

Food Establishment Inspection Report

Score: 94

Establishment Name: SEVEN ELEVEN 36068

Establishment ID: 3034020765

Location Address: 1005 SOUTH MAIN STREET

☒ Inspection ☐ Re-Inspection

City: KERNERSVILLE

State: NC

Date: 04 / 22 / 2016 Status Code: A

Zip: 27284

County: 34 Forsyth

Time In: 11 : 00 ^{am}_{pm} Time Out: 01 : 10 ^{am}_{pm}

Permittee: SEVEN ELEVEN INC.

Total Time: 2 hrs 10 minutes

Telephone: (336) 992-0554

Category #: II

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

FDA Establishment Type: Fast Food Restaurant

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

No. of Risk Factor/Intervention Violations: 3

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.											
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	15	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion				3	15	0	
Good Hygienic Practices .2652, .2653											
4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use				2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth				1	05	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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No bare hand contact with RTE foods or pre-approved alternate procedure properly followed				3	15	0	
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible				2	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
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	15	0	
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized				3	15	0	
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures				3	15	0	
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding				3	15	0	
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures				3	15	0	
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures				3	15	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures				3	15	0	
21	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper date marking & disposition				3	15	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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods				1	05	0	
Highly Susceptible Populations .2653											
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered				3	15	0	
Chemical .2653, .2657											
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used				1	05	0	
26	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used				2	<input checked="" type="checkbox"/>	0	<input checked="" 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				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	05	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	05	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	05	0	
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding				1	05	0	
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used				1	05	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate				1	05	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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display				2	1	0	
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness				1	05	0	
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored				1	05	0	
40	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Washing fruits & vegetables				1	05	0	
Proper Use of Utensils .2653, .2654											
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored				1	05	0	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled				1	05	0	
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used				1	05	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly				1	05	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	1	<input checked="" type="checkbox"/>	
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips				1	05	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean				1	<input checked="" type="checkbox"/>	0	
Physical Facilities .2654, .2655, .2656											
48	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure				2	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
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	05	0	
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained				<input checked="" type="checkbox"/>	05	0	<input checked="" type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean				1	<input checked="" type="checkbox"/>	0	
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used				1	05	0	
Total Deductions:										6	

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Off

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Comment Addendum Attached? ☐ Status Code: A

County: 34 Forsyth Zip: 27284

Category #: II

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

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

Permittee: SEVEN ELEVEN INC.

Email 1:

Email 2:

Telephone: (336) 992-0554

Email 3:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
Hot dogs	Roller	137	Hot water	Three compartment sink	105			
Tornado	Roller	139	Quat sanitizer	Dispenser in ppm	300			
Slaw	Condiment station	43	SS Reginald	Exp. 12/11/20	0			
Onions	Lower condiment station	43						
Ambient air	Reach in cooler	41						
Chili	Dispenser	138						
Nacho	Dispenser	137						
Chili	Walk in cooler	36						

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.

- 4 0 pts - 2-401.11 Eating, Drinking, or Using Tobacco - C - Observed employee drink and cig stored on top of table used to store chili and cheese dispenser - although items posed no risk to actual food storage/prep area, employee drinks and cigs must be stored in designated area away from any food contact/prep areas
- 8 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF - Front handsink used as dump sink for coffee cleaner and other miscellaneous items - handsinks are to be used only for handwashing, not for dumping drinks or cleaners - CDI - manager cleaned sink and moved coffee dispenser from handsink
- 26 7-201.11 Separation-Storage - P - Upon arrival, observed general cleaner bottles stored on work top cooler, table used to store chili and cheese dispenser and later hanging on splash guard at front handsink - chemical bottles must be stored away from food contact/prep areas, also handsinks - CDI - manager moved bottles to designated areas, away from handsink and food storage areas



Person in Charge (Print & Sign): Reggie First Last Noble

Regulatory Authority (Print & Sign): Kenneth First Last Michaud

REHS ID: 2259 - Michaud, Kenneth

Verification Required Date: 05 / 02 / 2016

REHS Contact Phone Number: (336) 703 - 3131



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- 45 0 pts - 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Recaulk splash guard to table at front handsink as caulking is peeling; Replace torn reach in cooler door gasket
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C - Clean coffee and single service item drawers as they contain significant coffee grounds build-up
- 48 5-103.11 Capacity-Quantity and Availability - PF - Water heater replaced recently and temperature set at 120 deg F - hot water max recorded at 105 deg F at water faucet on three compartment sink - check with city building inspections to verify if a permit needs to be acquired for water heater installation and may need to get correct size to supply adequate hot water for peak demand - will require verification visit/contact in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131
- 49 5-203.14 Backflow Prevention Device, When Required - P - No backflow prevention device observed on water line for Bunn coffee maker and manager could not provide documentation from manufacturer stating an internal air gap or backflow prevention device is present - appliances that have it's own water source must be protected with a backflow prevention device - contact manufacturer for documentation if an internal air gap or backflow prevention device is present or add backflow prevention device, rated ASSE 1022, on water line behind coffee maker - will require verification visit/contact in 10 days - contact Kenneth Michaud at michaukb@forsyth.cc or (336) 703-3131 when complete
- 52 5-501.15 Outside Receptacles - C - Dumpster doors open - ensure dumpster doors are shut when not in use as to help prevent against pest and rodent harborage
- 53 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C - Recaulk backsplashes of three compartment and rear handsink as caulking is peeling; Recaulk bases of toilets in restrooms as caulking is damaged



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Spell



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