<u> </u>	<u>)C</u>	<u>)d</u>	Ł	Sl	<u>tablishment Inspection</u>	<u>Re</u>) p(<u>ort</u>						Sci	ore: _	<u>96</u>	<u>.5</u>	
Es	tak	olis	hn	ner	nt Name: WILSHIRE RESTAURANT							F	sta	ablishment ID: 3034010508				
					ress: 1570 BRIDGTON STREET									X Inspection ☐ Re-Inspection				
Cit	v:	WI	NST	TON	N-SALEM	State	۵. ا	NC			D	ate	: 1	. 2 / Ø 4 / 2 Ø 1 8 Status Code: A				
	_		127		County: 234 Forsyth	Otat	o							: 10:00 am Time Out: 12:2	5 🗟 i	am nm		
					County: WILSHIRE GOLF CLUB, INC									me: 2 hrs 25 minutes	0	J111		
			ee:	-										ry #:				
	-				(336) 788-7016								_	stablishment Type: Full-Service Restaurant		_		
Wa	ıst	ew	ate	er S	System: ⊠Municipal/Community [On	-Sit	e Sy	ste	m				Risk Factor/Intervention Violations:	3	-		_
Wa	ate	r S	up	ply	y: ⊠Municipal/Community □ On-	Site	Sup	ply						Repeat Risk Factor/Intervention Viola		:_2	<u>:</u>	
F	00	dbo	orne	e III	ness Risk Factors and Public Health Int	erven	tion	s						Good Retail Practices				
					ibuting factors that increase the chance of developing foodl ventions: Control measures to prevent foodborne illness o					Goo	d Re	tail F	Pract	itces: Preventative measures to control the addition of patho and physical objects into foods.	gens, ch	emica	als,	
		_	N/A	N/O	Compliance Status	OUT	CDI	R VF	╛┕		OUT	$\overline{}$		Compliance Status	OUT	CDI	I R	VR
\neg	_	rvisi			.2652 PIC Present; Demonstration-Certification by					Safe			d Wa	,,		1		
		X		ol+h	accredited program and perform duties	X	0	X	2	+		×		Pasteurized eggs used where required	1 0.5 (_	1	L
$\overline{}$	mpi	□	e He	aitn	.2652 Management, employees knowledge;	2 15			2	9 🛛				Water and ice from approved source	210			E
\rightarrow	-				Management, employees knowledge; responsibilities & reporting				3			X		Variance obtained for specialized processing methods	1 0.5 (L
	X		wi o mi	io Di	Proper use of reporting, restriction & exclusion	3 1.5				$\overline{}$	Ten	per	atur	e Control .2653, .2654				
$\overline{}$	000 X	П	gieni	IC P	Proper eating testing dripking or tobaccourse	2 1	0 🗆		3	1 🛛				Proper cooling methods used; adequate equipment for temperature control	1 0.5 (E
\rightarrow	_				Proper eating, tasting, drinking, or tobacco use		=		3:	2 🗆			Ż	Plant food properly cooked for hot holding	1 0.5 (
_	×		C-		No discharge from eyes, nose or mouth	1 0.5	0		3	3 🗆			X	Approved thawing methods used	1 0.5 (ם ונ		Ē
$\overline{}$	eve	nun	g Co	onta	mination by Hands .2652, .2653, .2655, .2656 Hands clean & properly washed	42	0 0		3	4 🗵				Thermometers provided & accurate	1 0.5 (E
\rightarrow	_				No bare hand contact with RTE foods or pre-	+++	_		¹I 🛌	ood	lder	ntific	atio	n .2653				
\dashv	X		Ш	Ц	approved alternate procedure properly followed	3 1.5	_	\vdash	3	5 🛛				Food properly labeled: original container	210			E
		×			Handwashing sinks supplied & accessible	2 🗶	0 🗙			Preve	ntio	n of	Foc	od Contamination .2652, .2653, .2654, .2656, .2657	7			
\neg	\neg		l So	urce						6 🔀				Insects & rodents not present; no unauthorized animals	210			
-	X				Food obtained from approved source	21	_	\vdash	3	7 🛛				Contamination prevented during food preparation, storage & display	210	ם כ		E
\rightarrow				X	Food received at proper temperature	21	_	_	3	ВХ				Personal cleanliness	1 0.5 (\Box	E
11	X				Food in good condition, safe & unadulterated	21	_		Ш⊢	9 🔀	П			Wiping cloths: properly used & stored	1 0.5 (_		F
12			X		Required records available: shellstock tags, parasite destruction	21	0 🗆		IJ⊢			П		Washing fruits & vegetables	1 0.5 (_	+	F
$\overline{}$					Contamination .2653, .2654				╙		\perp			ensils .2653, .2654	L1 6.9 C			L
13	×			Ц	Food separated & protected	3 1.5	_		4				Oil	In-use utensils: properly stored	1 0.5 (П	F
14		X			Food-contact surfaces: cleaned & sanitized	3 1.5	XX] ⊢	2 🔀	П			Utensils, equipment & linens: properly stored,	1 0.5 (+	+	F
	X				Proper disposition of returned, previously served, reconditioned, & unsafe food	21	0		IJ⊨	-				dried & handled Single-use & single-service articles: properly		_	1-	E
P	oter	ntiall	ly Ha		dous Food Time/Temperature .2653				4	3 🔀	Ш			stored & used	1 0.5 (44	\vdash	Ł
16				X	Proper cooking time & temperatures	3 1.5	0		⊣⊢	4 🛛				Gloves used properly	1 0.5 (E
17	X				Proper reheating procedures for hot holding	3 1.5	0 🗆			<u>Jtens</u>	sils a	and I	Equi	ipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces		+	_	F
18				×	Proper cooling time & temperatures	3 1.5	0 🗆] 4	5 🗆	×			approved, cleanable, properly designed, constructed, & used	212			E
19				X	Proper hot holding temperatures		0 🗆		4	6 🛛				Warewashing facilities: installed, maintained, & used; test strips	1 0.5 (L
20	X				Proper cold holding temperatures	3 1.5	0		4	7 🗵				Non-food contact surfaces clean	1 0.5 (Ĵ□		E
21	×				Proper date marking & disposition	3 1.5	0 🗆		1	Physi	ical		lities					
22			X		Time as a public health control: procedures & records	21	0 🗆		1 4	8 🛛	Ш			Hot & cold water available; adequate pressure	210	+-	Ш	Ł
Т	ons	ume	er Ac	lvis	consumer advisory provided for raw or				4	9 🗆	X			Plumbing installed; proper backflow devices	212			E
23			X		undercooked foods	1 0.5			5	X				Sewage & waste water properly disposed	210			E
Т	ighl	y St		ptib	le Populations .2653 Pasteurized foods used; prohibited foods not				5	1 🛛				Toilet facilities: properly constructed, supplied & cleaned	1 0.5 (
24 C	∟ hem	nical	X		offered .2653, .2657	[J][1.5]			5	2 🗷				Garbage & refuse properly disposed; facilities maintained	1 0.5 (F
25			X		Food additives: approved & properly used	1 0.5	0 🗆		5	3 🗆	×			Physical facilities installed, maintained & clean	1 🗷			E
26	X				Toxic substances properly identified stored, & used	21	0 🗆] 5	4 🛛				Meets ventilation & lighting requirements; designated areas used	1 0.5 (
С	onfo	orma		wit	h Approved Procedures .2653, .2654, .2658					1				Total Deductions:	3.5			
27			X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	21	0							Total Deductions:				





		Establishment inspection Report
Establishment Name: WILSHIRE R	ESTAURANT	Establishment ID: 3034010508
Location Address: 1570 BRIDGTO	N STREET	☑Inspection ☐Re-Inspection Date: 12/04/2018
City: WINSTON-SALEM	State: NC_	Comment Addendum Attached? Status Code: A
County: 34 Forsyth	Zip: 27127	Water sample taken? Yes No Category #:
Wastewater System: ✓ Municipal/Comm Water Supply: ✓ Municipal/Comm		Email 1:
Permittee: WILSHIRE GOLF CLUB	nunity	Email 2:
Telephone: (336) 788-7016		Email 3:
<u> </u>	Temperature	
Effective	<u>'</u>	
Item Location water sink	Temp Item Locatio	Holding will change to 41 degrees n Temp Item Location Temp
chili cooler	32	
slaw make unit	41	
chili steam unit-heating	92	
sanitizer 2 comp sink	100	
chili reheat	166	
Violations cited in this repor	Observations and t must be corrected within the time fr	Corrective Actions rames below, or as stated in sections 8-405.11 of the food code.
		on in charge is not Certified Food Protection Manager. Person in by passing ANSI accredited food safety program.
and for obtaining water for var	ious purposes, including coffee.	nce - PF- Employees using hand sink to dump and rinse coffee po . A handwashing sink shall be used for handwashing and no other ng a small prep sink to be used for such purposes.
Establishment uses a two con always run the sanitizer water	npartment sink with T-stick for he and wait for it to heat to the req	ager determined that dishes are not always sanitized after use. eating water. They do not wash very many dishes at all and do not juired 171F. Discussed replacing two comp sink with a 3 comp sind ance of sanitizing all dishes before placing into use. Opts. v
Lock Text		•
	First nn (Tod) Veach	Last 1 1 1
Person in Charge (Print & Sign):		The Very
Regulatory Authority (Print & Sign): No	First ra Sykes	Last
REHS ID: 2	2664 - Sykes, Nora	Verification Required Date: / /
REHS Contact Phone Number: (<u> </u>	

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program

DHHS is an equal opportunity employer.

Page 2 of _____ Food Establishment Inspection Report, 3/2013



Establishment Name: WILSHIRE RESTAURANT Establishment ID: 3034010508

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- Establishment using steam unit designed for hot holding to reheat foods. Food equipment shall be used in accordance with manufacturers intended use. Heat foods on double boiler on grill to ensure proper reheating temperatures within the required 2 hours. //4-501.11 Good Repair and Proper Adjustment-Equipment C-Torn gasket on left door of small freezer. Maintain in good repair. 0pts.
- 49 5-205.15 (B) System maintained in good repair C- One toilet in ladies restroom is not working. Maintain plumbing in good repair. 0pts.
- 6-101.11 Surface Characteristics-Indoor Areas C-REPEAT-Wall damage behind 2 comp sink. Hole in cabinet where water pipes are present, under hand sink/pepsi machine area. Materials for indoor floor, wall, and ceiling surfaces under conditions of normal use shall be smooth, durable, and easily cleanable for areas where food establishment operations are conducted. Warewashing areas shall be constructed of nonabsorbant materials. Seal all pipe penetrations, gaps, and holes. Repair wall to be smooth under 2 compartment sink. Improvement in this area. // 6-501.12 Cleaning, Frequency and Restrictions C- Clean walls in men's restroom. Maintain facilities clean. // 6-201.11 Floors, Walls and Ceilings-Cleanability C- Seal all toilets to floor for cleanability. Floors and floor areas shall be smooth and easily cleanable.



Establishment Name: WILSHIRE RESTAURANT Establishment ID: 3034010508

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: WILSHIRE RESTAURANT Establishment ID: 3034010508

Observations and Corrective Actions

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Establishment Name: WILSHIRE RESTAURANT Establishment ID: 3034010508

Observations and Corrective Actions

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