Proper eating, tasting, drinking, or tobacco use	0	0	5	19		0	0	0	Proper hot holding temper
5	*	0		0	No discharge from eyes, nose, and mouth	0	0	ľ	20	125	0	0		Proper cold holding temper
	IN	OUT	NA	NC	Preventing Contamination by Hands				21	X	0	0	0	Proper date marking and
6	100	0		0	Hands clean and properly washed	0	0		22	0	0	×	0	Time as a public health co
7	왮	0	0	0	No bare hand contact with ready-to-eat foods or approved	0	0	5	L.	_	_		_	·
•	000		_		alternate procedures followed	_	_			IN	OUT	NA	NO	Consun
8	3%	0		_	Handwashing sinks properly supplied and accessible	0	0	2	23	0	0	×		Consumer advisory provide
		OUT	NA	NC	Approved Source		_	_	1		_			food
9	黨	0			Food obtained from approved source	0	0			IN	OUT	NA	NO	Highly Susce
10	0	0	0	3	Food received at proper temperature	0	0		24	0	0	320		Pasteurized foods used; p
11	×	0			Food in good condition, safe, and unadulterated	0	0	5	27	_	•	(40)		Pasteurized loods used, p
12	0	0	Ж	0	Required records available: shell stock tags, parasite destruction	0	0			IN	оит	NA	NO	Ch
	IN	OUT		NC	Protection from Contamination				25	0	0	3%		Food additives: approved
13	0	0	窳		Food separated and protected	0	0	4	26	窳	0			Toxic substances properly
14	×	0	0		Food-contact surfaces: cleaned and sanitized	0	0	5		IN	OUT	NA	NO	Conformance witi
15	Ħ	0			Proper disposition of unsafe food, returned food not re- served	0	0	2	27	0	0	×		Compliance with variance HACCP plan

_					Compliance Status	COS	к	WI
	IN	OUT	NA	NO	Cooking and Reheating of Time/Temperature Control For Safety (TCS) Foods			
16		0	×	0	Proper cooking time and temperatures	0	0	5
17	0	0	0	300	Proper reheating procedures for hot holding	0	0	,
	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	×	0	0	0	Proper hot holding temperatures	0	0	
20	243	0	0		Proper cold holding temperatures	0	0	5
21	*	0	0	0	Proper date marking and disposition	0	0	*
22	0	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	333		Pasteurized foods used; prohibited foods not offered	0	0	5
	IN	оит	NA	NO	Chemicals			
25	0	0	3%		Food additives: approved and properly used	0	0	5
26	80	0			Toxic substances properly identified, stored, used	0	0	9
	IN	OUT	NA	NO	Conformance with Approved Procedures			
27	0	0	X		Compliance with variance, specialized process, and HACCP plan	0	0	5

trol the introduction of pathogens, chemicals, and physical objects into foods.

Compliance Status OUT Safe Food and Water 28 O Pasteurized eggs used where required 29 O Water and ice from approved source 30 O Variance obtained for specialized processing methods OUT Food Temperature Control 31 O Proper cooling methods used; adequate equipment for temperation control 32 O Plant food properly cooked for hot holding 33 O Approved thawing methods used 34 O Thermometers provided and accurate OUT Food Identification 35 O Food properly labeled; original container; required records avail OUT Prevention of Food Contamination 36 O Insects, rodents, and animals not present		GOO			
			cos	R	W
	OUT	Safe Food and Water			
	0	Pasteurized eggs used where required	0	0	1
			0	0	-
30	_		0	0	١,
	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	
34	0	- 11	0	0	Т
	OUT	Food Identification			
35	0	Food properly labeled; original container; required records available	0	0	-
	OUT	Prevention of Food Contamination			
36	0	Insects, rodents, and animals not present	0	0	
37	0	Contamination prevented during food preparation, storage & display	0	0	
38	0	Personal cleanliness	0	0	Г
39	0	Wiping cloths; properly used and stored	0	0	
40	0	Washing fruits and vegetables	0	0	
	OUT	Proper Use of Utensils	\top		
41	0	In-use utensils; properly stored	0	0	Г
42	0	Utensils, equipment and linens; properly stored, dried, handled	0	0	
43	0	Single-use/single-service articles; properly stored, used	0	0	Г
44	10	Gloves used properly	0	0	

pecti	on	R-repeat (violation of the same code provision)			
			COS	R	W
	OUT	Utensiis and Equipment			
45	0	Food and norfood-contact surfaces cleanable, properly designed, constructed, and used	0	0	1
46	0	Warewashing facilities, installed, maintained, used, test strips	0	0	1
47	0	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	0	Physical facilities installed, maintained, and clean	0	0	1
54	0	Adequate ventilation and lighting; designated areas used	0	0	1
	OUT	Administrative Items			
55	0	Current permit posted	0	0	-
56	0	Most recent inspection posted	0	0	`
		O Warewashing facilities, installed, maintained, used, test strips O Nonfood-contact surfaces clean OUT Physical Pacilities O Hot and cold water available; adequate pressure O Plumbing installed; proper backflow devices O Sewage and waste water properly disposed O Toilet facilities: properly constructed, supplied, cleaned O Garbage/refuse properly disposed; facilities maintained O Physical facilities installed, maintained, and clean O Adequate ventilation and lighting; designated areas used OUT Administrative Items			W
		Non-Smokers Protection Act			
57			- X	0	
58			0	0	
59		If tobacco products are sold, NSPA survey completed	0	0	

a conspicuous manner. You have the right to request a he 68-14-709, 68-14-711, 68-14-715, 68-14-716, 4-5-320. ten (10) days of the date of th

01/09/2024 Signature of Person In Charge

Date Signature of Environmental Health Specialist

01/09/2024 Date

**** Additional food safety information can be found on our website, http://tn.gov/health/article/eh-foodservice ****

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

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



_				
F-ctal	hire	hmont.	in the	nmation

Establishment Name: Subway
Establishment Number #: 605240190

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 wenty-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.	
Sarage 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 Sanitizer	QA Qa	200 200						

Equipment Temperature						
Description	Temperature (Fahrenheit)					
Walk-in cooler	40					

Description	State of Food	Temperature (Fahrenheit
Sliced tomatoes cb	Cold Holding	41
Sliced deli beef	Cold Holding	41
Chopped chicken cb	Cold Holding	41
Glazed chicken cb	Cold Holding	39
Meatballs steam well	Hot Holding	183
Chopped chicken in walk-in cooler	Cold Holding	38
Sliced tomatoes in walk-in cooler	Cold Holding	41

TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH FOOD INSPECTION DATA



Establishment Information

Establishment Name: Subway

Establishment Number: 605240190

Comments/Other Observations

- 1: (IN): PIC demonstrates knowledge by correctly answering questions regarding principles applicable to the food operation.
- 2: Employee Health Policy is posted. PIC and employees are aware of reportable symptoms and illnesses.
- 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 handwashing frequency and methods were 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 has been obtained by an 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: No raw food prepared
- 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: (NA) No raw animal foods served.
- 17: (NO) No TCS foods reheated during inspection.
- 18: Cooling not observed during inspection
- 19: See temps
- 20: See temps
- 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:

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 Name: Subway	
Establishment Number: 605240190	
Comments/Other Observations (cont'd)	
Additional Comments (cont'd)	
See last page for additional comments.	
see last page for additional comments.	

Establishment Information

Establishment Infor	mation			
stablishment Name: S	Subway			
stablishment Number #:	605240190			
Sources				
Sources				
Source Type:	Water	Source:	Public	
Source Type:	Food	Source:	Preformance Food	
Source Type:		Source:		
Source Type:		Source:		
Source Type:		Source:		
Additional Comme	ents			