

Food Establishment Inspection Report

Score: 94

Establishment Name: MOE'S SOUTHWEST GRILL

Establishment ID: 3034012098

Location Address: 2021 GRIFFITH RD SUITE 100

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 03 / 07 / 2018 Status Code: A

Zip: 27103 County: 34 Forsyth

Time In: 01 : 40 ^{am} _{pm} Time Out: 05 : 00 ^{am} _{pm}

Permittee: FREEBIRD ENTERPRISES, LLC

Total Time: 3 hrs 20 minutes

Telephone: (336) 659-9229

Category #: IV

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: 4

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			<u>2</u>	<u>0</u>	<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			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion			<u>3</u>	<u>13</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Preventing Contamination by Hands .2652, .2653, .2655, .2656										
6	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed			<u>4</u>	<u>2</u>	<u>0</u>	<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			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
8	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Approved Source .2653, .2655										
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Protection from Contamination .2653, .2654										
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			<u>3</u>	<u>0</u>	<u>0</u>	<input type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653										
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records			<u>2</u>	<u>1</u>	<u>0</u>	<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			<u>1</u>	<u>03</u>	<u>0</u>	<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			<u>3</u>	<u>13</u>	<u>0</u>	<input type="checkbox"/>
Chemical .2653, .2657										
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			<u>2</u>	<u>1</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<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			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods			<u>1</u>	<u>03</u>	<u>0</u>	<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			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Food Identification .2653										
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			<u>2</u>	<u>1</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Proper Use of Utensils .2653, .2654										
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			<u>0</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			<u>1</u>	<u>03</u>	<u>0</u>	<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			<u>0</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
46	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			<u>1</u>	<u>03</u>	<u>0</u>	<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			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed			<u>2</u>	<u>1</u>	<u>0</u>	<input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used			<u>1</u>	<u>03</u>	<u>0</u>	<input type="checkbox"/>
Total Deductions: <u>6</u>										



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Establishment Name: MOE'S SOUTHWEST GRILL

Location Address: 2021 GRIFFITH RD SUITE 100

City: WINSTON SALEM State: NC

County: 34 Forsyth Zip: 27103

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

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

Permittee: FREEBIRD ENTERPRISES, LLC

Telephone: (336) 659-9229

Establishment ID: 3034012098

☒ Inspection ☐ Re-Inspection Date: 03/07/2018

Comment Addendum Attached? ☐ Status Code: A

Category #: IV

Email 1: bryan@moesday.com

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
Servsafe	ArmellP. 12/21/21	0	Ckd corn	walk in cooler	36	Hot water	3 compartment sink	131
Rice	hot holding	160	Sour cream	walk in cooler	39			
Pinot beans	hot holding	154	Shd lettuce	make unit	39			
Chicken	hot holding	160	Tofu	hot holding	141			
Beef	hot holding	122	Raw beef	reach in cooler	35			
Cheese	hot holding	170	Queso	hot holding	156			
Rice	hot holding	199	Quat	3 compartment sink	200			
Dcd tom	walk in cooler	48	Quat	sanitizer bucket	200			

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.

- 6 2-301.14 When to Wash - P 0 points. Employee removed on glove then wiped the hot holding unit with wet wiping cloth from the sanitizing bucket. Employee then grabbed a single-use glove. Employee was stopped and asked to wash hands before placing on food handling glove. The employee used clean hand to turn off the handles of the faucet at the handwashing sink in the front service area then grabbed disposable towels. CDI: Employee washed hands then used disposable towel to turn off the faucet of the handwashing sink. ✓ Spell
- 8 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF 0 points. Metal container inside the handwashing sink at the front counter. Handwashing sink may not be used for purposes other than handwashing. CDI: Metal container was removed.
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P Repeat. Can opener, vegetable cutter, blender, spoon, and ladle were soiled. Three plastic containers with white sticker on the container on the clean shelf. Equipment food-contact surfaces and utensils shall be clean to sight and touch. CDI: All items taken to the 3 compartment sink.

Lock
Text



Person in Charge (Print & Sign): Kevin First Last Periman

Regulatory Authority (Print & Sign): Jill First Last Sakamoto REHSI

REHS ID: 2685 - Jill Sakamoto

[Signature]

[Signature]

Verification Required Date: 03 / 17 / 2018

REHS Contact Phone Number: (336) 703 - 3137



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- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P 0 points. Beef 122 F stacked on top other bags inside the hot holding unit. Hot holding, potentially hazardous foods shall be maintained at 135 F or greater. CDI: Beef cooling down in the walk in cooler unit 32 F at 4:34pm until reheating for hot holding. Spoke with person in charge to reheat to 165 F or greater.
- 31 3-501.15 Cooling Methods - PF Repeat. Diced tomatoes 47 F - 48 F in deep, covered container in the walk in cooler. When placed in cooling or cold holding equipment, food containers shall be loosely covered, or uncovered if protected from overhead contamination during the cooling period to facilitate heat transfer from the surface of the food. CDI: Person in charge loosely covered the container of diced tomatoes in the walk in cooler.
- 41 3-304.12 In-Use Utensils, Between-Use Storage - C Repeat. Handle of the scooper touching the chips in the metal bin occurred twice during the inspection. Utensils shall be stored in a clean, protected location if the utensil are used only with food that is not potentially hazardous. CDI: Person in charge placed the scooper on tray.
- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C Repeat. Stack of plastic containers stored wet on shelf and stacks of metal pans stored wet on tray and shelf. Sanitized equipment and utensils shall be completely air-dried prior to stacking.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C Repeat. Rusted/flaking shelving throughout the establishment, including walk in cooler, equipment storage, and reach in cooler. One door missing to the chip metal bin at the front counter and caulk hanging in the hood system. Equipment shall be maintained in good repair.
- 46 4-302.14 Sanitizing Solutions, Testing Devices - PF No quat test strips available. A test kit or other device that accurately measures the concentration of sanitizing solutions shall be provided. Verification required for quat test strips by March 17, 2018. Please contact Jill Sakamoto at 336-703-3137 and/or sakamojm@forsyth.cc.
- 49 5-205.15 (B) System maintained in good repair - C One toilet filled to the rim with water in the women's restroom. Plumbing system shall be maintained in good repair.



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- 53 6-201.12 Floors, Walls, and Ceilings, Utility Lines - C 0 points. Electrical line across the front of the handwashing sink at the front counter. Utility service lines and pipes may not be unnecessarily exposed. CDI: Electrical line was rearranged as a temporary fix.
- //6-201.13 Floor and Wall Junctures, Coved, and Enclosed or Sealed - C No coved base in the men's and women's restroom. Floor and wall junctures shall be coved and closed to no larger than 1 mm (one thirty-second inch).
- //6-201.11 Floors, Walls and Ceilings-Cleanability - C Low grout between the tiles in the front counter area and warewashing area. Cracked/damaged tiles in the establishment. Floors, walls, floors coverings, and wall coverings shall be easily cleanable and smooth.
- 54 6-303.11 Intensity-Lighting - C 0 points. Repeat. Lighting 6 to 13 foot candles at the handwashing sink, urinal, and toilet in the men's restroom and 13 foot candles at the toilet in the women's restroom. Lighting shall be at least 20 foot candles in areas used for handwashing and in toilet rooms.

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