-ood Establishment Inspection Report Score: 97.5													_						
S	abl	lis	hm	ner	nt Name: MELLOW MUSHROOM, THE							_ E	st	ablishment ID: 3034014005					_
Location Address: 314 W 4TH STREET										Inspection ☐ Re-Inspection									
Cit	y: \	ΛII	NST	TON	N SALEM	State	. NO	c	Date: Ø 6 / 18 / 2 Ø 1 8 Status Code: A										
City: WINSTON SALEM State: NC State: NC County: 34 Forsyth									Time In: $02:55 \otimes am \atop pm$ Time Out: $05:15 \otimes am \atop pm$										
									Total Time: _2 hrs 20 minutes										
											Category #: IV								
	•				(336) 245-2820	-							_	stablishment Type: Full-Service Restaurant					
	Vastewater System: $oxtimes$ Municipal/Community $oxtimes$ On-Site Sys										tem No. of Risk Factor/Intervention Violations: 1								
Water Supply: Municipal/Community On-Site Supply No. of Repeat Risk Factor/Intervention Violations:															-				
Foodborne Illness Risk Factors and Public Health Interventions										Good Retail Practices									
					ibuting factors that increase the chance of developing foodb ventions: Control measures to prevent foodborne illness or		ess.		0	aood	Ret	ail F	rac	tices: Preventative measures to control the addition of patho and physical objects into foods.	gens, o	cher	nicals	3,	
_	IN O	_			Compliance Status	OUT	CDI F	R VR		IN C	DUT	N/A	N/O	Compliance Status	OUT	. [,	CDI	R VI	_ ₹
_	ıperv	_			.2652				\vdash		_			Vater .2653, .2655, .2658					
1	\mathbf{Z}				PIC Present; Demonstration-Certification by accredited program and perform duties	2 0			28			\boxtimes		Pasteurized eggs used where required	1 0.5	0]
$\overline{}$	nplo	yee	He	alth	.2652				29	X				Water and ice from approved source	21	0]
\rightarrow	X []			Management, employees knowledge; responsibilities & reporting	3 1.5 0			30			×		Variance obtained for specialized processing methods	1 0.5	0		3	_]
3	X				Proper use of reporting, restriction & exclusion	3 1.5 0							atuı	re Control .2653, .2654					Į
$\overline{}$	$\overline{}$	lyc	ygienic Practices .2652, .2653					31	$\overline{}$				Proper cooling methods used; adequate equipment for temperature control	1 0.5	0		JE	ĺ	
\rightarrow	X [4			Proper eating, tasting, drinking, or tobacco use	2 1 0	+	49	32				X	Plant food properly cooked for hot holding	1 0.5	0		1]
_	X C]			No discharge from eyes, nose or mouth	1 0.5 0			33				X	Approved thawing methods used	1 0.5	\vdash	-	-	_
$\overline{}$	$\overline{}$	tin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656			70	34	\rightarrow				Thermometers provided & accurate	1 0.5	\vdash		7	- 1
+		_			Hands clean & properly washed No bare hand contact with RTE foods or pre-	420				od l	=	tific	atio	·	<u> </u>	۳	ا ا		1
\rightarrow	X [4		Ш	approved alternate procedure properly followed	3 1.5 0		쁘	35	_				Food properly labeled: original container	2 1	0		<u> </u>]
	X C	_			Handwashing sinks supplied & accessible	2 1 0			Pr	ever	ntio	n of	Fo	od Contamination .2652, .2653, .2654, .2656, .2657	7				
$\overline{}$	oprov	\neg	I Soi	urce			عاصاد		36					Insects & rodents not present; no unauthorized animals	21	0]
_	-	<u> </u>		.	Food obtained from approved source	210	++		37	×				Contamination prevented during food preparation, storage & display	21	0]
+	_	_		×	Food received at proper temperature	210			38	X				Personal cleanliness	1 0.5	0		3]
11	_	_			Food in good condition, safe & unadulterated Required records available: shellstock tags,	210	+		39	\rightarrow				Wiping cloths: properly used & stored	1 0.5	0		7	_
		_	×		parasite destruction	210			40	-		П		Washing fruits & vegetables	1 0.5	\vdash			_
$\overline{}$	$\overline{}$	\neg	$\overline{}$		Contamination .2653, .2654		1010		\perp				Ut	ensils .2653, .2654					1
13		<u> </u>	Ш	Ш	Food separated & protected	3 1.5 0	++			×				In-use utensils: properly stored	1 0.5	0		7]
14		丩			Food-contact surfaces: cleaned & sanitized Proper disposition of returned, previously served,	3 1.5 0	-	4	42	-	×			Utensils, equipment & linens: properly stored, dried & handled	1 0.5	×			1
15					reconditioned, & unsafe food	210			\vdash	+				Single-use & single-service articles: properly		0		7	_ 1
\neg	$\overline{}$	ıall		zaro	dous Food Time/Temperature .2653	3 1.5 0			44					stored & used		\exists			J -
16		_			Proper cooking time & temperatures				\vdash	_	$=$ \perp	nd I	Fau	Gloves used properly ipment .2653, .2654, .2663	1 0.5	0	الت		J
17		긔		X	Proper reheating procedures for hot holding	3 1.5 0						iiu I	∟qu	Equipment, food & non-food contact surfaces approved, cleanable, properly designed,					1
18 19		<u> </u>		\square	Proper cooling time & temperatures Proper hot holding temperatures	3 1.5 0								constructed, & used Warewashing facilities: installed, maintained, &				X	_
20	-	_	\equiv						\vdash	=				used; test strips	1 0.5			<u> </u>	_
20	+	X	ᆜ		Proper cold holding temperatures	3 1.5		11	\vdash				117.1	Non-food contact surfaces clean	1 0.5	0]
21	X	4			Proper date marking & disposition	3 1.5 0		48		nysic	al F	aci	iitie		2 1	ГО		7	1
22		<u> </u>		×	Time as a public health control: procedures & records	210			\vdash	-	_	Ш		Hot & cold water available; adequate pressure]
\neg	onsu	me	r Ad	lviso	Consumer advisory provided for raw or				49	-				Plumbing installed; proper backflow devices	21			<u> </u>]
	ably	Su	L Co	ntib	undercooked foods le Populations .2653	1 0.5 0		-11-1	50	_				Sewage & waste water properly disposed	21	0		4]
24	grify		SCe	μιιυ	Pasteurized foods used; prohibited foods not	3 1.5 0			51	X I				Toilet facilities: properly constructed, supplied & cleaned	1 0.5	0		1]
CI	nemi		الات		.2653, .2657		-11-		52					Garbage & refuse properly disposed; facilities maintained	1 0.5	0]
25		\neg	×		Food additives: approved & properly used	1 0.5 0			53		X			Physical facilities installed, maintained & clean	1 🔀	0		X C]
26	X				Toxic substances properly identified stored, & used	210			54	×				Meets ventilation & lighting requirements; designated areas used	1 0.5	0		5]
_		ma	nce	witl	h Approved Procedures .2653, .2654, .2658				H		1				2.5	\dashv			
27			X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	210								Total Deductions:	2.5				



27 🗆 🗆 🖂



	Comment	: Adde	<u>endum to</u>	Food E	<u>stablishme</u>	ent Inspec	ction Report			
Establishme	nt Name: MELLOW ML	ISHROOM	1, THE		Establishme	nt ID: 3034014	4005			
Location A	ddress: ^{314 W 4TH STF} ΓΟΝ SALEM	REET	Sta	ate:_NC_		☑ Inspection ☐ Re-Inspection Date: 06/18/2018 Comment Addendum Attached? ☐ Status Code: △				
County: 34			_ Zip: <u>27101</u>		Water sample ta		,	: <u>IV</u>		
Water Supply	System: Municipal/Comm Municipal/Comm THE MAKER LLC				Email 1: winst Email 2:	onsalem@mello	wmushroominfo.com			
	(336) 245-2820				Email 3:					
relepriorie	(000) 110 1010		Tomp	oroturo O						
	E# - P -	1	•		bservations		44 -1			
ltem Pizza	Location final cook	Temp 178		Location walk in	olding will o T 44	emp Item	Location	Temp 168		
pizza	final cook	179	tomato	walk in	42	beer chee	ese steam unit	178		
sanitizer (qac)	three comp sink (ppm)	300	lettuce	walk in	45	tomato so	oup steam unit	170		
sanitizer (CI)	dish machine (ppm)	100	raw beef	walk in	42	ham	pizza unit	38		
hot water	three comp sink	121	burgers	walk in	37	sausage	pizza unit	37		
Chicken	walk in	39	mozzerella	make unit	42	beef	pizza unit	38		
sausage	walk in	43	ham	make unit	42	tomato	pizza unit	36		
beef	walk in	42	steak	make unit	44	Johnatha	an 9/12/22	0		
pan of obe kept moved sinks dispersion of the sinks di	6 (A)(2) and (B) Poten cooked chicken wings is at 45F and lower at all to walk in to cool to be uring warm months at claced in the make unit. 1 Equipment and Uten is must be allowed to full ees and utilize method. 1 Good Repair and Proposed and the cooked and the cool in the make unit.	n make u I times. A low 45F. over 70F cooler. 0 sils, Air- lly air dry s to allow	unit at 53F. On the state of January Tofu was pregulary If foods are and the state of the state	ne pan of to 1st 2019 co pared by pu added to wa red - C Multi g and saniti rying. 0 pts	fu in make unit a ld held foods mu itting tofu in a pa ter from tap they ple plastic and n zing. Towel dryir	at 50F. Potentiust be kept at 4 an of water from y must be cool metal pans stang is not allowed atting boards a	ially hazardous foods 41F at all times. CDI: m prep sinks. Water of led down to 45F or ur cked wet in utensil sto led. Review air drying	held cold mus Both foods coming from nder prior to orage shelving needs with		
deep che pizza p Lock Text	Repair or replace cutt nips and absorbent sur rep line. Repair shelve:	faces. Res. Equipr	eplace the sm nent shall be	nall cutting b kept in good	oards. Minor rus					
Person in Char	ge (Print & Sign):	nnathan 		Beck	_	Justen				
Regulatory Au	thority (Print & Sign): ^{Jos}	<i>Fi</i> lseph	rst	Chrobak L	ast -	fin		<u> </u>		
	REHS ID: 2	2450 - C	hrobak, Jose	eph	V	erification Requ	ired Date:/	/		
DELIC C	antaat Dhana Numbar. (226		_	_	•				

REHS Contact Phone Number: (336)703-3164

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program DHHS is an equal opportunity employer.

Page 2 of ______ Food Establishment Inspection Report, 3/2013





Establishment Name: MELLOW MUSHROOM, THE Establishment ID: 3034014005

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.



6-201.11 Floors, Walls and Ceilings-Cleanability - C Repeat: Floor grout is wearing thin in multiple areas through the kitchen especially high traffic and moisture areas such as cook lines and dish washing area. Replace thin and missing grout to maintain cleanable surface. Tiles are cracked and separating from wall at corner to dish washing area by four compartment sink. Repair or cover tiles to maintain cleanable surface. Escutcheon caps pulled from wall where drain pipes pass through at meat prep sink and hand sink. Reseal escutcheon caps. Physical facilities shall be kept in good repair.





Establishment Name: MELLOW MUSHROOM, THE Establishment ID: 3034014005

Observations and Corrective Actions
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