

Food Establishment Inspection Report

Score: 92

Establishment Name: BOJANGLES' WALKERTOWN

Establishment ID: 3034011868

Location Address: 5195 WALKERTOWN COMMONS CIRCLE

Inspection Re-Inspection

City: WALKERTOWN

State: NC

Date: 07 / 22 / 2015 Status Code: A

Zip: 27051

County: 34 Forsyth

Time In: 01 : 05 ^{am} _{pm} Time Out: 4 : 30 ^{am} _{pm}

Permittee: BJ RESTAURANT DEVELOPMENT, LLC

Total Time: 3 hrs 25 minutes

Telephone: (336) 595-2767

Category #: III

Wastewater System: Municipal/Community On-Site System

FDA Establishment Type: _____

Water Supply: Municipal/Community On-Site Supply

No. of Risk Factor/Intervention Violations: 3

No. of Repeat Risk Factor/Intervention Violations: _____

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	13	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			3	13	0	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653										
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use			2	1	0	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			1	03	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			4	<input checked="" type="checkbox"/>	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	13	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	13	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 checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures			3	13	0	<input type="checkbox"/>
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding			3	13	0	<input type="checkbox"/>
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures			3	13	0	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			3	13	0	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	13	0	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			3	13	0	<input type="checkbox"/>
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures & records			2	1	0	<input type="checkbox"/>
Consumer Advisory .2653										
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods			1	03	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	13	0	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used			1	03	0	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			2	1	0	<input 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	03	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	03	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	03	0	<input type="checkbox"/>
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding			1	03	0	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			1	03	0	<input type="checkbox"/>
34	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	03	<input checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals			2	1	0	<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	03	0	<input type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			<input checked="" type="checkbox"/>	03	0	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	03	0	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654										
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			1	03	<input checked="" type="checkbox"/>	<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	03	0	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			1	03	0	<input type="checkbox"/>
Utensils and Equipment .2653, .2654, .2663										
45	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used			2	1	0	<input type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			1	03	0	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			<input checked="" type="checkbox"/>	03	0	<input checked="" 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 checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	03	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			<input checked="" type="checkbox"/>	03	0	<input checked="" type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Deductions:							8			



Comment Addendum to Food Establishment Inspection Report

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City: WALKERTOWN **State:** NC
County: 34 Forsyth **Zip:** 27051
Wastewater System: Municipal/Community On-Site System
Water Supply: Municipal/Community On-Site System
Permittee: BJ RESTAURANT DEVELOPMENT, LLC
Telephone: (336) 595-2767

Establishment ID: 3034011868
 Inspection Re-Inspection **Date:** 07/22/2015
Comment Addendum Attached? **Status Code:** A
Category #: III
Email 1:
Email 2:
Email 3:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
chicken	drive thru prep line	172	cajun pintos	drive thru prep line	162	raw chicken	chicken cooler	40
rice	drive thru prep line	157	milk	drive thru refrigerator	36	buttermilk	produce cooler	41
gravy	drive thru prep line	166	chicken	wrap station	164	lettuce	produce cooler	37
salad	drive thru upright	45	country ham	drawer refrigerator	41	ServSafe	Heather Stephenson	0
cole slaw	drive thru upright	49	tomatoes	make unit	43			
chicken	prep line	152	scrambled	final cook	181			
mac & cheese	prep line	148	chicken	final cook	198			
chicken	prep line	139	buttermilk	biscuit refrigerator	42			

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 2-301.14 When to Wash - P One employee failed to wash hands before beginning shift. Another employee who came from the outside did not wash hands before dispensing food. Employees must wash hands before working with food and clean utensils. Employees washed hands as corrective action.
- 8 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF Employee utilized handwashing sink to clean food temperature measuring device. Ice dumped into handwashing sink. Handwashing sinks are for handwashing only.
6-301.11 Handwashing Cleanser, Availability - PF Soap was not available at the handwashing sink next to the ice machine. Soap must be available for handwashing at all times. Soap supplied as corrective action.
- 14 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - C Pan for transporting chicken and tongs at the drive thru serving line were not washed after 8 hours of use at room temperature. In use utensils must be washed at least every 4 hours.
4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P Six pans, one lid, and three tea urn nozzles required cleaning. Wash, rinse, and sanitize utensils. Clean to sight and touch. Utensils sent to be rewashed during inspection.

Person in Charge (Print & Sign): Heather ^{First} Stephenson ^{Last}

Regulatory Authority (Print & Sign): Anthony ^{First} Williams ^{Last}




REHS ID: 1846 - Williams, Tony

Verification Required Date: 08 / 01 / 2015

REHS Contact Phone Number: (336) 703 - 3161



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- 34 4-203.12 Temperature Measuring Devices, Ambient Air and Water-Accuracy - PF Replace damaged thermometer in the refrigerator in the drive thru area.
- 37 3-305.11 Food Storage-Preventing Contamination from the Premises - C One package of grits were not sealed. Once opened, seal dry goods to prevent contamination. Biscuit spreads are not covered in the biscuit making area. Keep items covered when not in use.
- 39 3-304.14 Wiping Cloths, Use Limitation - C Wet wiping cloths stored out of sanitizer. Wet wiping cloths must be maintained in sanitizer. One bucket of sanitizer stored on the floor. Sanitizer buckets must be stored off the floor
- 41 3-304.12 In-Use Utensils, Between-Use Storage - C Handle of ice scoop stored in contact with ice. Ice scoops must be stored with the handle protruding out of the ice.
- 42 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C Clean wiping cloths stored on the floor in back storage area. Keep wiping cloths stored off the floor. Clean utensils stored in an area above the dirty side drainboard where they are exposed to splash. Store clean utensils in areas where they are not exposed to contamination. Store clean utensils on clean surfaces.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C Clean inside and outside of equipment throughout. Clean inside cabinets below beverage stations. Clean tops of line equipment.
- 49 5-205.15 System Maintained in Good Repair - P Repair slow draining sink in the biscuit making area.
5-203.14 Backflow Prevention Device, When Required - P Provide backflow at all water using fixtures such as the hot water urn, coffee urn, wrap station reservoir, soda machine, etc. or provide documentation from the manufacturer that backflow prevention is installed.



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Spell

- 51 6-501.18 Cleaning of Plumbing Fixtures - C Clean toilet and handwashing sink in the mens restroom. Clean handwashing sink in biscuit making area.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C Floors and floor drains require cleaning, especially underneath equipment. Clean floors on a frequent basis. Clean walls behind the 3 compartment sink.
- 54 6-303.11 Intensity-Lighting - C Increase lighting to 50 f/c along the fryer cook line and under the grill (42-49 f/c). Increase lighting to 10 f/c in the walk-in freezer (4-9 f/c).



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✓
Spell

