F	00)d	E	S	tablishment Inspection	R	? E	<u>p</u>	or	<u></u>							Score:	5	<u>)3.</u>	<u>5</u>	_
Es	tal	olis	hn	nei	nt Name: MALONE'S FAMILY RESTAURA	ANT	Г							E	Est	tablishment ID: 3034011758	•				
					ress: 4320 OLD WALKERTOWN RD																
City: WINSTON SALEM State: NC											Date: <u>Ø 6</u> / <u>1 3</u> / <u>2 Ø 1 7</u> Status Code: A										
	-				County: 34 Forsyth			_				Time In: $09 : 00 \times 100$ Time Out: $01 : 00 \times 100$									
												Total Time: 4 hrs 0 minutes									
	Permittee: MALONES FAMILY RESTAURANT INC. Telephone: (336) 893-8068												C	ate	egc	ory #: _IV			_		
												FI	DΑ	E	stablishment Type: Full-Service Restaur	ant					
					System: Municipal/Community					-	ste	m	Ν	0.	of	Risk Factor/Intervention Violations	3: 2				
W	ate	r S	up	pl	y: ⊠Municipal/Community □On-	Site	e (Sup	pl	y			Ν	0.	of	Repeat Risk Factor/Intervention V	iolation	ıs:	_2	_	
	-00	dbo	orne	e III	Iness Risk Factors and Public Health Int	erv	en	tion	ıs							Good Retail Practices					
	Risk factors: Contributing factors that increase the chance of developing foodborne illness.										Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.										
_					rventions: Control measures to prevent foodborne illness or	·	_	100			-	T	ou.		1		0.17		lan.I	_	
(upe	OUT rvisi		N/O	Compliance Status .2652		UT	CL	и к	VR	9		OUT			Compliance Status Vater .2653, .2655, .2658	OU	,	CDI	R	VR
1	X				PIC Present; Demonstration-Certification by accredited program and perform duties	2	Ī	0 [1		1 —				$\overline{}$	Pasteurized eggs used where required	1 0.5	0			
E	mpl	oye	е Не	alth							╌					Water and ice from approved source	2 1				_
2	X				Management, employees knowledge; responsibilities & reporting	3 [1.5	0 [┢			X		Variance obtained for specialized processing	1 0.5	\equiv			_
3	X				Proper use of reporting, restriction & exclusion	3 1	1.5	0 [methods are Control .2653, .2654					
(000	Ну	gien	ic P	ractices .2652, .2653						1 -	×		lpo.		Proper cooling methods used; adequate equipment for temperature control	1 0.5	0			
4	X				Proper eating, tasting, drinking, or tobacco use	2	1	0			⊩			П	\vdash	Plant food properly cooked for hot holding	1 0.5				
5	X				No discharge from eyes, nose or mouth	1	0.5	0			33	+		\vdash	╁	Approved thawing methods used	1 0.5	\Box	Η.		
			g Co	onta	mination by Hands .2652, .2653, .2655, .2656		Ţ	Ţ			l⊢	1		Ľ			1 6				
6	X				Hands clean & properly washed	4	2	0			╙	ood	Idor	atifi.	Cati	Thermometers provided & accurate on .2653	[] [U.5			긔	
7	X				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1	1.5	0					luei	Ittiiii	Cath	Food properly labeled: original container	2 1			a	
8		X			Handwashing sinks supplied & accessible	X	1				١⊢		ntio	n o	f Fo	ood Contamination .2652, .2653, .2654, .2656,	.2657				
	ppr	ovec	l So	urce	e .2653, .2655		Ţ	_	Ţ		36	×				Insects & rodents not present; no unauthorized animals	2 1	0		可	
9	X				Food obtained from approved source	2	1	0		40	37		×			Contamination prevented during food	2 1	X	×	\exists	_
⊢				×	Food received at proper temperature	2	1	0			l —					preparation, storage & display Personal cleanliness	1 0.5	+			_
11	X				Food in good condition, safe & unadulterated	2	1	0 [l					Wiping cloths: properly used & stored	1 0.5	H			
12			X		Required records available: shellstock tags, parasite destruction	2	1	0 [—			\vdash	1		1 0.5	+			Ξ
			_	om (Contamination .2653, .2654		_	_	_		١⊢		r H		f I It	Washing fruits & vegetables tensils .2653, .2654					
13	X				Food separated & protected	3 1	1.5	0	+			X		Se u	וט ווי	In-use utensils: properly stored	1 0.5	0		a	
14		X			Food-contact surfaces: cleaned & sanitized	3	+	_] 🔀		\vdash					Utensils, equipment & linens: properly stored,		0		×	_
_	X				Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0			┢	-				dried & handled Single-use & single-service articles: properly		Н			
		ntial	_	azar	dous Food Time/Temperature .2653				1	1	╌					stored & used	1 0.5			긤	
\vdash	\boxtimes				Proper cooking time & temperatures	H	1.5	=			⇃ᆜ	×	<u> </u>		F	Gloves used properly	1 0.5	0	Ш	믜	
17	X	Ш	Ш	Ш	Proper reheating procedures for hot holding	3 1	1.5	0 _	<u> </u>	\parallel	ļГ			ana	Equ	Lipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces					_
18				X	Proper cooling time & temperatures	3 1	1.5			10	45		×			approved, cleanable, properly designed, constructed, & used		0		X	Ш
19	X				Proper hot holding temperatures	3 1	1.5				46	X				Warewashing facilities: installed, maintained, 8 used; test strips	1 0.5	0			
20	X				Proper cold holding temperatures	3 1	1.5				47		X			Non-food contact surfaces clean	1 0.5	X			
21	X				Proper date marking & disposition	3 1	1.5					hysi	cal	Fac	ilitie	es .2654, .2655, .2656					
22			X		Time as a public health control: procedures & records	2	1	0			48	X				Hot & cold water available; adequate pressure	2 1	0			
(cons	ume	r Ac	lvis	ory .2653			Ţ			49		×			Plumbing installed; proper backflow devices	2 1	X			
23			X		Consumer advisory provided for raw or undercooked foods	1	0.5	0 [50	\boxtimes				Sewage & waste water properly disposed	2 1	0			
	Ľ	_		ptib	ple Populations .2653 Pasteurized foods used; prohibited foods not				1		51	×				Toilet facilities: properly constructed, supplied & cleaned	1 0.5	0			
	`hon		X		offered .2653, .2657	3 1	1.5		1	1	52		×			Garbage & refuse properly disposed; facilities maintained	1 0.5	×		X	
25	hen		×		Food additives: approved & properly used	1 6	0.5		T		┞		×			Physical facilities installed, maintained & clean	1 0.5				
					Toxic substances properly identified stored, & used	2			1 -		54	+	×			Meets ventilation & lighting requirements;	1 0.5				Ξ
20	X	ш	ш	L	Toxio substances properly identified stored, & used	الكال	اك		11	12] 34	74			1	designated areas used	ناليا ا		الكا	니	_



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

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



Total Deductions:

	Comment	Audend	aum to F	oou Es	labiisi	nmeni	ınspecu	ion keport			
Establishme	nt Name: MALONE	'S FAMILY RE	STAURANT		Establishment ID: 3034011758						
City: WINST County: 34 Wastewater S Water Supply Permittee:	Forsyth System: 🛛 Municipal/Co	ommunity [] (Stat _ Zip: 27105 On-Site System On-Site System	e: NC	☐ Inspection ☐ Re-Inspection ☐ Date: 06/13/2017 Comment Addendum Attached? ☐ Status Code: A Category #: IV Email 1: beoakes55@aol.com Email 2: Email 3:						
			Tempe	rature Ol	oservatio	ns					
Item ribs	Location walk in cooler	Temp 40	Item air temp	Location to go area	cooler	Temp 37	Item potato salad	Location serve line	Temp 42		
chix	walk in cooler	41	hot water	restroom h	and sink	37	rice	serve line	182		
cheese	walk in cooler	41	hot water	3 compartn	nent sink	157	gravy	serve line	172		
chlorine spray	front serve line	100	sweet potato	cook temp		186					
chlorine	chlorine dish machine 100 collard greei			cook temp		204					

Observations and Corrective Actions

serve line

serve line

serve line

45

172

199

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.

5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF Repeat violation. Employee observed rinsing thermometer in a hand sink. Hand sinks are solely for the purpose of washing hands. They shall not be used as warewashing, dump sinks or storage. CDI. Spoke with PIC about importance of keeping hand sinks clean and clear for handwashing.

- 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils P Repeat violation(different circumstances) Bottle labeled sanitizer at serve line tested 0 ppm quat and 0 ppm chlorine. Sanitizer must be of appropriate strength to sanitize food contact surfaces, CDI. Bottle replaced with 100 ppm chlorine sanitizer solution. Quat dispender at 3 compartment sink empty at time of inspection. Ecolab expected to arrive later in day to refill. Facility is using chlorine solution aS sanitizer until delivery.
 - Remove sticker residue from clean pans. Food contact surfaces shall be clean to sight and touch. CDI. Pans cleaned during inspection.
- 37 3-307.11 Miscellaneous Sources of Contamination - C 0 points. Head of lettuce in walk in cooler stored directly in contact with plastic grocery bag. Use approved food storage bags or containers for storing food. CDI. Lettuce moved to food storage container.

First Last N'Gai Ovinola Person in Charge (Print & Sign): **First** Last Regulatory Authority (Print & Sign): Amanda Taylor

REHS ID: 2543 - Taylor, Amanda Verification Required Date:

REHS Contact Phone Number: (336) 703 - 3136

upright cooler

cook temp

Nevelle Dobson 5/8/22

cheese

servsafe

meatloaf

40

0

181

salad

greens

green beans





Establishment Name: MALONE'S FAMILY RESTAURANT Establishment ID: 3034011758

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.



- 42 4-901.11 Equipment and Utensils, Air-Drying Required C Repeat violation. Several pans on clean dish rack stacked wet. Allow pans to thoroughly air dry before stacking.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment C Repeat violation. Identify cause of ice buildup on walk in freezer unit and repair.

Replace torn gasket on reach in cooler. Fill/cap circular hole in side of walk in freezer door. Repair fallen shelf on bottom of prep table by ovens. Repair freezer that is currently out of order. Reseal splash guard between prep sink and 3 compartment sink.

- 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils C 0 points. Clean debris from pipes running along back of grill. Non food contact surfaces of equipment shall be clean. Clean/resurface legs of prep table in to go area where they are oxidized.
- 5-205.15 System Maintained in Good Repair 0 points. Repair minor leaks at faucets of hand sinks next to prep sink and near salad prep area. Plumbing system shall be in good repair.
- 5-501.15 Outside Receptacles C 0 points.Repeat violation. Dumpster lid missing. Dumpsters shall be maintained closed and in good repair. 0 points taken as PIC provided documentation that dumpster company will be replacing dumpster on 6/16. 5-501.13 Receptacles C Provide more trash cans within a reasonable distance of all hand sinks. This is needed throughout kitchen.
- 6-501.12 Cleaning, Frequency and Restrictions C 0 points. Dust ceiling vents above corner sink in dish area. Light sweeping needed in dry storage room. Floor cleaning needed under fryers.
 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods C Regrout toilets to floors so that the junction is smooth and easily cleanable. Regrout restroom sinks to walls. Re seal 3 compartment sink to wall so that the sealant is smooth and easily cleanable.
- 6-303.11 Intensity-Lighting C 0 points. Lighting low in corner of kitchen(30 footcandles) where non working freezer is located. If this area is to be used for food prep, increase lighting to 50 footcandles. If not used for food prep, designate area as storage only. Storage areas require only 10 footcandles of light.





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Establishment Name: MALONE'S FAMILY RESTAURANT Establishment ID: 3034011758

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