

Food Establishment Inspection Report

Score: 93.5

Establishment Name: TEQUILA MEXICAN RESTAURANT

Establishment ID: 3034011314

Location Address: 2804 B REYNOLDA RD

Inspection Re-Inspection

City: WINSTON SALEM

State: NC

Date: 01 / 13 / 2017 Status Code: A

Zip: 27106

County: 34 Forsyth

Time In: 01 : 50 ^{am} _{pm} Time Out: 03 : 55 ^{am} _{pm}

Total Time: 2 hrs 5 minutes

Permittee: VALERIA INC

Category #: IV

Telephone: (336) 727-9547

FDA Establishment Type: Full-Service Restaurant

Wastewater System: Municipal/Community On-Site System

No. of Risk Factor/Intervention Violations: 1

Water Supply: Municipal/Community On-Site Supply

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	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health .2652										
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting			3	1.5	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			3	1.5	0	<input type="checkbox"/>
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	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			1	0.5	0	<input type="checkbox"/>
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	<input type="checkbox"/>
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	1.5	0	<input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			2	1	0	<input 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	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature			2	1	0	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated			2	1	0	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			2	1	0	<input type="checkbox"/>
Protection from Contamination .2653, .2654										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			3	1.5	0	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			<input checked="" type="checkbox"/>	1.5	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	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653										
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures			3	1.5	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			3	1.5	0	<input type="checkbox"/>
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures			3	1.5	0	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			3	1.5	0	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			3	1.5	0	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			3	1.5	0	<input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			2	1	0	<input type="checkbox"/>
Consumer Advisory .2653										
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods			1	0.5	0	<input type="checkbox"/>
Highly Susceptible Populations .2653										
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered			3	1.5	0	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used			1	0.5	0	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			2	1	0	<input 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	<input type="checkbox"/>

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	0.5	0	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			2	1	0	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods			1	0.5	0	<input type="checkbox"/>
Food Temperature Control .2653, .2654										
31	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control			1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding			1	0.5	0	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used			1	0.5	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	0.5	0	<input type="checkbox"/>
Food Identification .2653										
35	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			2	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>
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 type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			1	0.5	0	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			1	0.5	0	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	0.5	0	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654										
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			1	0.5	0	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			1	0.5	0	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			1	0.5	0	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			1	0.5	0	<input type="checkbox"/>
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			<input checked="" type="checkbox"/>	1	0	<input checked="" type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			1	0.5	0	<input type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			1	0.5	0	<input 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	<input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			2	1	0	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed			2	1	0	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			1	0.5	0	<input type="checkbox"/>
52	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			1	0.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			<input checked="" type="checkbox"/>	0.5	0	<input checked="" type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			1	0.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Deductions:							6.5			



Comment Addendum to Food Establishment Inspection Report

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City: WINSTON SALEM **State:** NC
County: 34 Forsyth **Zip:** 27106
Wastewater System: Municipal/Community On-Site System
Water Supply: Municipal/Community On-Site System
Permittee: VALERIA INC
Telephone: (336) 727-9547

Establishment ID: 3034011314
 Inspection Re-Inspection **Date:** 01/13/2017
Comment Addendum Attached? **Status Code:** A
Category #: IV
Email 1:
Email 2:
Email 3:

Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
rice	hot hold	147	shrimp	make-unit	39	chicken	final cook	179
refried beans	hot hold	151	pico	make-unit	38	hot water	3-compartment sink	134
chicken	hot hold	155	chorizo	low boy	39	ServSafe	Libertad Lopez 3-10-19	0
beef	hot hold	161	steak	low boy	35	bleach (ppm)	3-compartment sink	100
carnitas	hot hold	160	chicken	walk-in cooler	40			
beef tips	hot hold	148	pork	walk-in cooler	42			
tomatoes	make-unit	52	pico	cooling	56			
lettuce	make-unit	53	beef	final cook	167			

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 4-501.114 Manual and Mechanical Warewashing Equipment, Chemical Sanitization-Temperature, pH, Concentration and Hardness - P - Repeat - Dish machine did not register a color change on test strip. Chlorine sanitizers shall be at a concentration of at least 50 ppm. CDI - EcoLab technician repaired dish machine at end of inspection and concentration measured 50 ppm. // 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - P - Can opener blade visibly soiled. Food-contact surfaces of equipment shall be cleaned every 4 hours. CDI - Can opener blade washed, rinsed and sanitized.
- 31 3-501.15 Cooling Methods - PF - Lettuce and tomatoes placed directly in make-unit after cutting. Both measured 52-53F. Cooling foods must be placed in equipment designed to rapidly cool foods. CDI - Lettuce and tomatoes moved to walk-in cooler to continue cooling.
- 35 3-302.12 Food Storage Containers Identified with Common Name of Food - C - Chicken base, salt and sugar containers all not labelled. All working containers of foods that are not "readily identifiable" must be labelled. CDI - Items labelled during inspection. 0 pts.



Person in Charge (Print & Sign):

First *Last*

Regulatory Authority (Print & Sign):

Andrew

First *Last*

Lee

REHS ID: 2544 - Lee, Andrew

Verification Required Date: ___ / ___ / ___

REHS Contact Phone Number: (336) 703 - 3128



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- 37 3-305.11 Food Storage-Preventing Contamination from the Premises - C - Ice machine lid left opened during inspection. Close the ice machine lid when not in use to prevent potential contamination from occurring. 0 pts.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C - Repeat - Cracks present in 3-compartment sink. Welded cracks in prep sinks and 3-compartment sinks are rough and need to be smoothed. Rusted shelving present in walk-in cooler. // 4-101.17 Wood, Use Limitation - C - Repeat - Raw wood shelving above make table. Wood must be sealed to be used in the establishment. // 4-205.10 Food Equipment, Certification and Classification - C - Domestic blender used in the establishment. All equipment must be commercial. Remove from establishment.
- 52 5-501.114 Using Drain Plugs - C - Drain plug missing on dumpster. Contact waste management company and request a new drain plug. 0 pts.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C - Floor cleaning necessary underneath equipment throughout establishment, specifically underneath the 3-compartment sink and underneath dish machine. Physical facilities shall be kept clean. // 6-201.11 Floors, Walls and Ceilings-Cleanability - C - Repeat - Coved base missing in dry storage area and several cracked tiles present throughout kitchen and in dry storage area. Grout between tiles low in walk-in cooler. Physical facilities shall be in good repair and easily cleanable.
- 54 6-303.11 Intensity-Lighting - C - Lighting low under hood: 26-33 foot candles, make table: 34 foot candles, and at prep sinks: 33-36 foot candles. Lighting shall be at least 50 foot candles where food is prepared. 0 pts.



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✓
Spell



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