

Food Establishment Inspection Report

Score: 93

Establishment Name: HARDEES 1505696

Establishment ID: 3034012401

Location Address: 3351 SIDES BRANCH RD

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 09 / 19 / 2018 Status Code: A

Zip: 27127 County: 34 Forsyth

Time In: 08 : 05 am pm Time Out: 11 : 20 am pm

Permittee: SOUTH STAR NC, LLC

Total Time: 3 hrs 15 minutes

Telephone: (336) 788-8409

Category #: IV

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: 1

No. of Repeat Risk Factor/Intervention Violations: _____

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	0		
Employee Health .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	
Good Hygienic Practices .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	
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	
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	
Approved Source .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	
Protection from Contamination .2653, .2654								
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13	0	
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	X	0	X
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0	
Potentially Hazardous Food Time/Temperature .2653								
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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	
Consumer Advisory .2653								
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	03	0	
Highly Susceptible Populations .2653								
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13	0	
Chemical .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	
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	

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	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	
Food Temperature Control .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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03	0	
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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	
Food Identification .2653								
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	
Prevention of Food Contamination .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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03	0	
Proper Use of Utensils .2653, .2654								
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03	0	
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	X	0	X
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	
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	X	0	X
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	X	0	X
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	X	03	0	X
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	
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	X	0	X
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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03	0	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	X	03	0	X
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	X	0	
Total Deductions:					7			



Comment Addendum to Food Establishment Inspection Report

Establishment Name: HARDEES 1505696
 Location Address: 3351 SIDES BRANCH RD
 City: WINSTON SALEM State: NC
 County: 34 Forsyth Zip: 27127
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: SOUTH STAR NC, LLC
 Telephone: (336) 788-8409

Establishment ID: 3034012401
 Inspection Re-Inspection Date: 09/19/2018
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: IV
 Email 1: stella.epperson@serazen.com
 Email 2:
 Email 3:

Temperature Observations

Effective January 1, 2019 Cold Holding will change to 41 degrees

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
1-14-19	Debbera Ballard	0	egg	hot hold	153	water	sink 140+	140
milk	shake cooler	41	ham	traulsen	38	tomato	walk in	40
smoked saus	under grill cooler	41	rice	traulsen	36	mush mix	walk in	39
n. chz& bns	walk in	38	ham	under make unit	40			
omelette mix	walk in	38	liq eggs	on ice	41			
steak	hot hold	177	liq eggs	on ice-later	44			
chop	hot hold	188	quat ppm	3 comp	200			
saus	hot hold	148	water	3 comp	128			

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.

- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P- Most small wares (scoops, bottles, scrapers, etc) soiled with grease or food residue. A couple of pans had greasy hand prints on them, be sure that employees handling clean dishes are doing so with cleaned hands or fresh gloves. A few pans had sticker residue on sides after washing. Remove all residue when washing. Middle drink nozzle for multiple drinks at drive thru soiled. Food contact surfaces shall be clean to sight and touch. CDI-Sent to be washed. ✓ Spell
- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C- REPEAT- Much improvement, as there were only a few pans and 2 plastic jugs stacked wet. Air dry all equipment and utensils before stacking/screwing on lids. //
 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C- Clean side of warewashing sink is continuously exposed to flour from making biscuits, as the biscuit table is right next to 3 comp sink. Clean dishes were sprinkled with flour during inspection. Cleaned equipment and utensils shall be stored where they are nto exposed to splash, dust, or other contamination. Install a splash guard to the biscuit table to prevent soiling of clean utensils.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C-REPEAT-Torn gaskets in 2 door traulsen unit, and at both doors of cold make unit. Drink machine operates when ice bin is open. Freezer under broiler and freezer at milkshake station not working. Chipped/rusting shelving in traulsen unit. Equipment shall be maintained in good repair.

Lock Text



Person in Charge (Print & Sign): Debbera *First* Ballard *Last*

Regulatory Authority (Print & Sign): Nora *First* Sykes *Last*

[Handwritten Signature]

[Handwritten Signature]

REHS ID: 2664 - Sykes, Nora

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3161



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
 DHHS is an equal opportunity employer.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: HARDEES 1505696

Establishment ID: 3034012401

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.



- 46 4-501.14 Warewashing Equipment, Cleaning Frequency - C-REPEAT-3 compartment sink sanitizer vat and rinse vat soiled. Vats and drain boards of warewashing sinks shall be cleaned at least every 24 hours, when soiled, and before use. Clean these sinks and drain boards more frequently.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C-REPEAT-Most nonfood contact surfaces of equipment need additional cleaning, including but not limited to: tops and sides of equipment, bottoms of tables, nozzles, handles, crevices, gaskets, freezer floor, napkin holders at self service drink station, shelving for clean dishes and storage above prep table, side of biscuit table, both microwaves, shelving around microwaves, wrapper holders at make table, inside traulsen cooler, walk in shelving, walk in door at handle (inside). Nonfood contact surfaces shall be maintained clean.
- 49 5-205.15 (B) System maintained in good repair - C-REPEAT-Repair 3 compartment sink plumbing so that water will turn off completely without use of secondary valve. Cold water will not turn off. Plumbing shall be maintained in good repair.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C-REPEAT-Floor cleaning needed under equipment, corners of floors, around equipment, in dry storage under shelving, under and around matt at freezer, under and around shelving in walk in; wall cleaning needed in around biscuit prep area, at mop sink, at 3 compartment sink, and at fry area. Physical facilities shall be maintained clean. // 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C- Reattach base tile to right of back door and base plate in walk in cooler at door. Caulk at toilets to floor in both restrooms. Physical facilities shall be in good repair.
- 54 6-303.11 Intensity-Lighting - C- Lights low (measured in foot candles-fc) in the following areas: 11 fc at ovens, 28 fc at broilers, 23-28 fc at fryers and make unit at fryers, and 7 fc at ice machine. Increase lights to 50 fc in all noted areas except the ice machine, which shall be at least 10 fc. Replace burned out bulbs. //6-501.14 Cleaning Ventilation Systems, Nuisance and Discharge Prohibition - C- Clean all bathroom vents. Vents shall be maintained clean.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: HARDEES 1505696

Establishment ID: 3034012401

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



Comment Addendum to Food Establishment Inspection Report

Establishment Name: HARDEES 1505696

Establishment ID: 3034012401

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.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: HARDEES 1505696

Establishment ID: 3034012401

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

