r	<u>O(</u>	<u>)a</u>	Ŀ	<u>.SI</u>	<u>tablishment inspection</u>	Ke	;p (<u>or</u>	ι						Sco	ore: <u>9</u>	8.5	<u> </u>	_
Fs	tal	olis	hn	ner	nt Name: MARIO'S PIZZA								F	st	ablishment ID: 3034012014				•
Location Address: 2205 CLOVERDALE AVE										Inspection ☐ Re-Inspection									
									Date: 02/12/2018 Status Code: A										
•									Time In: $0.4 : 0.0 \odot \text{pm}$ Time Out: $5 : 4.0 \odot \text{pm}$										
Zip: 27103 County: 34 Forsyth							Total Time: 1 hr 40 minutes												
P	Permittee: MARIOS PIZZA OF WS INC.									Category #: IV									
Te	Telephone: (336) 602-1410																		
W	Nastewater System: ⊠Municipal/Community □On-Site Sys									FDA Establishment Type: Full-Service Restaurant								-	
	Water Supply: ⊠Municipal/Community ☐ On-Site Supply											No. of Risk Factor/Intervention Violations: 2 No. of Repeat Risk Factor/Intervention Violations:							
_	ato	-	чР	ָיקי.	. Emandipa, community — on		Оир	ر. ۲				IN). (ו וכ	Repeat Risk Factor/Intervention Viola	itions.		_	-
Foodborne Illness Risk Factors and Public Health Interventions														Good Retail Practices					
Risk factors: Contributing factors that increase the chance of developing foodborne illness. Public Health Interventions: Control measures to prevent foodborne illness or injury.								Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.											
Ľ	_				Compliance Status	OUT	CD	ı p	VP		IN	OUT	N/A	N/O	· · · · · ·	OUT	CDI I	p VI	_
			OUT N/A N/O Compliance Status vision .2652		OUT CDI R VR			S	N OUT N/A N/O Compliance Status Gafe Food and Water .265326552658				001	CDI	V	Ì			
1	×			П	PIC Present; Demonstration-Certification by accredited program and perform duties	2	0			28			X		Pasteurized eggs used where required	1 0.5 0		JE]
I	Empl	oyee	e He	alth						_					Water and ice from approved source	210		╦	- 7
2	X				Management, employees knowledge; responsibilities & reporting	3 1.5	0 🗆			30			×		Variance obtained for specialized processing	1 0.5 0	+	7	_ _
3	×				Proper use of reporting, restriction & exclusion	3 1.5	0					_		atııı	methods				_
(3000	ΙНу	lygienic Practices .2652, .2653						Proper cooling methods used; adequate							T	1		
4	×				Proper eating, tasting, drinking, or tobacco use	21	0 [_		$\overline{}$			equipment for temperature control			#	_ _
5	X				No discharge from eyes, nose or mouth	1 0.5	0			_	\vdash			_	Plant food properly cooked for hot holding	1 0.5 0	_	_	_ _
F	reve	ntin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656					_	\vdash		Ш	Ш	Approved thawing methods used	1 0.5 0		+	_
6	×				Hands clean & properly washed	42	0 🗆				X				Thermometers provided & accurate	1 0.5 0		<u> </u>]
7	×				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5	0				ood	lder	ntific	atio				┰	_
8	X				Handwashing sinks supplied & accessible	21	0					ntio	n of	Eo	Food properly labeled: original container od Contamination .2652, .2653, .2654, .2656, .2657	210	쁘	╩	
1	Appr	ovec	l So	urce	.2653, .2655						I Eve		11 01	го	Insects & rodents not present; no unauthorized	210		Ŧ	1
9	X				Food obtained from approved source	21	0 🗆			_		_			animals Contamination prevented during food		_	#	_
10				X	Food received at proper temperature	21	0			-	×				preparation, storage & display	210	-	4	_
11	×				Food in good condition, safe & unadulterated	21	0 [-	×				Personal cleanliness	1 0.5 0		4]
12		П	×	П	Required records available: shellstock tags,	21	0 0	I_{\Box}	П	39	×				Wiping cloths: properly used & stored	1 0.5 0		<u> </u>]
_					parasite destruction Contamination .2653, .2654	التالي				40	X				Washing fruits & vegetables	1 0.5 0		그ㄷ]
13	×				Food separated & protected	3 1.5	0				_		se of	f Ut	ensils .2653, .2654		_	—	
14	X				Food-contact surfaces: cleaned & sanitized	3 1.5	0 🗆	\Box	П	41	×				In-use utensils: properly stored	1 0.5 0		1]
15					Proper disposition of returned, previously served,	21	0		Н	42	X				Utensils, equipment & linens: properly stored, dried & handled	1 0.5 0		<u> </u>]
		ntiall	у На	azar	reconditioned, & unsafe food dous Food TIme/Temperature .2653	الدادعا	ے اِ			43	×				Single-use & single-service articles: properly stored & used	1 0.5 0]
16					Proper cooking time & temperatures	3 1.5	0 🗆			44	×				Gloves used properly	1 0.5 0		515	_
17	×				Proper reheating procedures for hot holding	3 1.5	0	П	П	U	tens	ils a	nd l	Equ	ripment .2653, .2654, .2663				
18		П	П	×	Proper cooling time & temperatures	\Box	0 0			45	×				Equipment, food & non-food contact surfaces approved, cleanable, properly designed,	210		alc	
19		×				3 1.5	-								constructed, & used Warewashing facilities: installed, maintained, &			\pm	_
\vdash				H	Proper hot holding temperatures					46	\vdash				used; test strips	1 0.5 0		4] -
20	×			Ш	Proper cold holding temperatures		0			47					Non-food contact surfaces clean	1 0.5 0		<u> </u>]
21	Ш	X	Ш	Ш	Proper date marking & disposition	3 X	0 🗙	Ш	Ш		hysi			litie					
22					Time as a public health control: procedures & records	21	0 🗆			48	\vdash				Hot & cold water available; adequate pressure	2 1 0		#	
-	Cons	$\overline{}$		dvis	ory .2653 Consumer advisory provided for raw or					-	×				Plumbing installed; proper backflow devices	210	쁘	#	_
23			X		undercooked foods .	1 0.5	이ㄴ		Ш	50	×				Sewage & waste water properly disposed	210]
		$\overline{}$	isce	ptib	le Populations .2653 Pasteurized foods used; prohibited foods not			Т	П	51					Toilet facilities: properly constructed, supplied & cleaned	1 0.5 0		ᄓ]
24	Chen				offered .2653, .2657	ادالدا	ΨГ		ᄖ	52	×				Garbage & refuse properly disposed; facilities maintained	1 0.5 0		1]
25			X		Food additives: approved & properly used	1 0.5		П		53	×				Physical facilities installed, maintained & clean	1 0.5 0		⇟	_ 7
26					Toxic substances properly identified stored, & used	21	0 0	F		54		$\overline{\Box}$			Meets ventilation & lighting requirements:	1 0.5 0		#	_ _
_		orma	ance	wit	h Approved Procedures .2653, .2654, .2658	النات		1-		-		_			designated areas used				Į
27			X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	21	0 🗆								Total Deductions:	1.5			
				1	, , pacing chang of the or plan	-		1											4





			naum te) F000 E		ent inspection	<u>i Report</u>					
	nt Name: MARIO'S PI				Establishment ID: 3034012014							
	ddress: 2205 CLOVER	DALE AVE				Re-Inspection	n Date: 02/12/20)18				
City: WINS	TON SALEM			tate:_NC	Comment Adde							
County: 34			_Zip: <u>27103</u>		Category #:							
	System: Municipal/Com				Email 1: skyhighitalian@aol.com							
Water Supply	/: Municipal/Com MARIOS PIZZA OF W		On-Site System		Email 2:							
	:_(336) 602-1410				Email 3:							
Тогорионо	•		Temn	erature O	bservations							
	Effoctive	o lonu	•			shanga ta 41 d	ograce					
Item	Location	Temp	Item	Location	7	change to 41 d	Location	Temp				
Hot water	3 comp sink	136	tomatoes	make unit	45							
Serv Sage	Ami Zakon 4-29-18	00	cheese 	pizza make								
Quat Sani	3 comp sink - ppm	150	sausage	pizza make								
lasagna	walk-in	38	meatballs 	steam well		18						
noodles	walk-in	39	pizza 	reheat		39						
lettuce	make unit	44	calzone	final cook	18	92						
ham	make unit	42	_									
spagetti	make unit	43										
V	iolations cited in this repo				orrective Act		11 of the food code.					
well for 21 3-501.1 salami potentia	ra sauce stored in ste repair. CDI: Meatball 18 Ready-To-Eat Pote and one package of c ally hazardous foods h rily discarded.	s were vol entially Haz cooked chi	untairly disca zardous Foo cken prepare	arded. 0pts d (Time/Tem ed on 2-4-18	perature Contro was stored for i	ol for Safety Food), D mmediate use in wa	Disposition - P- 2 p alk-in cooler. Read	packages of ly-to-eat,				
	rge (Print & Sign): ^A thority (Print & Sign): ^S	<i>Fii</i> mi <i>Fii</i> haneria		Zakion	ast ast	Jan Ja	M SKE'	- 45 (
	REHS ID:	2683 - SI	haneria San	iders	\	Verification Required D	vate:// _					

REHS Contact Phone Number: (336)703-3144

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: MARIO'S PIZZA Establishment ID: 3034012014

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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