

Food Establishment Inspection Report

Score: 92.5

Establishment Name: APPLEBEE'S

Establishment ID: 3034011397

Location Address: 4690 N PATTERSON AVE

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 08 / 08 / 2018 Status Code: A

Zip: 27105

County: 34 Forsyth

Time In: 10 : 05 ^{am} _{pm} Time Out: 01 : 30 ^{am} _{pm}

Permittee: GREEN APPLE LLC

Total Time: 3 hrs 25 minutes

Telephone: (336) 767-1442

Category #: IV

Wastewater System: ☒ Municipal/Community ☐ On-Site System

FDA Establishment Type: Full-Service Restaurant

Water Supply: ☒ Municipal/Community ☐ On-Site Supply

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 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 | | | <input checked="" type="checkbox"/> | 13 | 0 | <input checked="" type="checkbox"/> |
| 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Proper cooling time & temperatures | | | 3 | 13 | 0 | |
| 19 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Contamination prevented during food preparation, storage & display | | | 2 | 1 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 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 type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | In-use utensils: properly stored | | | 1 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 42 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Utensils, equipment & linens: properly stored, dried & handled | | | 1 | 03 | 0 | |
| 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 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 46 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Warewashing facilities: installed, maintained, & used; test strips | | | 1 | 03 | <input checked="" type="checkbox"/> | |
| 47 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Non-food contact surfaces clean | | | 1 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 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 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 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 | | | 1 | <input checked="" type="checkbox"/> | 0 | <input checked="" type="checkbox"/> |
| 54 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Meets ventilation & lighting requirements; designated areas used | | | <input checked="" type="checkbox"/> | 03 | 0 | <input checked="" type="checkbox"/> |
| Total Deductions: | | | | | | | | | | 7.5 |



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: APPLEBEE'S

Location Address: 4690 N PATTERSON AVE

City: WINSTON SALEM State: NC

County: 34 Forsyth Zip: 27105

Wastewater System: ☒ Municipal/Community ☐ On-Site System

Water Supply: ☒ Municipal/Community ☐ On-Site System

Permittee: GREEN APPLE LLC

Telephone: (336) 767-1442

Establishment ID: 3034011397

☒ Inspection ☐ Re-Inspection Date: 08/08/2018

Comment Addendum Attached? ☐ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1: npatterson334@applegoldgroup.net

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 |
|-------------|------------------------|------|-------------|---------------------|------|-----------|-------------------|----------|
| Cole slaw | walk in cooler | 44 | Club set | reach in cooler | 40 | Ckd rice | walk in cooler | 99 |
| Hot water | 3 compartment sink (b) | 114 | Rice | final cook | 165 | Ckd rice | walk in cooler | 11:23am |
| Rd pot | reach in cooler | 41 | Riblet | reach in cooler | 40 | Riblets | walk in cooler | 11:56am |
| Chkn wings | reach in cooler | 37 | Shd lettuce | make unit | 39 | Milk | walk in cooler | 2 |
| Picodegallo | make unit | 39 | Riblet | lo boy | 39 | Cole slaw | reach in cooler | 34 |
| Cole slaw | make unit | 42 | Hot water | warewashing machine | 172 | Shrimp | reach in cooler | 37 |
| Asn chikn | reach in cooler | 40 | Hot water | 3 compartment sink | 132 | Quat | final cook | 176 |
| Brisket | reach in cooler | 42 | Quat | 3 compartment sink | 150 | Servsafe | sanitizing bucket | 300 |
| | | | | | | | J. Davenport | 11/15/22 |
| | | | | | | | | 0 |

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 Repeat. All fryer baskets, plastic, circular container, container of various utensils, ladle and scoops, knives, sheet pans, container with liquid inside bowl and the soiled hose on top the bowls, plastic container touching the end of the hose, and stacks of metal pans were soiled with hair, hose, debris, and/or residue. Food-contact surfaces of equipment and utensils shall be clean to sight and touch. CDI: All items taken to the 3 compartment sink/warewashing machine.
- 37 3-307.11 Miscellaneous Sources of Contamination - C 0 points. Hair in the onions inside the lo boy. Food shall be protected from contamination. CDI: Person in charge removed the hair.
- 41 3-304.12 In-Use Utensils, Between-Use Storage - C Repeat. Handles of scoop in contact with onions in the lo boy. During pauses in food preparation or dispensing, utensils shall be stored: 1. In food with their handles above the top of the food and the container; 2. On a clean portion of the food preparation table or cooking equipment only if the surface are cleaned and sanitized at proper frequency, 3. In running water of sufficient velocity to flush particulates to drain, if used with moist food, 4. Clean, protected location if the utensils are used only with food that is not potentially hazardous, or 5. In container of water maintained at a temperature of 135 F or greater and container is cleaned at proper frequency. CDI: Scoop removed by person in charge.

Lock
Text



Person in Charge (Print & Sign): Jesse Davenport

Regulatory Authority (Print & Sign): Jill Sakamoto REHSI

Jesse Davenport
Jill Sakamoto

REHS ID: 2685 - Jill Sakamoto

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3137



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: APPLEBEE'S

Establishment ID: 3034011397

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.



- 45 -501.11 Good Repair and Proper Adjustment-Equipment - C Repeat. Missing caulk between the splash guard and handwashing sinks. Peeling legs causing rust on the shelving units in the walk in cooler. Peeling and bent rubber on green lids. Rusty racks and missing pieces of trim in/on the reach in cooler. Torn gasket on the door of the walk in cooler. Rusty ends of the shelving (minor) in the reach in coolers. Oxidized/rust shelving in the outside storage room. Equipment shall be maintained cleanable and in good repair.
- 46 4-501.14 Warewashing Equipment, Cleaning Frequency - C 0 points. Dark residue on/in spray nozzles at the prewash sink for the warewashing machine. Components of the sink shall be cleaned at least every 24 hours.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C Repeat. Build up of chips inside the opening for the turn knob for the unit above. Residue on shelving in walk in freezer. Debris on cart by the reach in freezer. Residue inside the microwave and on shelving by ice machine. Residue around the nozzle of the water dispenser. Nonfood-contact surfaces of equipment shall be free of accumulation of food residue, dirt, dust, and other debris.
- 49 5-205.15 System Maintained in Good Repair - C Repeat. Unclog floor sinks in the bar and under the equipment such as make units/hot holding units. Water observed overflowing from clogged drain under the hot holding/make unit by the fryers. A plumbing system shall be maintained in good repair.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C Repeat. Replace broken floor tile in the kitchen. Add grout where water is pooling or debris in between the floor tiles in the establishment. Coved base came off inside the walk in cooler. Floors, walls, and ceilings shall be designed, constructed, and installed to be smooth and easily cleanable.
// 6-501.12 Cleaning, Frequency and Restrictions - C Repeat. Floor cleaning needed in walk in freezer, bar, and under the make/hot holding units to remove debris and/or residue. Physical facilities shall be cleaned as often as necessary to maintain clean.
//6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C Repeat. Dark growth on wall and an open corner of the ceiling exposing the wood frame roof in the outside storage area used for clean linens, chemicals, and
- 54 6-303.11 Intensity-Lighting - C Repeat. Lighting measuring low in the following areas (measured in foot candles): 37 to 44 around ice bin/ tea dispenser at front service area; 31 to 45 entire cook's line (stove to fryers); 16 to 22 at ice bin with soda gun. Increase lighting intensity to meet at least 50 foot candles where employees work with food.



Comment Addendum to Food Establishment Inspection Report

Establishment Name: APPLEBEE'S

Establishment ID: 3034011397

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: APPLEBEE'S

Establishment ID: 3034011397

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: APPLEBEE'S

Establishment ID: 3034011397

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

