

Food Establishment Inspection Report

Score: 96

Establishment Name: SEASONS RESTAURANT

Establishment ID: 3034010384

Location Address: 3333 SILAS CREEK PARKWAY

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 12 / 11 / 2019 Status Code: A

Zip: 27103 County: 34 Forsyth

Time In: 11 : 56 ^{am} _{pm} Time Out: 02 : 40 ^{am} _{pm}

Permittee: NOVANT HEALTH OF THE TRIAD

Total Time: 2 hrs 44 minutes

Telephone: (336) 718-5043

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: _____

| 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 | | |
| Employee Health .2652 | | | | | | | | | | |
| 2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Management, employees knowledge; responsibilities & reporting | | | 3 | 13 | 0 | |
| 3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper use of reporting, restriction & exclusion | | | 3 | 13 | 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 | |
| 5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No discharge from eyes, nose or mouth | | | 1 | 03 | 0 | |
| Preventing Contamination by Hands .2652, .2653, .2655, .2656 | | | | | | | | | | |
| 6 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hands clean & properly washed | | | 4 | 2 | 0 | |
| 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 | |
| 8 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Handwashing sinks supplied & accessible | | | 2 | 1 | 0 | |
| Approved Source .2653, .2655 | | | | | | | | | | |
| 9 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food obtained from approved source | | | 2 | 1 | 0 | |
| 10 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Food received at proper temperature | | | 2 | 1 | 0 | |
| 11 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food in good condition, safe & unadulterated | | | 2 | 1 | 0 | |
| 12 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Required records available: shellstock tags, parasite destruction | | | 2 | 1 | 0 | |
| Protection from Contamination .2653, .2654 | | | | | | | | | | |
| 13 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food separated & protected | | | 3 | 13 | 0 | |
| 14 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Food-contact surfaces: cleaned & sanitized | | | 3 | X | 0 | |
| 15 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper disposition of returned, previously served, reconditioned, & unsafe food | | | 2 | 1 | 0 | |
| Potentially Hazardous Food Time/Temperature .2653 | | | | | | | | | | |
| 16 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Proper cooking time & temperatures | | | 3 | 13 | 0 | |
| 17 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper reheating procedures for hot holding | | | 3 | 13 | 0 | |
| 18 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cooling time & temperatures | | | 3 | 13 | 0 | |
| 19 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Proper hot holding temperatures | | | 3 | X | 0 | |
| 20 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Proper cold holding temperatures | | | 3 | 13 | X | |
| 21 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper date marking & disposition | | | 3 | 13 | 0 | |
| 22 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Time as a public health control: procedures & records | | | 2 | 1 | 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 | |
| Highly Susceptible Populations .2653 | | | | | | | | | | |
| 24 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Pasteurized foods used; prohibited foods not offered | | | 3 | 13 | 0 | |
| Chemical .2653, .2657 | | | | | | | | | | |
| 25 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Food additives: approved & properly used | | | 1 | 03 | 0 | |
| 26 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toxic substances properly identified stored, & used | | | 2 | 1 | 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 | |

| 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 | |
| 29 | <input checked="" 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"/> | Variance obtained for specialized processing methods | | | 1 | 03 | 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 | |
| 32 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Plant food properly cooked for hot holding | | | 1 | 03 | 0 | |
| 33 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Approved thawing methods used | | | 1 | 03 | 0 | |
| 34 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Thermometers provided & accurate | | | 1 | 03 | 0 | |
| Food Identification .2653 | | | | | | | | | | |
| 35 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food properly labeled: original container | | | 2 | 1 | 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 | |
| 37 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Contamination prevented during food preparation, storage & display | | | 2 | 1 | 0 | |
| 38 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Personal cleanliness | | | 1 | 03 | 0 | |
| 39 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Wiping cloths: properly used & stored | | | 1 | 03 | 0 | |
| 40 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Washing fruits & vegetables | | | 1 | 03 | 0 | |
| Proper Use of Utensils .2653, .2654 | | | | | | | | | | |
| 41 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | In-use utensils: properly stored | | | 1 | 03 | 0 | |
| 42 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Utensils, equipment & linens: properly stored, dried & handled | | | 1 | X | 0 | |
| 43 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Single-use & single-service articles: properly stored & used | | | 1 | 03 | 0 | |
| 44 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Gloves used properly | | | 1 | 03 | 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 | X | |
| 46 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Warewashing facilities: installed, maintained, & used; test strips | | | 1 | X | 0 | |
| 47 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Non-food contact surfaces clean | | | 1 | 03 | 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 | |
| 49 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plumbing installed; proper backflow devices | | | 2 | 1 | 0 | |
| 50 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sewage & waste water properly disposed | | | 2 | 1 | 0 | |
| 51 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Toilet facilities: properly constructed, supplied & cleaned | | | 1 | 03 | 0 | |
| 52 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Garbage & refuse properly disposed; facilities maintained | | | 1 | 03 | 0 | |
| 53 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Physical facilities installed, maintained & clean | | | 1 | 03 | X | |
| 54 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Meets ventilation & lighting requirements; designated areas used | | | 1 | 03 | 0 | |
| Total Deductions: 4 | | | | | | | | | | |



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Comment Addendum to Food Establishment Inspection Report

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City: WINSTON SALEM State: NC

County: 34 Forsyth Zip: 27103

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

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

Permittee: NOVANT HEALTH OF THE TRIAD

Telephone: (336) 718-5043

Establishment ID: 3034010384

☒ Inspection ☐ Re-Inspection Date: 12/11/2019

Comment Addendum Attached? ☐ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1: ryansmith@lammorrison.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 |
|------------------|---------------|------|----------|----------|------|--------------|-------------------------|------|
| Ryan Smith | 4/3/23 | 0 | tomatoes | deli | 39 | rice cooling | WI: 45F cooling 10:30am | 0 |
| Hot water | two comp sink | 144 | rice | hot bar | 160 | chicken | asian station | 145 |
| flat bread | pizza station | 138 | beans | hot bar | 144 | beans | asian station | 138 |
| cream broc | hot well | 168 | pork | hot bar | 150 | | | |
| chicken tortilla | hot well | 172 | wings | hot box | 150 | | | |
| roast beef | deli | 39 | rice | hot box | 166 | | | |
| chicken | deli | 40 | beans | walk in | 40 | | | |
| ham | deli | 40 | beef | walk in | 39 | | | |

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 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - P Dish machine dispensing chlorine sanitizer solution at 0 ppm. Chlorine must be supplied at an effective sanitizer strength 50 -200ppm in dish machine. Employee had recently added a new bottle to dish machine and did not prime the machine to pull correct strength. CDI: Employee primed the machine and it consistently supplied 100ppm chlorine sanitizer solution. Review steps needed when machine is empty of sanitizer to prime and test concentration.
- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P Multiple hot held potentially hazardous foods below 135F. Two pans of pizza at 119-135F on pizza station. Shrimp at asian station at 122F. Chicken teriyaki and greenbeans in hot box at 120-131F. Potentially hazardous foods held hot must be kept at 135F or higher at all times. CDI: All noted foods moved to ovens and reheated to over 165F during inspection.
- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P One pan of Pico on service line at 48F. Potentially hazardous foods held cold must be kept at 41F or lower at all times. CDI: PIC had pan removed to walk in and replaced with new pan of pico at 41F. 0 pts

Lock
Text



Person in Charge (Print & Sign): Marco *First* Aponte *Last*

Regulatory Authority (Print & Sign): Joseph *First* Chrobak *Last*

REHS ID: 2450 - Chrobak, Joseph

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3164



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- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C Most metal pans and bowls in warewashing drying area were stacked while wet. All utensils and equipment after being washed and sanitized shall be allowed for fully air dry prior to storage and stacking. Increase air drying time and procedures for utensils.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C Two small cracks on left and front sides of the left basin at the two compartment sink. Have sink repaired by having cracks welded and sanded smooth. 0 pts.
- 46 4-301.12 Manual Warewashing, Sink Compartment Requirements - PF repeat: Establishment has two compartment sink for warewashing supplemental to the dish machine. Establishments using a two compartment sink must obtain a variance for its use or have approved by the local health department the use of hot water immersion sanitizing equipment or a detergent sanitizer combination chemical. Contact Joseph Chrobak at Chrobajb@forsyth.cc once application is sent and if approval is given by variance committee. Documentation for application given to operators at time of inspection.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C Minor cleaning needed on wall and floor to left of dish machine to remove soil and moisture build up. Physical facilities shall be maintained clean. // 6-201.11 Floors, Walls and Ceilings-Cleanability - C Reseal soda line pipes in dry storage where pipes were pulled from ceiling tile. Physical facilities shall be kept in good repair. 0 pts

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