<u> </u>	)U	E	<u>.S</u>	tablishment inspection	K	<del>3</del> 00	<u>)[</u>	ι						500	ore: <u>s</u>	0.0	<u></u>	_
Establishment Name: 5 LOAVES CATERING						Establishment ID: 3034020614												
				ress: 710 COLISEUM DRIVE														
City:	WI	NS	NC	SALEM	Stat	e.	NC	;			D	ate	:	Ø 4 / 1 6 / 2 Ø 1 9 Status Code: A				
Zip:				County: 34 Forsyth	O.G.						Ti	ime	- Il e	n: <u>Ø 9</u> : <u>3 Ø o am</u> Time Out: <u>1 1:4</u>	Ø ⊗ a	m m		
				5 LOAVES CATERING INC										ime: 2 hrs 10 minutes				
Permittee: 5 LOAVES CATERING INC  Telephone: (336) 721-1115						Category #: IV												
		FDA Establishment Type: Full-Service R										-						
				<b>System:</b> ⊠Municipal/Community [				•	tei	m				Risk Factor/Intervention Violations: 2	2			-
Wate	r S	up	ply	y: ⊠Municipal/Community □On-	Site	Sup	pl	y						Repeat Risk Factor/Intervention Viola		1_		
Г	مالم		- 111	wasa Diak Fastawa and Dublic Haalth Int	terventions									Cood Datail Dreations				_
				ness Risk Factors and Public Health Int ibuting factors that increase the chance of developing foodle			5			Goo	d Re	etail I	Pra	Good Retail Practices ctices: Preventative measures to control the addition of patho	gens, che	micals	3,	
Publi	с Не	alth	Inter	ventions: Control measures to prevent foodborne illness of	r injury.									and physical objects into foods.				
	OUT		N/O	Compliance Status	OUT	CD	I R	VR				N/A	_	- 1	OUT	CDI F	R VI	?
Supe 1	rvis	on		.2652 PIC Present; Demonstration-Certification by			T			Т		Т	d V	Vater .2653, .2655, .2658			T	
Empl			alth	PIC Present; Demonstration-Certification by accredited program and perform duties .2652	2	0			_			×		Pasteurized eggs used where required	1 0.5 0		#	_
2 🗵	∪ye.	5 110	aitti	Management, employees knowledge; responsibilities & reporting	3 1.5		T	ПП	29	+				Water and ice from approved source	210	쁘	4	_
3 🗵				Proper use of reporting, restriction & exclusion	$\overline{}$				30			$\perp$		Variance obtained for specialized processing methods	1 0.5 0		<u> </u>	]
	Good Hygienic Practices .2652, .2653							1		$\overline{}$	Ten	nper	atu	re Control .2653, .2654 Proper cooling methods used; adequate				
4		91011		Proper eating, tasting, drinking, or tobacco use	2 1	0	ī		31		Ш			equipment for temperature control	1 0.5 0	_	4	_
5 🗵	П			No discharge from eyes, nose or mouth	1 0.5	0		$d \Box$	_				X	Plant food properly cooked for hot holding	1 0.5 0		<u>』</u>	]
$\vdash$	ntin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656				1	33	×			L	Approved thawing methods used	1 0.5 0		<u> </u>	]
6 🗵				Hands clean & properly washed	42	0 🗆			34	×				Thermometers provided & accurate	1 0.5 0			]
7 🗵				No bare hand contact with RTE foods or pre-	3 1.5	0 0	Ī			ood		ntific	cati			_	Ţ	
8 🗵	П			approved alternate procedure properly followed Handwashing sinks supplied & accessible	2 1	П		$d = \frac{1}{2}$	$\vdash$			L	_	Food properly labeled: original container	210		<u>]</u> [	]
Appr	ove	d So	urce				1	,1,,		$\overline{}$	ntic	n of	Fc	ood Contamination .2652, .2653, .2654, .2656, .2657 Insects & rodents not present; no unauthorized			Ŧ	
9 🗵				Food obtained from approved source	2 1	0	TE				Ш			animals	210	Щ	#	_
10 🗆			X	Food received at proper temperature	21	0	Ī		37	_				Contamination prevented during food preparation, storage & display	210		<u> </u>	]
11 🗵	П			Food in good condition, safe & unadulterated	21		t		38	×				Personal cleanliness	1 0.5 0		卫	]
12 🗆	П	×	П	Required records available: shellstock tags,	21		ī		39	×				Wiping cloths: properly used & stored	1 0.5 0		<u> </u>	]
$\vdash$	ctio		om (	parasite destruction Contamination .2653, .2654				40					Washing fruits & vegetables	1 0.5 0		][	]	
13 🔀				Food separated & protected	3150					Proper Use of Utensils .2653, .2654							Ţ	
14 🗵	П			Food-contact surfaces: cleaned & sanitized	3 1.5		l	ı	41	X				In-use utensils: properly stored	1 0.5 0		<u>』</u>	]
15 🔀	П			Proper disposition of returned, previously served,	21				42					Utensils, equipment & linens: properly stored, dried & handled	1 0.5 0		<u> </u>	]
	ntial	ly Ha	azar	reconditioned, & unsafe food dous Food TIme/Temperature .2653	انات		1	,1,,	43					Single-use & single-service articles: properly stored & used	1 0.5 0			]
16 🗆			X	Proper cooking time & temperatures	3 1.5	0 🗆			44	×				Gloves used properly	1 0.5 0		JE	_
17 🗆			×	Proper reheating procedures for hot holding	3 1.5	0 0			U	Itens	ils a	and	Equ	uipment .2653, .2654, .2663				
18 🗆	П	П	X	Proper cooling time & temperatures	3 1.5	ПП		ı	45					Equipment, food & non-food contact surfaces approved, cleanable, properly designed,	210			
19 🗆	П			Proper hot holding temperatures	3 1.5	0 🗆	F		46		П			constructed, & used Warewashing facilities: installed, maintained, &	1 0.5 0		╁	- 7
20 🗵				Proper cold holding temperatures	3 1.5		F		47	+-				used; test strips  Non-food contact surfaces clean			╬	ر -
21 🗆	×		П	Proper date marking & disposition						hysi	cal	Faci	litia		1 0.5 0			_
$H_{-}$				Time as a public health control: procedures &	+				48	T			1111	Hot & cold water available; adequate pressure	210		Ŧ	1
22 Cons	ume	X r A	lvic	records	21		ᆣ		49	+	П	Ī		Plumbing installed; proper backflow devices	210		_ 	- 7
23 🗆	×		1013	Consumer advisory provided for raw or	1 0.5	XX	T		50	+-							#	ر -
$\vdash$		ısce	ptib	undercooked foods   le Populations   .2653				7-				-		Sewage & waste water properly disposed  Toilet facilities: properly constructed, supplied	210		#	
24 🗆		X		Pasteurized foods used; prohibited foods not offered	3 1.5				51		빋	Ш		& cleaned Garbage & refuse properly disposed; facilities	1 0.5 0		#	_
Cher	nica			.2653, .2657					52	-	×			maintained	1 0.5		4	]
25 🗆		X		Food additives: approved & properly used	1 0.5				53	×				Physical facilities installed, maintained & clean	1 0.5 0		业	]
26				Toxic substances properly identified stored, & used	21				54	×				Meets ventilation & lighting requirements; designated areas used	1 0.5 0			]
Conf	orma		wit	h Approved Procedures .2653, .2654, .2658										•	1.5		Ė	Ī
27 🗆		X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	21	0								Total Deductions:				





	<u>Comment</u>	: Adde	ndum to	Food Es	<u>stablishr</u>	<u>nent</u>	<u>Inspection</u>	Report	
Establishr	ment Name: 5 LOAVES C						): <u>3034020614</u>		
City: WII County:	n Address: 710 COLISEUM NSON SALEM  34 Forsyth ter System: Municipal/Comm pply: Municipal/Comm	Zip: _		ite: NC	Comment A	ddendum	Re-Inspection Attached?   Yes No	Status Code:	. <u>A</u>
	ee: 5 LOAVES CATERING				Email 2:				
Telepho	ne:_(336) 721-1115				Email 3:				
			Tempe	rature Ol	servatior	าร			
	Co	old Hol	ding Tem	perature	is now 4'	1 Deg	rees or less		
Item ServSafe	Location Leigh Hesling 1-16-24	Temp 0	Item pork loin	Location meat walk-i	n	Temp 39	Item	Location	Temp
hot water	silver 3 comp	155	goat cheese	meat walk-i	n	40			
hot water	pot 3 comp	156					_		
hot water	dish machine	176							
hot water	shellfish dish machine	163							
quat sani	bottle ppm	200							
chix salad	first walk-in	40							
air temp	produce walk-in	37							
23 3-60 Consaste may	e the product is frozen. Real of preparation. CDI- All it also as a summer advisory with disclassishing them to a footnote of contain) raw or undercoowill be added to electronic	ems volumal Food osure and with a re ked ingre	s that are Ray d reminder not minder staten edients that m	led. v, Undercoo t provided or nent that sta ay result in f	ked, or Not ( n menus. Dis tes that the i	Otherwis sclosure items ar	se Processed to shall identify the e served raw or	Eliminate Patho e animal-derived undercooked, or	gens - PF - l food by contain (or
	01.115 Maintaining Refuse ecting around them. Mainta							vith leaves and p	lant debris
Lock Text		Fil	rst	La	ast				
Person in C	Charge (Print & Sign): Lei			Hesling	ast				
Regulatory	Authority (Print & Sign): Lat	uren Pleas		Angie Pinyar		Jan	pur ress	/ Unequ	2 Hrw
	REHS ID: 1	690 - Pi	nyan, Angie			_ Verific	ation Required Da	ite:// _	

REHS Contact Phone Number: (336)703-2618

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

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



Establishment Name: 5 LOAVES CATERING Establishment ID: 3034020614

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.





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