

# Food Establishment Inspection Report

Score: 97.5

Establishment Name: BURGER KING

Establishment ID: 3034012170

Location Address: 3571 PARKWAY VILLAGE CIR

Inspection  Re-Inspection

City: WINSTON SALEM

State: NC

Date: 11 / 05 / 2019 Status Code: A

Zip: 27127 County: 34 Forsyth

Time In: 09 : 40  am  pm Time Out: 11 : 20  am  pm

Permittee: CARROLS LLC BK

Total Time: 1 hr 40 minutes

Telephone: (336) 788-6430

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: 0

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
<b>Supervision</b> .2652								
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	0		
<b>Employee Health</b> .2652								
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13	0	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13	0	
<b>Good Hygienic Practices</b> .2652, .2653								
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	0	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03	0	
<b>Preventing Contamination by Hands</b> .2652, .2653, .2655, .2656								
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2	0	
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	13	0	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1	0	
<b>Approved Source</b> .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	
<b>Protection from Contamination</b> .2653, .2654								
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13	0	
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	13	0	
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0	
<b>Potentially Hazardous Food Time/Temperature</b> .2653								
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures	3	13	0	
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13	0	
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13	0	
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13	0	
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13	0	
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13	0	
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time as a public health control: procedures & records	2	1	0	
<b>Consumer Advisory</b> .2653								
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	03	0	
<b>Highly Susceptible Populations</b> .2653								
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13	0	
<b>Chemical</b> .2653, .2657								
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food additives: approved & properly used	1	03	0	
26	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	0	0	
<b>Conformance with Approved Procedures</b> .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
<b>Safe Food and Water</b> .2653, .2655, .2658								
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	1	03	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	03	0	
<b>Food Temperature Control</b> .2653, .2654								
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	1	03	0	
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03	0	
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	03	0	
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03	0	
<b>Food Identification</b> .2653								
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1	0	
<b>Prevention of Food Contamination</b> .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	03	0	
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03	0	
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03	0	
<b>Proper Use of Utensils</b> .2653, .2654								
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03	0	
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03	0	
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	0	03	0	
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03	0	
<b>Utensils and Equipment</b> .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	0	
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03	0	
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	03	0	
<b>Physical Facilities</b> .2654, .2655, .2656								
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	2	1	0	
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	0	
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	03	0	
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03	0	
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	0	0	
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03	0	
<b>Total Deductions:</b>					2.5			



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 County: 34 Forsyth Zip: 27127  
 Wastewater System:  Municipal/Community  On-Site System  
 Water Supply:  Municipal/Community  On-Site System  
 Permittee: CARROLS LLC BK  
 Telephone: (336) 788-6430

Establishment ID: 3034012170  
 Inspection  Re-Inspection Date: 11/05/2019  
 Comment Addendum Attached?  Status Code: A  
 Water sample taken?  Yes  No Category #: II  
 Email 1:  
 Email 2:  
 Email 3:

## Temperature Observations

**Cold Holding Temperature is now 41 Degrees or less**

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
11-19-22	Rebecca Kuzniak	0	chicken	hot hold	136			
lettuce	walk in	40						
sauce	walk in	37						
water	3 comp	142						
quat	3 comp	200						
chicken	hot hold	127						
sausage	hot hold	131						
hash brown	hot hold	140						

## 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 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P- A few dishes in clean storage soiled. Food contact surfaces shall be clean to sight and touch. CDI-Moved to sink to be washed. ✓ Spell
- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P- Chicken at 127F and sausage at 131F in hot holding equipment. Manager stated that equipment has not been holding properly and a call has been made for repair. Check temperatures frequently to ensure that all potentially hazardous foods are maintained at 135F or greater at all parts of the food. CDI-Food discarded.
- 26 7-202.12 Conditions of Use - P,PF- Chlorine veggie wash solution being used to wash tomatoes. Instructions state that a potable water rinse is required after using the product. Converstiaon and observation found that establishment is not rinsing after chlorine soak. Poisonous or toxic materials shall be used according to manufacturer's use directions included in labeling. CDI-Sink drained of solution and tomatoes rinsed with fresh, potable water. Change proceure.

Lock Text

Person in Charge (Print & Sign): Becky *First* Kuzniak *Last*  
 Regulatory Authority (Print & Sign): Nora *First* Sykes *Last*

*Becky Kuzniak*  
 \_\_\_\_\_  
*Nora Sykes*  
 \_\_\_\_\_

REHS ID: 2664 - Sykes, Nora

Verification Required Date:     /     /    

REHS Contact Phone Number: ( 3 3 6 ) 7 0 3 - 3 1 6 1



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program  
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- 39 3-304.14 Wiping Cloths, Use Limitation - C- Two buckets of wet cloths in ineffective solution. Once wet, wiping cloths shall be held in an effective sanitizing solution, and maintained clean. CDI-Changed buckets.
- 43 4-904.11 Kitchenware and Tableware-Preventing Contamination - C- REPEAT- Eight stacks of cups at both the drive thru window and at side of ice cream machine have plastic pulled down, exposing the lip contact portion of the cups to potential contamination. Single service utensils shall be handled, displayed, and dispensed so that contamination of food and lip contact surfaces is prevented. Keep plastic pulled up on cups, or use approved dispensers.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C- Gasket torn on walk in freezer door. Drink machine at drive through functions with ice bin open. Maintain equipment in good repair.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C- REPEAT-Additional cleaning needed on storage shelving, and on unused drink cup dispensers at drive through. Maintain nonfood contact surfaces clean.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C-REPEAT-Clean wall around and behind 3 compartment sink. Clean floors and walls under and behind shelving in dry storage. Clean all drains. Maintain facilities clean. //6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C & 6-201.11 Floors, Walls and Ceilings-Cleanability - C REPEAT- Remove old/soiled caulk and recaulk the 3 compartment sink to wall. Replace missing base and corner cove tiles at 3 comp sink. A few cracked tiles behind drink machine at drive through. Tiles cracked at mop sink. Maintain facilities to be smooth and easily cleanable and in good repair.
- 54 6-303.11 Intensity-Lighting - C- Light measured 4 foot candles (fc) in walk in freezer (light out). Increase to 10fc.



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✓  
Spell



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