

Food Establishment Inspection Report

Score: 95

Establishment Name: RESTAURANT AND PIZZERIA NEW YORK

Establishment ID: 3034012847

Location Address: 5083 UNIVERSITY PARKWAY

Inspection Re-Inspection

City: WINSTON SALEM State: NC

Date: 12 / 04 / 2019 Status Code: A

Zip: 27106 County: 34 Forsyth

Time In: 01 : 20^{am} pm Time Out: 03 : 30^{am} pm

Permittee: NEW YORK STYLE PIZZERIA AND RESTAURANT INC.

Total Time: 2 hrs 10 minutes

Telephone: (336) 661-8343

Category #: IV

Wastewater System: Municipal/Community On-Site System

FDA Establishment Type: Full-Service Restaurant

Water Supply: Municipal/Community On-Site Supply

No. of Risk Factor/Intervention Violations: 3

No. of Repeat Risk Factor/Intervention Violations: 1

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 0 0 0
Employee Health .2652						
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13 0 0 0
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13 0 0 0
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 0 0
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03 0 0 0
Preventing Contamination by Hands .2652, .2653, .2655, .2656						
6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2 2 2 2
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 0 0
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	2 0 2 2
Approved Source .2653, .2655						
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1 1 0 0
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1 0 0 0
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1 0 0 0
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1 0 0 0
Protection from Contamination .2653, .2654						
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13 0 0 0
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	2 0 2 2
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1 0 0 0
Potentially Hazardous Food Time/Temperature .2653						
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	13 0 0 0
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13 0 0 0
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13 0 0 0
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13 0 0 0
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13 0 0 0
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13 0 0 0
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	1 0 0 0
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 0 0
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 0 0
Chemical .2653, .2657						
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	03 0 0 0
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1 0 0 0
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 0 0

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 0 0
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1 0 0 0
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	03 0 0 0
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 0 0
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03 0 0 0
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	03 0 0 0
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03 0 0 0
Food Identification .2653						
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1 0 0 0
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 0 0
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	2 0 2 2
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03 0 0 0
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03 0 0 0
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03 0 0 0
Proper Use of Utensils .2653, .2654						
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	2 0 2 2
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	2 0 2 2
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03 0 0 0
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03 0 0 0
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 2 2 2
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03 0 0 0
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	03 0 0 0
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 0 0
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1 0 0 0
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1 0 0 0
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03 0 0 0
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03 0 0 0
53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	03 0 0 0
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	2 0 2 2
Total Deductions:					5	



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 County: 34 Forsyth Zip: 27106
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: NEW YORK STYLE PIZZERIA AND RESTAURANT INC.
 Telephone: (336) 661-8343

Establishment ID: 3034012847
 Inspection Re-Inspection Date: 12/04/2019
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: IV
 Email 1: rodrigoherandez@yahoo.com
 Email 2:
 Email 3:

Temperature Observations

Cold Holding Temperature is now 41 Degrees or less

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
beef soup	walk-in cooler	39	chlorine (ppm)	dish machine	50			
chicken wing	walk-in cooler	40	chicken	final cook	174			
chicken	walk-in cooler	39	ServSafe	Orlando Zelaya 12-16-23	0			
salsa	walk-in cooler	38						
refried beans	hot hold	150						
marinara	hot hold	155						
tomato	make-unit	40						
hot water	3-compartment sink	160						

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 2-301.12 Cleaning Procedure - P - Employee observed washing hands for about 10 seconds and turned off faucet handles with bare hands after washing. Employees shall wash hands for at least 20 seconds using soap with 10-15 seconds of vigorous scrubbing. After washing hands, employees must use a clean barrier, such as the paper towel to turn off the faucet handles to avoid recontaminating their hands. CDI - Employee educated on proper hand washing procedure and did so correctly. 0 pts.
- 8 6-301.12 Hand Drying Provision - PF - Repeat - Handwashing sink at back of kitchen had no paper towels. Paper towels shall be at each handwashing sink for employee hand washing. CDI - Dispenser refilled by manager.
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P - Tea nozzle and deli slicer had visible buildup on them and required additional cleaning. Food-contact surfaces of equipment and utensils shall be cleaned to sight and touch. Utensils and equipment that are in constant use shall be washed, rinsed and sanitized at least every 4 hours. For beverage dispensing equipment, the nozzles shall be cleaned at a frequency necessary to maintain them clean, or as often as required by the manufacturer. CDI - Both items taken to be washed during inspection.

Lock Text



Person in Charge (Print & Sign): Angel Hernandez

Regulatory Authority (Print & Sign): Andrew Lee

Angel Hernandez
Andrew Lee REHS

REHS ID: 2544 - Lee, Andrew

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3128



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



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- 37 3-307.11 Miscellaneous Sources of Contamination - C - Employee foods stored on shelves above food for restaurant in walk-in cooler. Employee foods must be stored separately from restaurant food. Do not store employee food over food for restaurant.
//
3-305.12 Food Storage, Prohibited Areas - C - Raw beef stored underneath PVC pipe that is leaking condensate in walk-in freezer. Food shall be protected against contamination by not storing the food underneath leaking condensate lines. CDI - Raw beef discarded.
- 41 3-304.12 In-Use Utensils, Between-Use Storage - C - Repeat - Scoop handle touching sugar in sugar bin. In-use utensils shall be stored in a manner that prevents the handle from touching the food or ingredient.
- 42 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C - Repeat - Plates at buffet line are not inverted or underneath sneeze protection. CDI - Buffet was closed at 3PM.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Condensate leaking from line in walk-in freezer. Equipment shall be maintained in good repair. Repair/evaluate walk-in freezer to prevent condensate from leaking onto food. Do not store food underneath line until it is repaired. Also, torn gaskets present on make-unit doors and door to walk-in cooler. Microwave handle missing. Equipment shall be maintained in good repair. 0 pts.
- 54 6-303.11 Intensity-Lighting - C - Repeat - Lighting low at Hobart mixer (10 foot candles). Lighting shall be at least 50 foot candles at food preparation areas. Replace burnt out light.



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Spell



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