T (<u> </u>	<u>)U</u>	E	<u>.SI</u>	<u>labiishment inspection</u>	<u> Re</u>	<u> </u>	l						SC	ore:	90	ა.ე)
Establishment Name: FOOD LION PRODUCE #348					Establishment ID: 3034020812													
ocation Address: 3197 PETERS CREEK PARKWAY																		
Cit	City: WINSTON SALEM State: NC						Date: <u>Ø 9</u> / <u>1 1</u> / <u>2 Ø 1 9</u> Status Code: A											
Zip: 27127 County: 34 Forsyth							Time In: $12:40\%$ pm Time Out: $01:55\%$ pm											
Permittee: FOOD LION, LLC							Total Time: 1 hr 15 minutes											
	Telephone: (336) 788-8098					Category #: II												
							C) (a	FDA Establishment Type: Produce Department and Salad Bar										
	Vastewater System: ⊠Municipal/Community ☐ On-Site Sys					•	No. of Risk Factor/Intervention Violations: 1											
Water Supply: □ Municipal/Community □ On-Site Supply No. of Repeat Risk Factor/Intervention Violations:																		
Foodborne Illness Risk Factors and Public Health Interventions Good Retail Practices																		
Risk factors: Contributing factors that increase the chance of developing foodborne illness. Good Retail Praction								tices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.										
P		_	alth I	_	ventions: Control measures to prevent foodborne illness or		lopil p	J.//5	H	/	0117		NIO		OUT	\Box_{α}	D. D	Jun
S		rvisi		N/O	Compliance Status .2652	OUT	CDI R	VK		IN C				ater .2653, .2655, .2658	OUT	CI	DI K	VR
\neg					PIC Present; Demonstration-Certification by accredited program and perform duties	2 0			28	$\overline{}$	$\overline{}$	X		Pasteurized eggs used where required	1 0.5	0 [
E	mpl	oye	e He	alth	.2652				29	X				Water and ice from approved source	21	0	1	
2	X				Management, employees knowledge; responsibilities & reporting	3 1.5 0			30	-		×		Variance obtained for specialized processing	1 0.5	0	1	
3	X				Proper use of reporting, restriction & exclusion	3 1.5 0			\perp				atur	methods e Control .2653, .2654				
$\overline{}$		Ну	gien	ic Pı	ractices .2652, .2653				31	X				Proper cooling methods used; adequate equipment for temperature control	1 0.5	0		
\rightarrow	×	Ш			Proper eating, tasting, drinking, or tobacco use	210	Щ		32			X		Plant food properly cooked for hot holding	1 0.5	0 [
_	X				No discharge from eyes, nose or mouth	1 0.5 0			33			X		Approved thawing methods used	1 0.5	0 [1	
\neg	reve X	ntin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656 Hands clean & properly washed	420		10	34	×	П			Thermometers provided & accurate	1 0.5	0 [7/-	$\frac{1}{1}$
\dashv	X				No bare hand contact with RTE foods or pre-					od I	lden	tific	atio	on .2653				
\rightarrow	-			Ш	approved alternate procedure properly followed				35	X				Food properly labeled: original container	21	0		
_	Nnr/		1 50	urce	Handwashing sinks supplied & accessible 2.2653, .2655	2 1 0			$\overline{}$	$\overline{}$	ntio	n of	Foo	od Contamination .2652, .2653, .2654, .2656, .265	TTT	Ţ		
\neg	Σ 	Dvec	1 30	uice	Food obtained from approved source	210			36	X				Insects & rodents not present; no unauthorized animals	21	0		
10				X	Food received at proper temperature	210			37	×				Contamination prevented during food preparation, storage & display	21	0 [
\dashv	X				Food in good condition, safe & unadulterated	210			38		×			Personal cleanliness	1 0.5	X [
12			X	П	Required records available: shellstock tags,	210			39	X				Wiping cloths: properly used & stored	1 0.5	0		
	rote	ctio		om C	parasite destruction Contamination .2653, .2654			1	40	X				Washing fruits & vegetables	1 0.5	0 [
$\overline{}$	X				Food separated & protected	3 1.5 0				_	$\overline{}$	e of	Ute	ensils .2653, .2654		中		
14		X			Food-contact surfaces: cleaned & sanitized	3 🗙 0	X	d	41	×				In-use utensils: properly stored	1 0.5	0 [][
\dashv	×				Proper disposition of returned, previously served,	210		d	42	×				Utensils, equipment & linens: properly stored, dried & handled	1 0.5	0		
		ntiall	ly Ha	azar	reconditioned, & unsafe food dous Food TIme/Temperature .2653				43	×				Single-use & single-service articles: properly stored & used	1 0.5	0 [
16			×		Proper cooking time & temperatures	3 1.5 0			44	X				Gloves used properly	1 0.5	0 [
17			X		Proper reheating procedures for hot holding	3 1.5 0			Ut	ensi	ils a	nd E	Equ	ipment .2653, .2654, .2663		<u></u>	Ţ.	
18				×	Proper cooling time & temperatures	3 1.5 0			45	X				Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	21	0 [
19			×		Proper hot holding temperatures	3 1.5 0			46	×				Warewashing facilities: installed, maintained, &	1 0.5	0 [1	
20	×				Proper cold holding temperatures	3 1.5 0			47	\rightarrow	\mathbf{X}			used; test strips Non-food contact surfaces clean	1 0.5	X [7/-	
21	X				Proper date marking & disposition	3 1.5 0				nysio		acil	litie					
22	П		×	П	Time as a public health control: procedures &	210	ПГ	怞	48	X				Hot & cold water available; adequate pressure	21	0		
С	ons	ume		dviso	records			7	49	X				Plumbing installed; proper backflow devices	21	0 [
23			X		Consumer advisory provided for raw or undercooked foods	1 0.5 0			50	X				Sewage & waste water properly disposed	21	0 [
Н	ighl	y Sı		ptib	le Populations .2653 Pasteurized foods used; prohibited foods not				51	×				Toilet facilities: properly constructed, supplied & cleaned	1 0.5	ō [1	
24			×		offered	3 1.5 0			52	-				Garbage & refuse properly disposed; facilities	1 0.5		7/-	
\neg	hen X	nical			.2653, .2657 Food additives: approved & properly used	1 0.5 0			53	-	×	•		maintained Physical facilities installed, maintained & clean	1 0.5	_	7 -	
\rightarrow	X				Toxic substances properly identified stored, & used	210	\vdash	1 [\vdash	\rightarrow				Meets ventilation & lighting requirements; designated areas used	1 0.5	_		
_)rm:		wit	h Approved Procedures .2653, .2654, .2658	الااللالكا		1111	54		Ш			designated areas used	LU [U.3]	ᆈᆫ	-11-	
27			×		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	210								Total Deductions:	1.5			
_1						للللل	\vdash											



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		EStablishinent inspection Re	port						
Establishment Name: FOOD LION PRO	DUCE #348	Establishment ID: 3034020812							
Location Address: 3197 PETERS CREIC City: WINSTON SALEM	EK PARKWAY State: NC								
County: 34 Forsyth	Zip: ²⁷¹²⁷		ategory #:						
Wastewater System: Municipal/Community Water Supply: Municipal/Community Permittee: FOOD LION, LLC	On-Site System	Email 1: laura.tubbs@retailbusinessservices.com Email 2:							
Telephone: (336) 788-8098		Email 3:							
r diaphiente.	Temperature								
Cold	•								
	emp Item Location	re is now 41 Degrees or less Temp Item Locat	tion Temp						
grape walk in 40)								
water 3 comp 12	23								
quat 3 comp 30	00								
quat hose 20	00								
veggie wash sink (25-60 is ok) 50)								
	Observations and (
		ames below, or as stated in sections 8-405.11 of the oped cutting board in sanitizer solution and d							
accordance with manufacturers in back into solution. // 4-601.11 (A)	structions when using chem Equipment, Food-Contact S le matter. Mandolin with sma	D-CONTACT SURFACES and UTENSILS slical sanitization processes. CDI-Education a urfaces, Nonfood-Contact Surfaces, and Uteall rust spots. Food contact surfaces shall be	and cutting board placed ensils - P- One knife						
such as hats, hair coverings or ne	ts, beard restraints, and clot	e without hair restraint. Food employees sha hing that covers body hair, that are designed it, utensils and linens; and unwrapped single	d and worn to effectively						
47 4-601.11 (B) and (C) Equipment, station and wrap station. Minor cl		nfood-Contact Surfaces, and Utensils - C- Cl in walk in cooler.	ean table behind wrap						
Lock Text									
Dorson in Chargo (Drint & Sign). Jeff	First Puckett	Last							
Person in Charge (Print & Sign): ^{Jeπ}		CM BOD							
Regulatory Authority (Print & Sign): Nora	<i>First</i> Sykes	Last							
REHS ID: 2664	1 - Sykes, Nora	Verification Required Date:	/ /						
REHS Contact Phone Number: (3 3	<u> </u>	vsaddon required bate.	_· ′						

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program

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Page 2 of _____ Food Establishment Inspection Report, 3/2013



Establishment Name: FOOD LION PRODUCE #348 Establishment ID: 3034020812

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.



6-501.12 Cleaning, Frequency and Restrictions - C- Floor cleaning needed in cooler and in produce room, especially around parameter and under shelving.





Establishment Name: FOOD LION PRODUCE #348 Establishment ID: 3034020812

Observations and Corrective Actions
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Observations and Corrective Actions

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