

Food Establishment Inspection Report

Score: 95.5Establishment Name: SMITTY'S GRILLEEstablishment ID: 3034011693Location Address: 838-E S. MAIN STREET☒ Inspection ☐ Re-InspectionCity: KERNERSVILLEState: NCDate: 08 / 18 / 2015 Status Code: AZip: 27284County: 34 ForsythTime In: 02 : 30 ^{am}_{pm} Time Out: 04 : 35 ^{am}_{pm}Total Time: 2 hrs 5 minutesPermittee: SAGA LTDCategory #: IVTelephone: (336) 993-6699Wastewater System: ☒ Municipal/Community ☐ On-Site System

FDA Establishment Type: _____

Water Supply: ☒ Municipal/Community ☐ On-Site SupplyNo. of Risk Factor/Intervention Violations: 0

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			<u>2</u>	<u>0</u>	<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			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			<u>3</u>	<u>15</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656										
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed			<u>4</u>	<u>2</u>	<u>0</u>	<input 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			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Approved Source .2653, .2655										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food received at proper temperature			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Required records available: shellstock tags, parasite destruction			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Protection from Contamination .2653, .2654										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653										
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			<u>2</u>	<u>1</u>	<u>0</u>	<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			<u>1</u>	<u>05</u>	<u>0</u>	<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			<u>3</u>	<u>15</u>	<u>0</u>	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			<u>2</u>	<u>1</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<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			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods			<u>1</u>	<u>05</u>	<u>0</u>	<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			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
Food Identification .2653										
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			<u>2</u>	<u>1</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			<u>2</u>	<input checked="" type="checkbox"/>	<u>0</u>	<input checked="" type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			<u>1</u>	<u>05</u>	<u>0</u>	<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			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			<u>1</u>	<u>05</u>	<u>0</u>	<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			<u>2</u>	<input checked="" type="checkbox"/>	<u>0</u>	<input type="checkbox"/>
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			<input checked="" type="checkbox"/>	<u>05</u>	<u>0</u>	<input checked="" type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			<u>1</u>	<input checked="" type="checkbox"/>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			<u>1</u>	<u>05</u>	<u>0</u>	<input type="checkbox"/>
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			<u>1</u>	<u>05</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			<u>1</u>	<input checked="" type="checkbox"/>	<u>0</u>	<input type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			<u>1</u>	<input checked="" type="checkbox"/>	<u>0</u>	<input type="checkbox"/>
Total Deductions:							4.5			

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: SMITTY'S GRILLE

Establishment ID: 3034011693

Location Address: 838-E S. MAIN STREET

☒ Inspection ☐ Re-Inspection Date: 08/18/2015

City: KERNERSVILLE State: NC

Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27284

Category #: IV

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

Email 1: csmithsaga@gmail.com

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

Email 2:

Permittee: SAGA LTD

Email 3:

Telephone: (336) 993-6699

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Philip	3/20/17	0	chicken	walk in	41			
Hot water	prep sink	130	tomato	make top	39			
Sanitizer	dish machine (ppm)	100	chicken	reach in	42			
sanitizer	spray bottles (ppm)	100	Shrimp	reach in	39			
crab dip	hot well	150	ambient air	glass cooler	36			
crab sauce	hot well	162						
burger	walk in	40						
catfish	walk in	40						

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.

- 37 3-307.11 Miscellaneous Sources of Contamination - C One pan of breading uncovered in walk in. Keep all ingredients and food covered when not in use to prevent contamination. CDI: Pan covered during inspection. // Coffee maker is stored and used on the soiled items drainboard of the three compartment sink. Move the coffee machine to another location to prevent potential contamination of the coffee machine. Do not stored food, drinks, or clean equipment and utensils on the three compartment sink.
- 45 : 4-501.11 Good Repair and Proper Adjustment-Equipment - C Wire shelves in walk in are starting to chip lightly on edges. Repair shelves. One knife has a piece broken off the blade, replace the knife. Two legs on seafood prep table and one leg on meat prep table are partially detached and need to be welded back into place. One crack present on top of meat prep sink basin and one crack on top of wash basin of the three comp sink. Have cracks welded shut and sanded smooth to be easily cleaned. Door panel of reach in cooler is cracked, replace the door panel. One gasket torn on reach in cooler, replace the gasket. Equipment shall be maintained in good repair.
- 46 4-501.14 Warewashing Equipment, Cleaning Frequency - C Repeat: Dish machine is soiled on its interior. Dish machine shall be cleaned before use and through the day as needed to prevent build up. Clean at least once ever 24 hours. Remove grease/food build up in dish machine.

✓
Spell

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

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

REHS ID: 2450 - Chrobak, Joseph

Verification Required Date: / /

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.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: SMITTY'S GRILLE

Establishment ID: 3034011693

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.



- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C Wire shelves through the kitchen need to be cleaned to remove food and grease residue. Clean hinges and gaskets of the reach in cooler where food debris have settled. Clean around doors of freezer where grease has collected. Clean spray nozzle on prep sink where grease has collected. Clean in make unit behind the lid to remove food debris. Non food contact surfaces shall be maintained clean.
- 52 5-501.113 Covering Receptacles - C One dumpster door open during inspection. Regularly check dumpsters to keep closed. 0 pts.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C Spots of damaged concrete sealant on floor of kitchen. Continue to repair damaged areas of the concrete floor. Wall damage is present around the stall door frame in the womens restroom, repair the damage. One trim piece in kitchen by dish machine is pulling off the wall, repair to be attached and easily cleanable.
6-501.12 Cleaning, Frequency and Restrictions - C Cleaning needed on wall behind dish machine where build up is occurring.
- 54 6-303.11 Intensity-Lighting - C Lighting has been increased in the kitchen. Lighting is low at prep sinks in the bar area at 30 foot candles, increase lighting at food prep surfaces to 50 foot candles, check light fixtures to see that all bulbs are installed. Lighting low in mens restroom at urinal at 8 foot candles. Increase lighting at the urinal to 20 foot candles. //
6-501.14 Cleaning Ventilation Systems, Nuisance and Discharge Prohibition - C Ceiling vents have dust build up, ceiling is dusty around vents. Clean vents regularly to prevent and remove dust build up.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: SMITTY'S GRILLE

Establishment ID: 3034011693

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: SMITTY'S GRILLE

Establishment ID: 3034011693

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: SMITTY'S GRILLE

Establishment ID: 3034011693

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

