

Food Establishment Inspection Report

Score: 85

Establishment Name: LEGENDS SPORTS BAR AND GRILL

Establishment ID: 3034014085

Location Address: 2008 S HAWTHORNE ROAD

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 06 / 18 / 2016 **Status Code:** A

Zip: 27103

County: 34 Forsyth

Time In: 08 : 30 ^{am}_{pm} **Time Out:** 11 : 30 ^{am}_{pm}

Total Time: 3 hrs 0 minutes

Permittee: TRIAD HOSPITALITY CORP

Category #: II

Telephone: (336) 765-6670

FDA Establishment Type: Full-Service Restaurant

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

No. of Risk Factor/Intervention Violations: 7

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

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties			<input checked="" type="checkbox"/>	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	15	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			3	15	0	<input type="checkbox"/>
Good Hygienic Practices .2652, .2653										
4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use			2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			1	05	0	<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			4	2	0	<input type="checkbox"/>
7	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed			3	15	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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			3	15	<input checked="" type="checkbox"/>	<input checked="" 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 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures			3	15	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			3	15	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures			3	15	0	<input type="checkbox"/>
19	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper hot holding temperatures			3	15	0	<input type="checkbox"/>
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			3	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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	05	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	15	0	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used			1	05	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	05	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	05	0	<input type="checkbox"/>
Food Temperature Control .2653, .2654										
31	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control			<input checked="" type="checkbox"/>	05	0	<input checked="" type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding			1	05	0	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used			1	05	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	05	0	<input type="checkbox"/>
Food Identification .2653										
35	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			2	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657										
36	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals			2	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			2	1	0	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			1	05	0	<input type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			1	05	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	05	0	<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			1	05	0	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			1	05	0	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			1	05	0	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			1	05	0	<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			2	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			<input checked="" type="checkbox"/>	05	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	<input checked="" type="checkbox"/>	0	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			1	05	0	<input type="checkbox"/>
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			<input checked="" type="checkbox"/>	05	0	<input checked="" type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
Total Deductions:										15



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
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Comment Addendum to Food Establishment Inspection Report

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Establishment ID: 3034014085

Location Address: 2008 S HAWTHORNE ROAD

☒ Inspection ☐ Re-Inspection Date: 06/18/2016

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27103

Category #: II

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

Email 1: qihanesmall@gmail.com

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

Email 2:

Permittee: TRIAD HOSPITALITY CORP

Email 3:

Telephone: (336) 765-6670

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Shredded	Prep cooler	45						
Bagged	Prep cooler	42						
Ham	Lower prep cooler	45						
Bagged	Walk in cooler	52						
Sausage	Walk in cooler	52						
Yogurt	Walk in cooler	54						
Hot water	Three compartment sink	138						
Chlorine	Bucket in ppm	100						

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.

- 1 2-102.12 Certified Food Protection Manager - C - No manager on duty that was ANSI food safety certified - under Food Code, manager must be present during inspection and be ANSI food safety certified



- 4 0 pts - 2-401.11 Eating, Drinking, or Using Tobacco - C - Employee drink stored in prep cooler beside food for customers - employee drinks must be stored away from any food contact/prep areas - CDI - employee threw drink away

- 8 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF - Rear handsink in kitchen did not have paper towels or soap and bar handsink had no paper towels - handsinks must be stocked and available for use during hours of operation - will require verification visit/contact in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete
6-301.14 Handwashing Signage - C - Front handsink in kitchen did not have employee handwash sign posted - employee handwash signs must be posted at all handsinks utilized by employees - CDI - employee handwash signs issued

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

Regulatory Authority (Print & Sign): Kenneth *First* Michaud *Last*

Teddy & Shelly
Kenneth Michaud *REHS*

REHS ID: 2259 - Michaud, Kenneth

Verification Required Date: 06 / 28 / 2016

REHS Contact Phone Number: (336) 703 - 3131



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- 13 0 pts - 3-302.11 Packaged and Unpackaged Food-Separation, Packaging, and Segregation - P - Repeat - One raw egg stored above pan of sausage gravy and pan of bread in cooler - raw eggs must be stored on bottom shelf with raw poultry and raw eggs - CDI - egg moved to bottom shelf
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P - Many plates and bowls contained food or sticker residue while stored in clean stack to be used at a later time - most glasses hanging on rack in bar contained finger and mouth prints around rim - Inner shield of ice machine contained significant algae and slime build-up - inside microwave contained significant food splatter - thoroughly wash and sanitize food contact utensils after use so they are clean to sight and touch, also handle bar glasses only by base as to avoid having finger prints around mouthpiece, clean inner shield weekly to help prevent algae/slime build-up and clean inside microwave daily - will require verification visit/contact in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete
4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and
- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P - Pan of sausage gravy in walk in cooler read 53 deg F when placed in after breakfast on same day, bagged lettuce read 52 deg F and yogurt containers read 53 deg F - all cold holding items must be held no more than 45 deg F - observed walk in cooler door slightly ajar - ensure walk in cooler door is fully shut to allow for maximum effect of cooling food - observe temperature in morning and call repair company if temperature does not drop - CDI - sausage gravy, lettuce, eggs, and yogurt discarded and denatured with bleach
- 21 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF - Repeat - Container of shredded lettuce, open bag of lettuce and open pack of deli ham not date marked in prep cooler - all potentially hazardous, ready to eat foods, held over 24 hours, must be date marked and held for no more than 4 days, if held at 41 - 45 deg F or no more than 7 days, if held at 41 deg F or less - CDI - employee date marked items in prep cooler since they were placed in cooler less than 4 days ago
- 31 3-501.15 Cooling Methods - PF - Repeat - Pan of sausage gravy cooling from this morning was tightly covered with seran wrap in walk in cooler - although food was stored in shallow pan, vent pan to allow for adequate air flow to adequately chill food - also, ensure walk in cooler door is fully shut to allow for maximum cooling effect - CDI - since food was placed in walk in cooler well over 4 hours ago, it was discarded and denatured with bleach
- 35 0 pts - 3-302.12 Food Storage Containers Identified with Common Name of Food - C - Unlabeled cup of oregano leaves and squirt bottle of oil - ensure food containers are labeled with working name
- 36 6-501.111 Controlling Pests - PF - Fruit flies present around drain of coffee prep handsink and in rear of kitchen - one dead roach observed on floor in bar area - call pest control company and have facility treated - will require verification visit/contact in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete



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- 39 0 pts - 3-304.14 Wiping Cloths, Use Limitation - C - Sanitizer solution used to store wet wiping cloths read well above 400 ppm of chlorine solution - sanitizer must be maintained between 50 - 200 ppm when using chlorine solution - CDI - sanitizer diluted to 100 ppm of chlorine solution
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Replace/repair rusty racks in lower prep cooler; Recondition legs on most tables in kitchen; Crack formed at front left corner of meat prep sink - have rewelded and smoothed down; Recondition backside of oven; Recondition inside beer coolers in bar as they are severely rusted - non food contact equipment must be maintained easily cleanable and in good repair
4-205.10 Food Equipment, Certification and Classification - C - Can opener is non NSF - must have NSF can opener
- 46 4-302.14 Sanitizing Solutions, Testing Devices - PF - No test strips available to check chlorine solution for wiping cloths - must have correct test strips to check strength of sanitizer - will require verification visit/contact in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C - Repeat - Detailed cleaning still needed on and around equipment such as: inside condiment bins in coffee prep area, shelving in coffee area, coffee grounds in stainless steel pans in coffee prep area, plate shelving in kitchen, under lips of tables and pass through, old tea/soda fountain table, inside hood and on hood screens, top of oven, fan guard on compressor in walk in cooler, and on table tops in bar - clean non food contact equipment as often as necessary to prevent accumulation of debris and grime
- 49 5-205.15 System Maintained in Good Repair - P - Slight leak present at left faucet of three compartment sink - have repaired so no leaks are present - will require verification visit/contact in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete
5-203.14 Backflow Prevention Device, When Required - P - No backflow prevention device observed on coffee maker water supply - unless documentation from manufacturer stating an internal air gap or backflow prevention device is present, a backflow prevention device rated ASSE 1022 must be added on water supply line to prevent back siphonage of water - will require verification visit/contact in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete
- 52 5-501.16 Storage Areas, Rooms and Receptacles, Capacity and Availability - C - No trash can present at rear handsink and front handsink trash can located more than 15 ft away - place trash cans at all handsinks
- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C - Repeat - Repair broken baseboards and wall tiles throughout; Repair peeling baseboards in bar area; Seal holes in ceiling tile where water supply lines enter ceiling - especially in coffee prep area; Seal metal threshold at double doors; Recaulk old tea/soda prep table to wall; Recaulk and bevel caulk at three compartment sink so water adequately sheds from backsplash; Paint door frame in coffee prep room to kitchen; Seal light electrical plates in coffee prep room
6-201.13 Floor and Wall Junctions, Coved, and Enclosed or Sealed - C - Wall and floor juncture in coffee prep room forms 90 deg angle - add MD1 grout or schleuter to form a coved base to aid in cleaning



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- 54 6-303.11 Intensity-Lighting - C - Lighting low in bar area - recorded between 30 - 45 ft candles - lighting must be able to reach at least 50 ft candles in food prep areas; Replace burned out light bulbs in hood in kitchen



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