

Food Establishment Inspection Report

Score: 97.5

Establishment Name: TART SWEETS
Location Address: 848 WEST 5TH STREET SUITE 110
City: WINSTON SALEM **State:** NC
Zip: 27101 **County:** 34 Forsyth
Permittee: TART SWEETS LLC
Telephone: (336) 724-5663
Wastewater System: Municipal/Community On-Site System
Water Supply: Municipal/Community On-Site Supply

Establishment ID: 3034012430
 Inspection Re-Inspection
Date: 12 / 07 / 2018 **Status Code:** A
Time In: 02 : 02 ^{am} _{pm} **Time Out:** 03 : 10 ^{am} _{pm}
Total Time: 1 hr 8 minutes
Category #: II
FDA Establishment Type: Fast Food Restaurant
No. of Risk Factor/Intervention Violations: 1
No. of Repeat Risk Factor/Intervention Violations: 1

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

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	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	<input type="checkbox"/>	1	<input type="checkbox"/>	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification .2653								
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	<input type="checkbox"/>	2	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	1	<input type="checkbox"/>	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	<input type="checkbox"/>	1	<input type="checkbox"/>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	<input type="checkbox"/>	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654								
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
Physical Facilities .2654, .2655, .2656								
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	<input type="checkbox"/>	1	<input type="checkbox"/>	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	<input type="checkbox"/>	1	<input type="checkbox"/>	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	<input type="checkbox"/>	1	<input type="checkbox"/>	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	<input type="checkbox"/>	03	<input type="checkbox"/>	<input type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	<input type="checkbox"/>	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Total Deductions:						2.5		



Comment Addendum to Food Establishment Inspection Report

Establishment Name: TART SWEETS
 Location Address: 848 WEST 5TH STREET SUITE 110
 City: WINSTON SALEM State: NC
 County: 34 Forsyth Zip: 27101
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: TART SWEETS LLC
 Telephone: (336) 724-5663

Establishment ID: 3034012430
 Inspection Re-Inspection Date: 12/07/2018
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: II
 Email 1: tartsweets@gmail.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
Hot water	4 comp sink	144						
Chlorine sani	4 comp sink - ppm	50						
Chlorine sani	Bucket - ppm	50						
Milk	Milk reach-in	45						
Ambient	Milk reach-in	44						

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.

- 1 2-102.11 Demonstration - C // 2-102.12 Certified Food Protection Manager - C No staff present during inspection with Food Protection Manager (FPM) Certification. The person-in-charge shall demonstrate this knowledge by being a certified food protection manager who has shown proficiency of required information through passing a test that is part of an (ANSI) accredited program and be present during all hours of operation. Obtain certification to gain compliance. ✓ Spell

- 39 3-304.14(E) Store sanitizer containers used for wet wiping cloths off the floor. Chlorine sanitizer with wet wiping cloths being stored on floor under handwashing sink at cafe. (E) Containers of chemical sanitizing solutions specified in Subparagraph (B)(1) of this section in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of FOOD, EQUIPMENT, UTENSILS, LINENS, SINGLE-SERVICE, or SINGLE-USE ARTICLES.

- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C Chipping finish on shelving inside milk reach-in cooler. Repair or replace as needed. Equipment shall be maintained cleanable and in good repair. 0 pts

Lock Text



Person in Charge (Print & Sign): Skyler *First* Brown *Last*

Regulatory Authority (Print & Sign): CHRISTY *First* WHITLEY *Last*

Skyler Brown
Christy Whitley REHS1

REHS ID: 2610 - Whitley Christy

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3157



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: TART SWEETS

Establishment ID: 3034012430

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.

- 54 6-303.11 Intensity-Lighting - C REPEAT Lighting measuring low inside men's restroom at 5-14 foot candles at handwashing sink and toilet. Replace burned out light bulb. Recommend using LED or brighter bulbs. Lighting intensity shall be increased to meet at least 20 foot candles at plumbing fixtures.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: TART SWEETS

Establishment ID: 3034012430

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: TART SWEETS

Establishment ID: 3034012430

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: TART SWEETS

Establishment ID: 3034012430

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

