Food Establishment Inspection Report

Establishment Name: JERSEY MIKE'S SUBS
Location Address: 2291 CLOVERDALE AVE

City: WINSTON SALEM

Zip: 27103

County: 34 Forsyth

State: NC

Time In: 11: Ø3 ⊗ am Time Out: Ø2: 1 Ø ⊗ pm

Total Time: 3 hrs 7 minutes

Score: 98.5

Establishment ID: 3034012484

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Tine In: 11: Ø3 ⊗ am Time Out: Ø2: 1 Ø ⊗ pm

Total Time: 3 hrs 7 minutes

Permittee: CAROLINA SNO, INC

Telephone: Category #: II

FDA Establishment Type: Fast Food Restaurant

Wastewater System: ⊠Municipal/Community □ On-Site System Water Supply: ⊠Municipal/Community □ On-Site Supply Water Supply: □ On-Site Supply Wastewater System: □ On-Site System No. of Risk Factor/Intervention Violations: □ No. of Repeat Risk Factor/Intervention Violations: □																		
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.									Good Retail Practices Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.									
			UT N/A N/O Compliance Status OUT CDI R VR				R VR	IN	OUT	N/A	N/O	Compliance Status	Ľ	OUT	CI	DI F	R VR	
S		pervision .2652					Safe	Safe Food and Water .2653, .2655, .2658							_			
1	X	PIC Present; Demonstration-Certification by accredited program and perform duties				28 🗆		×		Pasteurized eggs used where required	1	0.5	0 [
E	mpl	oye	e He	alth					29 🔀				Water and ice from approved source	2	1	0][
2	X				Management, employees knowledge; responsibilities & reporting	3 1.5			30 🗆		X		Variance obtained for specialized processing methods	1	0.5	0 [][可
3	X	Proper use of reporting, restriction & exclusion								Food Temperature Control .2653, .2654								\perp
Good Hygienic Practices .2652, .2653									31 🗆	X	İ		Proper cooling methods used; adequate			0 2		可
4	X				Proper eating, tasting, drinking, or tobacco use	21			32 🖂	\vdash	×	\Box	equipment for temperature control Plant food properly cooked for hot holding	1	\vdash	+	1	丗
5	X				No discharge from eyes, nose or mouth	1 0.5			H-					1		=	1	#
Р	reve	ntin	g C	onta	mination by Hands .2652, .2653, .2655, .2656				33 🗆			X	Approved thawing methods used	F		+		#
6	X				Hands clean & properly washed	42							Thermometers provided & accurate	1	0.5	0 [<u> </u>
7	X				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5	0 🗆 🗆			Food Identification						7.		
8	П	X			Handwashing sinks supplied & accessible	211	X X C	$\exists \Box$	35 🗵 🗆				Food properly labeled: original container		1	<u>0</u> L	IJL	쁘
$oldsymbol{\sqcup}$	Approved Source .2653, .2655									entio	ntion of Fo		nd Contamination .2652, .2653, .2654, .2656, .265 Insects & rodents not present; no unauthorized	Т			7	
9	X				Food obtained from approved source	21		<u> </u>	36	Ш			animals	2		0	ᆘ	44
10	П	П		×	Food received at proper temperature	21		$\overline{}$	37				Contamination prevented during food preparation, storage & display	2	1	0		
Н						+			38				Personal cleanliness	1	0.5	0		
Н	X]	Food in good condition, safe & unadulterated Required records available: shellstock tags,	+++			39 🔀				Wiping cloths: properly used & stored	1	0.5	0 [][靣
12	Ц	Ш	×	Ш	parasite destruction	21		ᆚᆚ	40 🔀	П			Washing fruits & vegetables	1	0.5	0 [1	丗
\Box		otection from Contamination .2653, .2654							Prope	er Us	se of	Ute	<u> </u>				715	
13	X	Ц	Ш	Ш	Food separated & protected	3 1.5			41				In-use utensils: properly stored	1	0.5	0 [٦IF	П
14	X				Food-contact surfaces: cleaned & sanitized	3 1.5			42 🔀	П			Utensils, equipment & linens: properly stored,	1	0.5		1	\pm
15	X				Proper disposition of returned, previously served, reconditioned, & unsafe food	21			\vdash				dried & handled Single-use & single-service articles: properly	Ë			- - -	\pm
\Box		ntial	ly Ha	azar	dous Food Time/Temperature .2653				43	Ш			stored & used	1	0.5	0 [ᆘ	44
16	X				Proper cooking time & temperatures	3 1.5			44				Gloves used properly	1	0.5	0 [<u> </u>
17				X	Proper reheating procedures for hot holding	3 1.5			Utens	Utensils and Equipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces					Н	_	_	
18					Proper cooling time & temperatures	+			45 🗆	X			approved, cleanable, properly designed, constructed, & used	2	1	+		
19	X	Ш		Ш	1 0 1			44	46				Warewashing facilities: installed, maintained, & used; test strips	1	0.5	0][[
20		X			Proper cold holding temperatures	3 1.5		X □	47 🗆	X			Non-food contact surfaces clean	X	0.5	0	JĮ∑	◂▢▮ੲ
21	X				Proper date marking & disposition	3 1.5	0 🗆 🗆		Phys		Faci	lities	.2654, .2655, .2656					
22			X		Time as a public health control: procedures &	21	опп	10	48				Hot & cold water available; adequate pressure	2	1	0		미
-	ons	ume	er Ac	lvis					49 🔀				Plumbing installed; proper backflow devices	2	1	0		
23			×		Consumer advisory provided for raw or undercooked foods	1 0.5			50 🗷				Sewage & waste water properly disposed	2	1	0 [1	可
Н	ighl	y Sı	ısce	ptib	le Populations .2653				51 🔀				Toilet facilities: properly constructed, supplied	1	H	+	+	ਜ
24			Pasteurized foods used; prohibited foods not offered								ш		& cleaned Garbage & refuse properly disposed; facilities	F		+	#	\blacksquare
C	hen	nica						52 🗆	X			maintained	1	0.5	X [Ш	
25			X		Food additives: approved & properly used	1 0.5			53 🗆	X			Physical facilities installed, maintained & clean	1	0.5	X [
26	X				Toxic substances properly identified stored, & used	21	0 🗆 🗆		54				Meets ventilation & lighting requirements; designated areas used	1	0.5	0 [
Conformance with Approved Procedures .2653, .2654, .2658									1	<u>_</u>								
27	П	П			Compliance with variance, specialized process,	211	메니드						Total Deductions:	1'	.5			





		Commei	nt Adde	endum to	Food E	<u>stablis</u>	nment	Inspection	Report				
Estab	lishme	nt Name: JERSEY M	IKE'S SUB	3		Establishment ID: 3034012484							
		ddress: 2291 CLOVE	RDALE AVE			☑Inspection ☐Re-Inspection Date: 04/17/2019							
City	: WINST	TON SALEM		Sta	ate: NC_	Comment Addendum Attached? Status Code: A							
County: 34 Forsyth				_ Zip: <u>27103</u>		Water sample taken? Yes X No Category #: II							
	tewater S er Supply	System: ☒ Municipal/Cor ☐ ☒ Municipal/Cor			Email 1: thunt63@hotmail.com								
Permittee: CAROLINA SNO, INC			;			Email 2:							
Tele	ephone:					Email 3:							
				Tempe	erature O	bservatio	ons						
		C		_	perature	is now	41 Deg	rees or less	•				
Item Pastra	mi	Location display case temp 1	Temp 42	Item Tomatoes	Location serving line	e @12:05	Temp 34	Item Roast	Location cooler	Temp 44			
Pastrami		display case temp 2	41	Lettuce	serving line	e @12:0	41	Ambient	cold bar	20			
Turkey		display case temp 1	44	Philly Steak	final cook		174	Ambient	walk-in cooler	40			
Turkey		display case temp 1	41	Chicken	reheat		176	Ambient	display case	41			
Pepper Ham		display case temp 2	43	Meatballs	hot holding	ı	176 Hot water 3 com		3 compartment sink	130			
Pepper Ham		display case temp 1	40	Marinara	hot holding	l	156	C. Sani	bucket	200			
Tomatoes		serving line @11:34	48	Tomatoes	sandwich r	nake-unit	37	C.Sani	3 compartment sink	200			
Lettuc	е	serving line @11:34	47	Lettuce	sandwich r	nake-unit	37	Serv Safe	Marco Cedillo 9/19/23	00			
20	P: The 1 (42F-43 held at F), pep	following items in co BF), (serving line) ton 41 F or below. CDI:	d holding natoes (43 PIC moved matoes (3	were above 41 F-48F), lettuce d items to walk 7 F), lettuce (3	l F: (display e (47 F) (wa k-in freezer t 87 F). Roast	case) past lk-in cooler to bring to t	rami (41) roast(43 emperatu	F), turkey (43F- BF-45F). Potenti Ires of 41 or belo	ot and Cold Holding - 44 F), peppered ham ally hazardous food s ow. Pastrami (41 F), t to be turned down to h	hall be urkey (41			
	of (43F-		oe accomp	olished in acco	rdance with	time and to	emperatu	re by placing for	ap measured at temp od in shallow pans, se ily discarded roasts.				
Lock Text				irst		ast		\mathcal{M}	- 0010				
Persor	in Char	ge (Print & Sign):	Marco		Cedillo			4	Juo				
Regula	itory Aut	thority (Print & Sign):	<i>Fi</i> /ictoria Mur _l	irst ohy	L Michelle Bel	ast I	Vus	in May	/ Amilu	Mes			
		REHS ID:	2464 - B	ell, Michelle			Verific	cation Required Da	ate://				

REHS ID: 2464 - Bell, Michelle

REHS Contact Phone Number: (336) 703 - 3814

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program DHHS is an equal opportunity employer.

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Establishment Name: JERSEY MIKE'S SUBS Establishment ID: 3034012484

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 4-501.11 Good Repair and Proper Adjustment-Equipment - C: Shelves and walls rusting in walk-in cooler. Equipment shall be maintained in good repair. 0 point

4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils -REPEAT- C: Cleaning needed to the following items in the walk-in cooler: condenser unit, fan covers, walls, and shelving. Black build up on sprayer head at 3-compartment sink. Nonfood-contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.

52 5-501.114 Using Drain Plugs - C: Drain plug missing on outside receptacle. Outside receptacles, recyclable, and returnables shall have drain plugs in place. 0 point

6-501.12 Cleaning, Frequency and Restrictions - C: Cleaning needed to walls in ware washing area. Physical facilities shall be cleaned at a frequency to keep them clean 0 point





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