

Food Establishment Inspection Report

Score: 90

Establishment Name: WAFFLE HOUSE #245

Establishment ID: 3034012079

Location Address: 716 HIGHWAY 66 SOUTH

☒ Inspection ☐ Re-Inspection

City: KERNERSVILLE

State: NC

Date: 07 / 20 / 2015 Status Code: A

Zip: 27284

County: 34 Forsyth

Time In: 02 : 50 ^{am}_{pm} Time Out: 05 : 20 ^{am}_{pm}

Permittee: WAFFLE HOUSE INC.

Total Time: 2 hrs 30 minutes

Telephone: (336) 996-2041

Category #: II

Wastewater System: ☒ Municipal/Community ☐ On-Site System

FDA Establishment Type: Fast Food Restaurant

Water Supply: ☒ Municipal/Community ☐ On-Site Supply

No. of Risk Factor/Intervention Violations: 6

No. of Repeat Risk Factor/Intervention Violations: 3

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
Supervision .2652											
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties				2	0	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health .2652											
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting				3	15	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion				3	15	0	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653											
4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use				2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth				1	05	0	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656											
6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed				<input checked="" type="checkbox"/>	2	0	<input checked="" type="checkbox"/>
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed				3	15	0	<input type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible				2	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
Approved Source .2653, .2655											
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source				2	1	0	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature				2	1	0	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated				2	1	0	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction				2	1	0	<input type="checkbox"/>
Protection from Contamination .2653, .2654											
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected				3	15	0	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized				3	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food				2	1	0	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653											
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures				3	15	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding				3	15	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures				3	15	0	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures				3	15	0	<input type="checkbox"/>
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures				3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition				3	15	0	<input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records				2	1	0	<input type="checkbox"/>
Consumer Advisory .2653											
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods				1	05	0	<input type="checkbox"/>
Highly Susceptible Populations .2653											
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered				3	15	0	<input type="checkbox"/>
Chemical .2653, .2657											
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used				1	05	0	<input type="checkbox"/>
26	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used				2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Conformance with Approved Procedures .2653, .2654, .2658											
27	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan				2	1	0	<input type="checkbox"/>

Good Retail Practices											
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
Safe Food and Water .2653, .2655, .2658											
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required				1	05	0	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source				2	1	0	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods				1	05	0	<input type="checkbox"/>
Food Temperature Control .2653, .2654											
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control				1	05	0	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding				1	05	0	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used				1	05	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate				1	05	0	<input type="checkbox"/>
Food Identification .2653											
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container				2	1	0	<input type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657											
36	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals				2	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display				2	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness				1	05	0	<input type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored				1	05	<input checked="" type="checkbox"/>	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables				1	05	0	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654											
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored				1	05	0	<input type="checkbox"/>
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled				1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used				1	05	0	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly				1	05	0	<input type="checkbox"/>
Utensils and Equipment .2653, .2654, .2663											
45	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used				2	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips				1	05	0	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean				1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
Physical Facilities .2654, .2655, .2656											
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure				2	1	0	<input type="checkbox"/>
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices				2	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed				2	1	0	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned				1	05	0	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained				1	05	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean				<input checked="" type="checkbox"/>	05	0	<input checked="" type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used				1	05	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Deductions:										10	

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

Comment Addendum to Food Establishment Inspection Report

Establishment Name: WAFFLE HOUSE #245

Location Address: 716 HIGHWAY 66 SOUTH

City: KERNERSVILLE State: NC

County: 34 Forsyth Zip: 27284

Wastewater System: ☒ Municipal/Community ☐ On-Site System

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

Permittee: WAFFLE HOUSE INC.

Telephone: (336) 996-2041

Establishment ID: 3034012079

☒ Inspection ☐ Re-Inspection Date: 07/20/2015

Comment Addendum Attached? ☐ Status Code: A

Category #: II

Email 1: jimmyniko@wafflehouse.com

Email 2:

Email 3:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
ambient	upright	43						
steak	upright	44						
sausage	upright	43						
ambient	walk in cooler	41						
hot water	three comp sink	135						
final plate	dishmachine	175						
chlorine	wiping cloth bucket	200						

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.

- 4 2-401.11 Eating, Drinking, or Using Tobacco - C: 0 pts. Employee drink sitting on prep surface next to waffle irons. Drink was then moved to prep table next to opened bag of biscuits. Can drink sitting on utensil storage shelf. Employee drinks shall be stored to not contaminate food, equipment, linens, single use or single service articles. CDI: Drinks moved.
- 6 2-301.14 When to Wash - P: REPEAT: Employee washing soiled dishes, then contacting clean dishes without washing hands. Employee accepting payments, then contacting equipment and preparing beverages without washing hands. Single use gloves being used to handle raw meat, then discarded and re-donned new gloves without washing hands prior to donning new gloves. Employee returned to cook line after using restroom and did not wash hands when entering cook line. Hands shall be washed at any time when contaminated.
- 8 6-301.12 Hand Drying Provision - PF: No paper towels available in the establishment for employees to dry hands after washing hands at handwashing sinks. Paper towels or air drying device shall be provided for drying hands after washing.//6-301.14 Handwashing Signage - C: REPEAT: Handsink on cook line does not have handwashing sign. A sign shall be posted directing food employees to wash hands when contaminated.



Person in Charge (Print & Sign): *Devan* *First* *Hester* *Last*

Regulatory Authority (Print & Sign): *Michelle* *First* *Bell* *Last*

left report in office

Michelle Bell REHS

REHS ID: 2464 - Bell, Michelle

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3141



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



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WAFFLE HOUSE #245

Establishment ID: 3034012079

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.



- 14 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and Hardness - P: Wet wiping cloth bucket with sanitizer at 0 ppm chlorine. Sanitizer shall be maintained from 50-200 ppm. CDI: Sanitizer remade and tested at 200 ppm. //4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P: Approximately 30% of utensils examined (coffee mugs, bowls, plates, silverware) soiled with crumbs and debris. Food contact surfaces of equipment and utensils shall be cleaned to sight and touch. CDI: Items sent to be re-washed.
- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P: REPEAT: Lettuce in make unit 53F. Sliced tomatoes in make unit 54F. Potentially hazardous food shall be maintained at 45F and below. Tomatoes were stacked out of the make unit. Lettuce was not cooled down before placing in make unit around 10am. CDI: Top layer of tomatoes moved to walk in cooler. Lettuce discarded (out for more than four hours).
- 26 7-204.11 Sanitizers, Criteria-Chemicals - P: 0 pts. One tub of chlorine sanitizer measuring in range too high on test strip. Chlorine sanitizer shall be maintained from 50-200 ppm. CDI: Employee remade sanitizer.. // 7-207.11 Restriction and Storage-Medicines - P,PF: Medications (acid reducer) being stored above bag-in-box sodas. Medications shall be stored below food.
- 36 6-501.111 Controlling Pests - PF: 0 pts. Approximately four to five flies present in facility at all times during inspection. A few gnats seen under counters and beverage machine. The premises shall be maintained free of insects, rodents, and other pests.
- 37 3-305.11 Food Storage-Preventing Contamination from the Premises - C: 0 pts. Cut lemon sitting on shelf, raw bacon, waffle batter, steak, burgers all in refrigeration uncovered. Food shall be stored covered to protect it from contamination from the premises./ Condiments being stored above and next to soiled drainboard by dish machine. Move these condiments to another area to prevent accumulation of soil.
- 39 3-304.14 Wiping Cloths, Use Limitation - C: 0 pts. One wet wiping cloth being stored on prep surface. When not in-use, wet wiping cloths shall be stored submerged in sanitizer solution.
- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C: A few plates found stacked wet in storage. After going through dishmachine, employee seen stacking plates wet. After being washed, rinsed, and sanitized, equipment and utensils shall be air-dried.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WAFFLE HOUSE #245

Establishment ID: 3034012079

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.



- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C: 0 pts. Some gaskets torn in four door cooler. Replace./ Beverage machine still dispenses beverages while ice bin lid is open. Repair.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C: Shelving, equipment, and nonfood contact surfaces throughout soiled. Ice bin lid soiled in back. Handwash sink soiled. Walk in cooler/freezer soiled around edges. Back of make unit lid soiled.
- 49 5-202.14 Backflow Prevention Device, Design Standard - P: 0 pts. Canwash set-up currently includes a hose with pistol grip attachment with only an atmospheric vacuum breaker attached. The current set-up (with pistol grip attached) requires a backflow prevention device rated for continuous pressure. Provide correct device.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C: REPEAT: Floors need detailed cleaning along baseboards and under equipment. Walls behind equipment soiled. Some dust has accumulated on ceiling. Floors, walls, and ceilings shall be cleaned at a frequency to preclude accumulation of soil.
- 54 6-202.12 Heating, Ventilation, Air Conditioning System Vents - C: 0 pts. Air conditioning vents dusty and causing accumulation of dust on ceilings. Clean.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WAFFLE HOUSE #245

Establishment ID: 3034012079

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.

✓
Spell



Comment Addendum to Food Establishment Inspection Report

Establishment Name: WAFFLE HOUSE #245

Establishment ID: 3034012079

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.

✓
Spell

