H (\mathbf{C})d	E	.SI	ablishment inspection	Re	po	rt							Sco	re:	6	1 <u>4.</u>	5	_
ĒS	tak	olis	hn	ner	nt Name: SPRINGHOUSE RESTAURANT	Г						Е	st	tablishment ID: 3034012158						_
					ess: 450 SPRING STREET															
Cit	City: WINSTON SALEM State: NC							Date: Ø 3 / 2 3 / 2 Ø 1 7 Status Code: A												
Zip: 27101 County: 34 Forsyth							Time In: $0 \ 2 : 0 \ 0 \overset{\bigcirc}{\otimes} pm$ Time Out: $0 \ 5 : 1 \ 0 \overset{\bigcirc}{\otimes} pm$													
										To	otal	ΙT	ime: 3 hrs 10 minutes	-		-				
Permittee: RHUBARB AND HONEY LLC Felephone: (336) 293-4797									Ca	ate	gc	ory #: _IV								
	_													stablishment Type: Full-Service Restau	ırant					
					System: ⊠Municipal/Community [-	ster	n				Risk Factor/Intervention Violation						_
N	ate	r S	Sup	ply	/: ⊠Municipal/Community □On-	Site S	Supp	ly						Repeat Risk Factor/Intervention		ion	ıs:			
_		dha	orn	۱II م	ness Risk Factors and Public Health Int	onvont	ione							Good Retail Practices		_				_
					buting factors that increase the chance of developing foodb					Good	l Re	tail F	rac	ctices: Preventative measures to control the addition o	f pathoge	ens,	chei	mica	ls,	
P			_		ventions: Control measures to prevent foodborne illness or									and physical objects into foods.						_
	_	out	N/A	N/O	Compliance Status	OUT	CDI	R VR	<u> </u>	afe F	_					OUT		CDI	R	VR
1		X			PIC Present: Demonstration-Certification by	X 0	ا ا ا		28	T T			u vi	Pasteurized eggs used where required		0.5	О	П	П	П
E			e He	alth	accredited program and perform duties .2652		10,		╟					Water and ice from approved source		2 1		_		H
$\overline{}$					Management, employees knowledge; responsibilities & reporting	3 1.5 0			┢		=	×		Variance obtained for specialized processing		0.5	H	=		H
3	×				Proper use of reporting, restriction & exclusion	3 1.5 0			30				atu	methods re Control .2653, .2654				Ц	Ш	브
G	000	Ну	gien	ic Pr	ractices .2652, .2653							ipera	atu	Proper cooling methods used; adequate		0.5	О	П		П
4	×				Proper eating, tasting, drinking, or tobacco use	2 1 0			32			П		equipment for temperature control Plant food properly cooked for hot holding						H
5	X				No discharge from eyes, nose or mouth	1 0.5 0	<u> </u>			\vdash						+	\vdash	-	-	Ë
$\overline{}$		ntin	ıg C	onta	mination by Hands .2652, .2653, .2655, .2656				I 	\vdash		Ш	Ш	Approved thawing methods used			\vdash			L
6	X				Hands clean & properly washed	4 2 0			ı			1.0.		Thermometers provided & accurate		0.5	0	ᆜ	Ш	L
7				X	No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5 0		$\Box \Box$	35	ood I	ider 🔀	itific	catio	on .2653 Food properly labeled: original container	F			X		F
8	X				Handwashing sinks supplied & accessible	2 1 0				<u>—</u>		n of	Fo	ood Contamination .2652, .2653, .2654, .2656						Ľ
Α	ppr	ove	d So	urce	.2653, .2655					\Box		11 01		Insects & rodents not present; no unauthorize		1	О		П	П
9	X				Food obtained from approved source	2 1 0								animals Contamination prevented during food			\Box		_	Ē
10				×	Food received at proper temperature	2 1 0			-	\vdash				preparation, storage & display Personal cleanliness	_	-	\vdash		-	Ë
11	X				Food in good condition, safe & unadulterated	2 1 0	ı □ [l —	\vdash						_	\vdash	_	-	Ë
12	X				Required records available: shellstock tags, parasite destruction	210			l —	\vdash				Wiping cloths: properly used & stored	_	+	\vdash			L
			_		contamination .2653, .2654				ı				F 1 1+	Washing fruits & vegetables		0.5		믜	Ш	브
13	X				Food separated & protected	3 1.5 0				Tope		se oi	וטנ	tensils .2653, .2654 In-use utensils: properly stored	T ₁	0.5	П	П	П	
14	X				Food-contact surfaces: cleaned & sanitized	3 1.5 0			_	_	☒			Utensils, equipment & linens: properly stored,			\vdash		×	E
15	×				Proper disposition of returned, previously served, reconditioned, & unsafe food	2 1 0	<u> </u>		l	\vdash	-			dried & handled	L					Ľ
\neg	oter	ntial	_		dous Food Time/Temperature .2653		1_1_		ł⊢–					Single-use & single-service articles: properly stored & used		0.5	\Box	-		Ľ
16			Ш	X	Proper cooking time & temperatures	3 1.5 0		44	-					Gloves used properly	1	0.5	0			
17				X	Proper reheating procedures for hot holding	3 1.5 0			U	ΤТ	\neg	ind I	Εqι	ipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces		\top				
18				X	Proper cooling time & temperatures	3 1.5 0			45		X			approved, cleanable, properly designed, constructed, & used	2	1	0		X	
19				X	Proper hot holding temperatures	3 1.5 0			46	×				Warewashing facilities: installed, maintained, used; test strips	& _{[1}	0.5	0			
20	×				Proper cold holding temperatures	3 1.5 0			47		X			Non-food contact surfaces clean	1	0.5	X			
21	X				Proper date marking & disposition	3 1.5 0			Р	hysic	cal I	aci	litie	es .2654, .2655, .2656						
22			×		Time as a public health control: procedures & records	2 1 0			48	×				Hot & cold water available; adequate pressure	a [2	2 1	0			
С	ons	ume	er Ac	dviso	ory .2653				49	×				Plumbing installed; proper backflow devices	2	1	0			
23	X				Consumer advisory provided for raw or undercooked foods	1 0.5 0			50	×				Sewage & waste water properly disposed	2	2 1	0			
Н	ighl	y Sı		ptib	le Populations .2653 Pasteurized foods used; prohibited foods not				51	×				Toilet facilities: properly constructed, supplied & cleaned	1 [7	0.5	0			
24			×		offered	3 1.5 0								Garbage & refuse properly disposed; facilities	3 1	0.5	0	П	\Box	П
\neg	hen X	nical			.2653, .2657 Food additives: approved & properly used	1050			╟	\vdash				maintained Physical facilities installed, maintained & clea		0.5		-		Ē
\dashv					,				╟	\vdash	⋈			Meets ventilation & lighting requirements;				귀		E
0۷	X	\square			Toxic substances properly identified stored, & used	2 1 0	ᅬᆜᄔ	니니	54	l III			l	designated areas used	Ľ	0.5		\Box	\Box	╙



27 🗆 🗆 🗵

Conformance with Approved Procedures .2653, .2654, .2658

Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan



Total Deductions: 5.5

Establishment	t Name: SPRINGHOL	JOL KLOTA	AURANT		Establishmer	nt ID: 3034012158		
	dress: 450 SPRING S				Inspection	Re-Inspection	Date: 03/23/201	7
City: WINSTO			St	tate: NC	Comment Adden	•	Status Code:	
County: 34 F			Zip: 27101				Category #: _	
	rstem: ☒ Municipal/Comm		n-Site System		Fmail 1: tim@s	springhousenc.com	0 , _	
Water Supply:			On-Site System		Email 2:			
_		I LLO						
Telephone:_	(330) 293-4797				Email 3:			
14 1	Lastina	T			bservations	Itaa-	1 4'	T
	Location basement three comp	Temp 144	Item Chicken	Location walk in	1e 42	emp Item I	Location	Temp
hot water t	three comp sink	138	sausage	make unit	42			
hot water [Dish machine	174	collards	make unit	41			
Oysters N	NC-110-SS	0	anchovies	make unit	43			
Oysters E	BC-1972-SP	0	Samp	walk in	43			
Quat sanitizer t	three comp sink	200	pork belly	make unit	44			
meat loaf r	reach in	44						
rice r	make unit	44						
certifications	ertified Food Protections. At least one emploouring all hours of ope	yee with	food protecti	on manager o	certification and v			
certifications be on site do 3-302.12 Fo breading we original pack	s. At least one emplo	yee with eration. Ha ers Identif g inspecti led with th	food protecti ave employe ied with Com on. All ingred neir common	on manager of the sattain cert of the sattain	certification and vification. of Food - C Repe	who oversees food sa eat: three rolling bins readily identifiable an	afety and product of sugar, flour, ar d are removed fr	ion shall Id panko
3-302.12 Fobreading we original packlast inspection 4-903.11 (A) coolers and	s. At least one emplo uring all hours of ope ood Storage Containe ere not labelled during kaging must be labell	yee with a ration. Ha ration. Ha rers Identified inspectived with the lied correct ment, Uter er stairwe	food protecti ave employed ied with Comon. All ingred neir common ctly.	on manager of the set attain cert of the set attains and set attains attained to the set attains attained to the set attained to the set attains attained to the set	certification and vification. of Food - C Repeods that are not replication.	who oversees food sate three rolling bins readily identifiable an bins during inspection	of sugar, flour, and are removed from other items no	ion shall ad panko om ted on
3-302.12 Fo breading we original pack last inspection 4-903.11 (A) coolers and	s. At least one emplo uring all hours of ope ood Storage Containe ere not labelled during kaging must be labell ion are currently labe a), (B) and (D) Equipm supplies stored under shed storage rooms a	yee with a ration. Ha ration. Ha rers Identified inspectived with the lied correct ment, Uter er stairwe	food protecti ave employed ied with Comon. All ingred neir common ctly.	on manager of the sattain cert of the sattain	certification and vification. of Food - C Repeods that are not replication.	who oversees food sate three rolling bins readily identifiable an bins during inspection	of sugar, flour, and are removed from other items no	ion shall ad panko om ted on
certifications be on site do a 3-302.12 Fo breading we original packlast inspection 4-903.11 (A) coolers and items in finis	s. At least one emplo uring all hours of ope ood Storage Containe ere not labelled during kaging must be labell ion are currently labe a), (B) and (D) Equipm supplies stored under shed storage rooms a	yee with the ration. Have ration. Have restained with the restainment of the restainment	food protecti ave employed ied with Com- on. All ingre- neir common ctly.	nmon Name of dients and Single-S I equipment a	certification and vification. of Food - C Repercies that are not replicated the labelled the service and Single and utensils must	who oversees food sate three rolling bins readily identifiable an bins during inspection	of sugar, flour, and are removed from other items no	ion shall ad panko om ted on
certifications be on site do a 3-302.12 Fo breading we original packlast inspection 4-903.11 (A) coolers and items in finis	s. At least one emplouring all hours of operating all hours of operating and Storage Contained are not labelled during kaging must be labelled ion are currently labelled are currently	yee with the ration. Have ration. Have restained with the restainment, Uter restainment at all time Fireseph	food protecti ave employed ied with Com- on. All ingre- neir common ctly.	nmon Name of dients and Single-S I equipment a	certification and vification. of Food - C Reperchast that are not reported that are not reported the service and Single and utensils must ast	who oversees food sate three rolling bins readily identifiable an bins during inspection	of sugar, flour, ard are removed from, other items no	ion shall ad panko om ted on

4hhs



Establishment Name: SPRINGHOUSE RESTAURANT Establishment ID: 3034012158

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.



- 4-205.10 Food Equipment, Certification and Classification C Repeat: Rice cooker, Spice grinder, Coffee Grinder for spices, and Edgestar Ice Cream Freezer are labelled "For Household Use Only" and are not of ANSI approved construction. Grills in outside courtyard are not of ANSI construction and must be removed. Remove the noted items from establishment. // 4-501.11 Good Repair and Proper Adjustment-Equipment C Repeat: Green wire shelves in establishment have rust and chipping and need to be replaced. Evaluate and replace rusted shelving. / Crack in left door guide on dish machine. Have crack repaired. / Rust Present on undersides of metal wall mounted shelves above three compartment sinks upstairs and in basement./ Equipment shall be kept in good repair. Multiple items from previous inspection have been corrected. Continue replacing and repairing noted items.
- 4-602.13 Nonfood Contact Surfaces C Detail cleaning on downstairs dry storage shelf to remove spilled flour. Cleaning needed in basement freezer floor to remove crumbs. Bin holding utensils under mixer in basement need to be cleaned as spilled flour and water has fallen into the bin. Non food contact surfaces shall be kept clean. 0 pts
- 6-501.14 Cleaning Ventilation Systems, Nuisance and Discharge Prohibition C Dust build up on vents in bathroom. Remove dust from vents. 0 pts





Establishment Name: SPRINGHOUSE RESTAURANT Establishment ID: 3034012158

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: SPRINGHOUSE RESTAURANT Establishment ID: 3034012158

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: SPRINGHOUSE RESTAURANT Establishment ID: 3034012158

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.



