

# Food Establishment Inspection Report

Score: 95.5

**Establishment Name:** MAYBERRY RESTAURANT  
**Location Address:** 50A MILLER ST  
**City:** WINSTON SALEM **State:** NC  
**Zip:** 27104 **County:** 34 Forsyth  
**Permittee:** MIKE RANKIN  
**Telephone:** (336) 724-3682

**Establishment ID:** 3034010781  
☒ Inspection ☐ Re-Inspection  
**Date:** 03/16/2015 **Status Code:** A - Open For Business  
**Time In:** 2:15 PM **Time Out:** 4:10 PM  
**Category#:** IV  
**FDA Establishment Type:** Full-Service Restaurant  
**No. of Risk Factor/Intervention Violations:** 1  
**No. of Repeat Risk Factor/Intervention Violations:**           

**Wastewater System:** ☒ Municipal/Community ☐ On-Site System  
**Water Supply:** ☒ Municipal/Community ☐ On-Site Supply

Foodborne Illness Risk Factors and Public Health Interventions									
Risk factors: Contributing factors that increase the chance of developing foodborne illness.									
Public Health Interventions: Control measures to prevent foodborne illness or injury.									
	IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R	VR
<b>Supervision</b> .2652									
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC present, Demonstration - Certification by accredited program, and performs duties	2		0	
<b>Employee Health</b> .2652									
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No evidence of leaks into or out from sewer lines/manholes?	3	1.5	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Free of blockages/solids buildup in lines or manholes?	3	1.5	0	
<b>Good Hygienic Practices</b> .2652, .2653									
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	0	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tanks and access manholes structurally sound,	1	.5	0	
<b>Preventing Contamination by Hands</b> .2652, .2653, .2655, .2656									
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sanitary tee(s) in good working condition?	4	2	0	
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or a pre-approved alternate properly followed	3	1.5	0	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Effluent appears clear, free of excess solids?	2	1	0	
<b>Approved Source</b> .2653, .2655									
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1	0	
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	High-water alarm present and operating properly?	2	1	0	
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe and unadulterated	2	1	0	
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1	0	
<b>Protection from Contamination</b> .2653, .2654									
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated and protected	3	1.5	0	
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No evidence of effluent surfacing/reaching surface waters	3	X	0	X
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, and unsafe food	2	1	0	
<b>Potentially Hazardous Food Time/Temperature</b> .2653									
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Surface water being effectively diverted away?	3	1.5	0	
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding	3	1.5	0	
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time and temperatures	3	1.5	0	
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	1.5	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	1.5	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking and disposition	3	1.5	0	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Time as a Public Health Control: procedures and records	2	1	0	
<b>Consumer Advisory</b> .2653									
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	.5	0	
<b>Highly Susceptible Populations</b> .2653									
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Laterals free of excess solids, cleaned out as needed?	3	1.5	0	
<b>Chemical</b> .2653, .2657									
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved and properly used	1	0.5	0	
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified, stored, and used	2	1	0	
<b>Conformance with Approved Procedures</b> .2653, .2654, .2658									
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	2	1	0	

Good Retail Practices									
Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.									
	IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R	VR
<b>Safe Food and Water</b> .2653, .2655, .2658									
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required	1	0.5	0	
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1	0	
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Variance obtained for specialized processing methods	1	0.5	0	
<b>Food Temperature Control</b> .2653, .2654									
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	0.5	0	
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding	1	0.5	0	
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	1	0.5	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate	1	0.5	0	
<b>Food Identification</b> .2653									
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	
<b>Prevention of Food Contamination</b> .2652, .2653, .2654, .2656, .2657									
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects and rodents not present; no unauthorized animals	2	1	0	
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display	2	1	0	
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	0.5	0	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored	1	0.5	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits and vegetables	1	0.5	0	
<b>Proper Use of Utensils</b> .2653, .2654									
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	0.5	0	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment and linens: properly stored, dried and handled	1	0.5	0	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use and single-service articles; properly stored and used	1	0.5	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	0.5	0	
<b>Utensils and Equipment</b> .2653, .2654, .2663									
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment, food and non-food-contact surfaces approved; cleanable, properly designed, constructed and used	X	1	0	X
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained and used; test strips	1	.5	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food-contact surfaces clean	1	X	0	
<b>Physical Facilities</b> .2654, .2655, .2656									
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure	2	1	0	
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	X	X
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage and waste water properly disposed	2	1	0	
51	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied and cleaned	1	.5	X	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage and refuse properly disposed; facilities maintained	1	.5	0	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained and clean	1	X	0	
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation and lighting requirements; designated areas used	1	.5	0	
<b>TOTAL DEDUCTIONS:</b>						<b>4.5</b>			



# Comment Addendum to Food Establishment Report

Establishment Name: MAYBERRY RESTAURANT  
 Location Address: 50A MILLER ST  
 City: WINSTON SALEM State: NC  
 County: 34 Forsyth Zip: 27104  
 Wastewater System: ☒ Municipal/Community ☐ On-Site System  
 Water Supply: ☒ Municipal/Community ☐ On-Site System  
 Permittee: MIKE RANKIN  
 Telephone: (336) 724-3682

Establishment ID: 3034010781  
☒ Inspection ☐ Re-Inspection Date: 03/16/2015  
 Comment Addendum Attached ? ☐ Status Code: A  
 Category#: IV  
 Email 1: \_\_\_\_\_  
 Email 2: \_\_\_\_\_  
 Email 3: \_\_\_\_\_

## Temperature Observations

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
turkey/ make unit	42.0	chili/ warmer	158.0		
ham/ make unit	40.0	hamburger/ final cook	160.0		
chicken/ make unit	42.0	bean and bac/ soup well	170.0		
tuna salad/ make unit	40.0	tomato soup/ soup well	168.0		
slaw/ make unit	40.0	broccoli and/ soup well	168.0		
tomato/ make unit	43.0	hot water/ prep sink	144.0		
lettuce/ make unit	45.0	sanitizer (c/ dish machine (ppm)	100.0		
hot dog/ warmer	165.0				

## Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below , or as stated in sections 8-405.11 of the food code.



Item Number	Observations and Corrective Actions
14	4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P Spray nozzles of the kitchen soda machine were clean however where the nozzles attach to the machine had build up of black mildew/mold debris. Food contact surfaces shall be maintained clean to sight and touch. CDI: PIC had nozzles cleaned and the attach points of the nozzles cleaned. CDI.
45	4-501.11 Good Repair and Proper Adjustment-Equipment - C Repeat: Large condensation leak in the walk in freezer needs to be repaired. Rust present on the walls and shelves of the walk in cooler, repair rust on walls and replace shelves that are rusted. Gasket on the walk in cooler door and the upright freezer are damaged and must be replaced. Insulation panels on the bottom of ice cream bin lids are coming off and need to be replaced. Rust present on shelves in reach in coolers, replace as needed. Vent cover on ice cream display case needs to be replaced due to a tear and bend in the metal. Bread racks are badly rusted and must be replaced. Two splits are present on the back splash of the prep table with the can opener attached. Two cracks present in the top front of each basin of the two compartment sink. repair cracks. Equipment shall be maintained in good repair. Repair/replace noted items.
47	4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C Cleaning needed on wire shelving through out (dry storage, walk ins). Cleaning needed in cabinets of the deep fryers to remove grease buildup, Cleaning needed on utility carts in back of establishment. Non food contact surfaces shall be maintained clean.
49	5-202.13 Backflow Prevention, Air Gap - P Spring of spray hose at dish machine scrap sink is loose and causes the spray hose to hang below the flood rim of the drainboard. Replace the spring of the spray hose so the head of the spray hose hangs at least 2 inches above the flood rim. 0 pts Contact Joseph Chrobak at the Forsyth County Health Department by 03/23/2015 to confirm new spring is attached and spray hose hangs properly.
51	5-501.17 Toilet Room Receptacle, Covered - C No covered waste bin in women's restroom. All restrooms used by women must be supplied with a covered waste bin for disposal of feminine hygiene products. Add a covered waste bin to the women's restroom.
53	6-201.11 Floors, Walls and Ceilings-Cleanability - C Floor tiles are damaged through the kitchen and need to be replaced with solid uncracked tiles. Baseboards are peeling away by the handsink and at the front of the walk in freezer. floors walls and ceilings shall be in good repair to aid in cleaning.

Person in Charge (Print & Sign): John Helms

Regulatory Authority (Print & Sign): Joseph Chrobak

REHS ID: 2450 Chrobak, Joseph

REHS Contact Phone Number: (336)703-3164

Verification Required Date: 03/23/2015

