Fo	0	d	Ε	S	ablishment Inspection	R	ep	or	t						:	Score: <u>96</u>	
Esta	abl	is	hn	ner	nt Name: MARIO'S PIZZA								E	Est	ablishment ID: 3034011169		
Location Address: 1066 HANES MALL BLVD												X Inspection Re-Inspection					
City: WINSTON SALEM State: NC									Da	ate		9 / 3 Ø / 2 Ø 1 5 Status Code: A	L.				
Zip: 27103 County: 34 Forsyth							Time In: $01:50\%$ mm Time Out: $03:50\%$ mm										
Permittee: ALESSIO INC									To	ota	ΙT	ime: 2 hrs 0 minutes	0 p				
									Ca	ate	go	ry #: _IV					
	Gelephone:     (336) 768-0057									EDA Establishment Type: Full-Service Restaurant							
					System: Municipal/Community					No. of Risk Factor/Intervention Violations: 2							
Wat	er	S	up	ply	<b>/:</b> ⊠Municipal/Community □On-	Site	Su	ppl	у			N	э. (	of I	Repeat Risk Factor/Intervention Vi	iolations:	
Ris	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.									Good Retail Practices Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.						athogens, chemicals,	
1	0	UT	N/A	N/O	Compliance Status	OU	т с	DI R	VR		IN	OUT	N/A	N/O	Compliance Status	OUT CDI R VR	
	berv	<b>_</b>	_		.2652			_			1	Food	_	d W	ater .2653, .2655, .2658		
					PIC Present; Demonstration-Certification by accredited program and perform duties	2				_			X		Pasteurized eggs used where required		
2 D	<u> </u>	_	Не	alth	.2652 Management, employees knowledge:	3 1.5				29	×				Water and ice from approved source	210 🗆 🗆	
	_		_		Management, employees knowledge; responsibilities & reporting					30			X		Variance obtained for specialized processing methods	10.50	
3 2			ion	ic Di	Proper use of reporting, restriction & exclusion ractices .2652, .2653	3 1.5					1	Tem	per	atu	e Control .2653, .2654 Proper cooling methods used; adequate		
4 D	_	77			Proper eating, tasting, drinking, or tobacco use	2 1	ПГ				×				equipment for temperature control		
5 2	_	+			No discharge from eyes, nose or mouth	1 0.5					X		_	_	Plant food properly cooked for hot holding	1 0.5 0 🗆 🗆	
			3 Co	onta	mination by Hands					33	X				Approved thawing methods used	10.50	
6 Σ		ו			Hands clean & properly washed	4 2				34	X				Thermometers provided & accurate	1 0.5 0	
7 🛛					No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5					-	Ider	tific	catio			
8 D					Handwashing sinks supplied & accessible	2 1	0			35				5.5.4	Food properly labeled: original container		
	_	red	So	urce							reve X		n oi	FO	Dd Contamination .2652, .2653, .2654, .2656, Insects & rodents not present; no unauthorized	210	
9 🛛		וב			Food obtained from approved source	21	0								animals Contamination prevented during food		
10 🗆	] [	ו		X	Food received at proper temperature	2 1					×				preparation, storage & display		
11 D		וכ			Food in good condition, safe & unadulterated	21				_	X				Personal cleanliness		
12 [	] [	ו	X		Required records available: shellstock tags, parasite destruction	2 1					×				Wiping cloths: properly used & stored		
Pro	tect	ior	n fro	om C	Contamination .2653, .2654						X				Washing fruits & vegetables		
13 🛛					Food separated & protected	3 1.5	0				rope	er Us	se o	f Ut	ensils .2653, .2654 In-use utensils: properly stored		
14	ו⊇	3			Food-contact surfaces: cleaned & sanitized	3 🗙	OΣ	≤∣□				_			Utensils, equipment & linens: properly stored,		
15 D		ו			Proper disposition of returned, previously served, reconditioned, & unsafe food	21					×				dried & handled Single-use & single-service articles: properly		
Pot	enti	ally	<u> </u>	<u> </u>	dous Food TIme/Temperature .2653			-			X				stored & used		
16 🗆				X	Proper cooking time & temperatures	3 1.5					X				Gloves used properly		
17 🗆	_	]		×	Proper reheating procedures for hot holding	3 1.5							Ind	Equ	ipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces		
18 🛛					Proper cooling time & temperatures	3 1.5				45		X			approved, cleanable, properly designed, constructed, & used	21 <b>X X</b> 🗆	
19 🛛					Proper hot holding temperatures	3 1.5				46	X				Warewashing facilities: installed, maintained, & used; test strips	10.50	
20 🛛		ו			Proper cold holding temperatures	3 1.5				47	X				Non-food contact surfaces clean	1 0.5 0 🗆 🗆	
21 🗆	] [2	3			Proper date marking & disposition	3 1.5	XD			P	hysi	ical I	Faci	ilitie	s .2654, .2655, .2656		
22 🛿		ו			Time as a public health control: procedures & records	2 1				48	X				Hot & cold water available; adequate pressure	210	
Со	ารนเ	nei	r Ac	dviso	ory .2653					49		⊠			Plumbing installed; proper backflow devices	21 <b>X X</b> 🗆	
23 🗆	][		X		Consumer advisory provided for raw or undercooked foods	1 0.5				50	X				Sewage & waste water properly disposed	210 🗆 🗆	
	_			ptib	le Populations .2653 Pasteurized foods used; prohibited foods not					51	×				Toilet facilities: properly constructed, supplied & cleaned	1 0.5 0 🗆 🗆	
24 L	u   L emic	_	X			1.5			цШ	52		×			Garbage & refuse properly disposed; facilities maintained		
25 D	<u> </u>	_ [			.2053, .2057 Food additives: approved & properly used	1 0.5	ПГ				X				Physical facilities installed, maintained & clean		
23 Z 26 Z	_	-			Toxic substances properly identified stored, & used	2 1				54		X		-	Meets ventilation & lighting requirements;		
			_	e wit	h Approved Procedures				ήĽ	54					designated areas used		
27	][		X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	21									Total Deduction	ns:  4	
	North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program															rogram cr	



## Comment Addendum to Food Establishment Inspection Report

Zip: 27103

Establishment Name: MARIO'S PIZZA	
Location Address: 1066 HANES MALL BLVD	
City: WINSTON SALEM	State: NC

Wastewater System: X Municipal/Community On-Site System

X Municipal/Community On-Site System

Establishment ID: 3034011169

🗙 Inspection	Re-Inspection
Comment Addend	dum Attached?

Status Code:	А
Category #:	

Date: 09/30/2015

Email 1: fitforme1@yahoo.com

Email	2:
Email	3:

Telephone: (336) 768-0057

Permittee: ALESSIO INC

County: 34 Forsyth

Water Supply:

	Temperature Observations										
ltem Michael	Location 9-13-19	Temp 0	Item	Location	Temp	Item	Location	Temp			
marinara	walk in	42									
lettuce	walk in	44									
turkey	walk in	42									
meatballs	cooler	44									
marinara	hot hold	155									
hot water	three comp sink	143									

## 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. 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and

- 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and Hardness - P Quat sanitizer dispenser at three compartment sink was dispensing at too low of a concentration so that no color change was observed on test strips, All three buckets of sanitizer water for wet wiping cloths were also at 0 ppm quat sanitizers. The lines running from bottle to dispenser were tied too tightly with a zip tie, after the zip tie was cut off by the PIC the dispenser consistently dispensed between 150 -200 ppm quat sanitizer. CDI: Buckets were refilled with the 150 - 200 ppm sanitizer. Contact supplier if any other issues come up with the quat sanitizer, Always use test strips to check concentration when filling sanitizer buckets and the three compartment sink to detect issues in dispensers. // 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P One strainer for pasta was badly soiled with grease build up. Clean or replace the
- 21 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking PF One half of deli turkey was unlabelled in walk in cooler, PIC states it was sliced the day prior to inspection. Always date mark potentially hazardous foods that are to be held for more than 24 hours. CDI: Date marking was corrected, all other dates were correct. 0 pts
- 35 3-302.12 Food Storage Containers Identified with Common Name of Food C Squeeze bottles of ingredients such as oils, oil and garlic, oil and vinegar, mayo, etc were not labelled. Three jugs of oil and vinegar not labelled. One bottle of ranch dressing in walk in not labelled. All foods that are removed from original labelled containers must have labels stating the common name of the food/ingredient stored within.

Person in Charge (Print & Sign):	Michael	First	Scotto	Last	Mm As			
Regulatory Authority (Print & Sign)	Joseph :	First	Chrobak	Last	h			
REHS ID	: 2450	- Chrobak, Jose	ph		_ Verification Required Date: / /			
REHS Contact Phone Number	: ( <u>33</u>	<u>6)703-316</u>	<u>54</u>					
North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program DHHS is an equal opportunity employer.								
		Page 2 of Food	l Establishm	ent Inspection Report. 3	/2013			

**Comment Addendum to Food Establishment Inspection Report** 

Establishment Name: MARIO'S PIZZA

Establishment ID: \_3034011169

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.	

4-501.11 Good Repair and Proper Adjustment-Equipment - C One wood paddle was cracked and one hand held chopper was melted on the plastic handle. CDI: Both utensils were discarded during the inspection.
Make unit cutting board secured to left side by a long screw. Repair the table to have cutting board attached in an easily cleanable manner. 0 pts

49 5-205.15 System Maintained in Good Repair - P Hose connect to can wash with atmospheric backflow breaker and a spray nozzle. Always remove hose from can wash when not in use. If the hose with spray nozzle is to be attached to the canwash and not removed then a backflow preventer rated for continuous pressure applications must be purchased and installed. Hose removed during inspection.

5-501.111 Area, Enclosures and Receptacles, Good Repair - C: Trash dumpster lid was caved in, Replace the damaged lid.
5-501.113 Covering Receptacles - C: Both dumpsters had doors that were open during inspection. Keep doors of dumpsters closed at all times when not in use.
5-501.114 Using Drain Plugs - C: Drain plug missing from cardboard dumpster, replace the drain plug.

54 6-202.11 Light Bulbs, Protective Shielding - C Light cover was loose in the walk in cooler, Repair the light fixture so light cover is tightly secured. 0 pts





Spell

Establishment Name: MARIO'S PIZZA

Establishment ID: 3034011169

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 Establishment Name: MARIO'S PIZZA

Establishment ID: 3034011169

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.



Establishment Name: MARIO'S PIZZA

Establishment ID: <u>3034011169</u>

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.

