

# Food Establishment Inspection Report

Score: 98

Establishment Name: ZAXBY'S 50801

Establishment ID: 3034012353

Location Address: 430 SUMMIT SQUARE BLVD

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 08 / 16 / 2017 Status Code: A

Zip: 27105

County: 34 Forsyth

Time In: 10 : 45 ☒ am ☐ pm Time Out: 01 : 30 ☒ am ☐ pm

Permittee: JJM OPERATIONS SUMMIT SQUARE, LLC

Total Time: 2 hrs 45 minutes

Telephone: (336) 377-1028

Category #: II

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

FDA Establishment Type: Fast Food Restaurant

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

No. of Risk Factor/Intervention Violations: 2

No. of Repeat Risk Factor/Intervention Violations: 0

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
<b>Supervision</b> .2652										
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties			2	0		
<b>Employee Health</b> .2652										
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting			3	13	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			3	13	0	
<b>Good Hygienic Practices</b> .2652, .2653										
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use			2	1	0	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			1	03	0	
<b>Preventing Contamination by Hands</b> .2652, .2653, .2655, .2656										
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed			4	2	0	
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			3	13	0	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			2	1	0	
<b>Approved Source</b> .2653, .2655										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source			2	1	0	
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature			2	1	0	
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated			2	1	0	
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			2	1	0	
<b>Protection from Contamination</b> .2653, .2654										
13	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			3	13	<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 checked="" 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	
<b>Potentially Hazardous Food Time/Temperature</b> .2653										
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures			3	13	0	
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			3	13	0	
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures			3	13	0	
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			3	13	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	13	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			3	13	0	
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			2	1	0	
<b>Consumer Advisory</b> .2653										
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods			1	03	0	
<b>Highly Susceptible Populations</b> .2653										
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered			3	13	0	
<b>Chemical</b> .2653, .2657										
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used			1	03	0	
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			2	1	0	
<b>Conformance with Approved Procedures</b> .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	

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
<b>Safe Food and Water</b> .2653, .2655, .2658										
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required			1	03	0	
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			2	1	0	
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods			1	03	0	
<b>Food Temperature Control</b> .2653, .2654										
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control			1	03	0	
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding			1	03	0	
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used			1	03	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	03	0	
<b>Food Identification</b> .2653										
35	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			2	1	<input checked="" type="checkbox"/>	
<b>Prevention of Food Contamination</b> .2652, .2653, .2654, .2656, .2657										
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals			2	1	0	
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			2	1	0	
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			1	03	0	
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			1	03	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	03	0	
<b>Proper Use of Utensils</b> .2653, .2654										
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			1	03	0	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			1	03	0	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			1	03	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			1	03	0	
<b>Utensils and Equipment</b> .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	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			1	03	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
<b>Physical Facilities</b> .2654, .2655, .2656										
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure			2	1	0	
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			2	1	<input checked="" type="checkbox"/>	
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed			2	1	0	
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			1	03	0	
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	03	<input checked="" type="checkbox"/>	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			1	03	<input checked="" type="checkbox"/>	
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			1	03	0	
Total Deductions: <u>2</u>										



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☒ Inspection ☐ Re-Inspection Date: 08/16/2017

City: WINSTON SALEM State: NC

Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27105

Category #: II

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

Email 1: jpage@jjm-ops.com

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

Email 2:

Permittee: JJM OPERATIONS SUMMIT SQUARE, LLC

Email 3:

Telephone: (336) 377-1028

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
ServSafe	Kendall Young 1-16-21	00	Chicken	Chicken prep	41	Lettuce	Glass reach-in	45
Hot water	4 comp sink	134	Chicken Br	Final - grilled	198	Pasta salad	Walk-in	40
Quat sani	4 comp sink	300	Chicken tend	Final	190	Chicken	Walk-in	39
Diced tom	Prep line	42	Chicken wing	Final	204	Tomato	Walk-in	41
Chicken tend	Hot hold	137	Chicken	Drawer	43	Boneless	Hot box	170
Boiled egg	Prep line	42	Wings	Hot hold box	156	Boneless	Final	200
Lettuce	Prep line	45	Slaw	Sauce cold hold	44			
Chicken br	Hot hold	170	Pasta salad	Glass reach-in	38			

## 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.

- 13 3-304.15 (A) Gloves, Use Limitation - P One food employee observed contacting trash can with gloved hands, and then to wiping cutting boards and prep line without changing gloves. Single-use gloves shall be used for only one task, such as working with ready-to-eat food or with raw animal food, used for no other purpose, and discarded when damaged or soiled, or when interruptions occur in the operation. CDI: Employee educated, removed gloves, washed hands, and donned new gloves. Utensils sent to be cleaned and sanitized. 0 pts
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P Several lexan containers, metal pans, strainer pans - stacked, container sticker residue, dried food, and grease. Remove date marking labels and sticker residue prior to cleaning and sanitizing. Food-contact surfaces of equipment and utensils shall be clean to sight and touch. CDI: All sent to be rewashed during inspection.
- 35 3-302.12 Food Storage Containers Identified with Common Name of Food - C Sauce bottles at prep line without label indicating type of sauce. Working containers holding food or food ingredients that are removed from their original packages for use in the food establishment, shall be identified with the common name of the food or ingredient. 0 pts

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

Regulatory Authority (Print & Sign): *First* Christy *Last* Whitley

*X M Y*  
*Christy Whitley RCHKS1*

REHS ID: 2610 - Whitley Christy

Verification Required Date:      /      /     

REHS Contact Phone Number: ( 336 ) 703 - 3157



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- 39 3-304.14 Wiping Cloths, Use Limitation - C Wet wiping cloth hanging on splash guard at handsink next to chicken prep unit. Wet wiping cloths being stored in soapy water buckets. Cloths in-use for wiping counters and other equipment surfaces shall be held between use in an effective chemical sanitizer solution (150-400ppm for Quat - or as specified by manufacturer labeling). CDI: Towels moved to sanitizer buckets. 0 pts
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C REPEAT: (Different circumstances) - The following equipment requires repair/replacement: torn gasket to reach-in freezer, recaulk hood and stainless trim where caulk is missing/drooping, missing panel caps in walk-in freezer, missing foot on first shelf (right side) of walk-in cooler, ice build up around interior of door to walk-in freezer, and weld gap of front panel of 3 compartment sink. Equipment shall be maintained cleanable and in good repair. 0 pts
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C REPEAT: The following nonfood-contact surfaces require additional cleaning: front of ice shield inside of ice machine with pink residue, remove grease build up along shelving and supports of center prep line, sauce containers above center prep with dried sauce built up, around doors of reach-in freezer and chicken prep, shelving inside glass door reach-in, cabinets and door tracks at front line, and shelving in walk-in freezer and walk-in cooler to remove spilled and dried food. Nonfood-contact surfaces of equipment and utensils shall be kept free of an accumulation of dust, dirt, food residue and other debris.
- 49 5-205.15 System Maintained in Good Repair - C Leak at pipe under 2nd vat of 4 compartment sink. Leak at pipe under prep sink. Repair. A plumbing system shall be maintained in good repair. 0 pts
- 52 5-501.111 Area, Enclosures and Receptacles, Good Repair - C One dumpster has holes and rusted at corners of supports. Contact provider to have dumpster replaced or repaired. Storage areas, enclosures, and receptacles for refuse, recyclables, and returnables shall be maintained in good repair. 0 pts
- 53 6-501.12 Cleaning, Frequency and Restrictions - C Floor cleaning needed along baseboards and under shelving in walk-in cooler and walk-in freezer. Wall and floor cleaning needed under prep sink and behind prep table across from 4 comp sink. Physical facilities shall be cleaned as often as necessary to maintain them clean. // 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C Recaulk handwashing sink next to chicken prep to wall. Add trim or caulk gap at FRP under front cash counter where gapped. Physical facilities shall be maintained in good repair. 0 pts



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Spell



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