F	00	od	E	S	tablishment Inspection	R	Re	<b>p</b>	10	rt							S	Score	: _9	<u> 94</u>		
Es	tal	olis	hn	nei	nt Name: GRAYLYN DINING ROOM										Е	sta	ablishment ID: 3034010148					
					ress: 1900 REYNOLDA ROAD												X Inspection ☐ Re-Inspection					
Ci	ty:	WI	NS	101	N-SALEM	St	ate	e: _	NC							0	02/13/2017 Status Code: A					
	-	27′			County: 34 Forsyth									Tir	me	In	: <u>1 ∅</u> : 3 ∅ ⊘ am Time Out: <u>1 </u> 2 :	45	o a So r	ım m		
Permittee: WAKE FOREST UNIVERSITY								Total Time: 2 hrs 15 minutes														
				_	(336) 758-2600								_ (	Ca	ite	go	ry #: _IV			_		
					System: Municipal/Community [		)n	_Qi	tο	Sv	ete	m					stablishment Type: Full-Service Restaura					
					y: ⊠Municipal/Community □ On-					-	Sic	,111					Risk Factor/Intervention Violations:			1		
_	alt	: I 3	up	)Pi	y. Municipal/Confindinty USh-	Sit	C \	Ju	ρþi	у				Nc	). C	)† F	Repeat Risk Factor/Intervention Vic	olatio	ns:			_
ı					ness Risk Factors and Public Health Int		-		_								Good Retail Practices					
Risk factors: Contributing factors that increase the chance of developing food  Public Health Interventions: Control measures to prevent foodborne illness of												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	c	UT	СІ	DI R	VR	╁	IN	0	UT	N/A	N/O	Compliance Status	01	JT	CDI	R	VR
Ş	Supe	rvisi	ion		.2652				Ţ		:	Safe	Fo	$\overline{}$	$\overline{}$	W t	ater .2653, .2655, .2658		Ţ			
1	X			<u> </u>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	[	0	][		2	8 🗆	] [	]	×		Pasteurized eggs used where required	10	.5 0			
		oye	e He	alth	.2652 Management, employees knowledge;		1 6		TE	1	2	9 🗵	3 [	]			Water and ice from approved source	2	0			
2	X				responsibilities & reporting	الكال	1.5			1 -	3	0 🗆			×		Variance obtained for specialized processing methods	1	.5 0			
3			nion	ic D	Proper use of reporting, restriction & exclusion ractices .2652, .2653	3	1.5		<u> </u>	<u> </u>	┱		$\overline{}$	$\overline{}$	pera		e Control .2653, .2654		Ŧ			
	×		gien	IC F	Proper eating, tasting, drinking, or tobacco use	2	1	0 [	76	1	ìl⊢	1 [	+	×			Proper cooling methods used; adequate equipment for temperature control		+	×		+
⊢	×				No discharge from eyes, nose or mouth	1	0.5	0	1	1	3	2 🗆	] [	1		X	Plant food properly cooked for hot holding		_			+-
_			g C	onta	mination by Hands .2652, .2653, .2655, .2656		7				3	3 🗆	] [	]		X	Approved thawing methods used	1 0	.5 0			
6	X				Hands clean & properly washed	4	2	0	][	][	3	4 🗵	3 [	<u> </u>			Thermometers provided & accurate	1	.5 0			
7				×	No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3	1.5	0			ш⋿	Foo	$\overline{}$	$\overline{}$	tific	atio						
8	×				Handwashing sinks supplied & accessible	2	1	0 [			ıl 🛏	5 C		XI tior	n of	For	Food properly labeled: original container od Contamination .2652, .2653, .2654, .2656, .2		1 🗶	1	Ш	L
ŀ	\ppr	oved	d So	urce	.2653, .2655							6 🗵	$\overline{}$		1 01	100	Insects & rodents not present; no unauthorized	- $           -$	1 0		П	П
9	X				Food obtained from approved source	2	1	0			]  -	7 [	+	_   			animals  Contamination prevented during food	2	1			F
10				×	Food received at proper temperature	2	1	0			Ⅱ⊢	8 🗵	+	<u>~</u>			preparation, storage & display  Personal cleanliness		+		-	H
11	×				Food in good condition, safe & unadulterated	2	1	0			Ⅱ⊢	9 🗵	+	#			Wiping cloths: properly used & stored	-++	-			H
12			X		Required records available: shellstock tags, parasite destruction	2	1	0			IJ⊢	+	+	_					.5 0	-		H
_				_	Contamination .2653, .2654		Ţ		Ţ		IJ⊢	0 🗵		He	⊔ o of	Htc	Washing fruits & vegetables ensils .2653, .2654		.5 0			L
-		×			Food separated & protected	3	X	0	4 2			1 🔀	$\overline{}$		C UI	Ulc	In-use utensils: properly stored	1	.5 0	П	П	П
14	X				Food-contact surfaces: cleaned & sanitized	3	1.5	0 [			⊢	2 🔀	+	7			Utensils, equipment & linens: properly stored,		.5 0			F
_	X			L	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1	0			∥⊢	3 🔀	+	7			dried & handled Single-use & single-service articles: properly					E
	$\overline{}$	ntial	ly Ha	_	dous Food Time/Temperature .2653				1	1	٦⊢	_	+	4			stored & used			+		H
16	H			X	Proper cooking time & temperatures	3	7				┵	4 X	ㅗ	 c_a	nd F	au	Gloves used properly ipment .2653, .2654, .2663	1	.5 0			L
17				X	Proper reheating procedures for hot holding	Н	1.5	#			46	Т	Т	Т	IIU L	_qu	Equipment, food & non-food contact surfaces	2	1 6			П
$\vdash$	×			닏	Proper cooling time & temperatures		1.5				4	5 🗆	J   6	X			approved, cleanable, properly designed, constructed, & used		1 🗶	╙	Ш	Ľ
┢	×				Proper hot holding temperatures		1.5	#			4	6 🗵		]			Warewashing facilities: installed, maintained, & used; test strips	10	.5 0			
20	×				Proper cold holding temperatures	3	1.5	7	4		4	7 🗵	<b>1</b> [	<u> </u>			Non-food contact surfaces clean	10	.5 0			
21		X			Proper date marking & disposition	3	X	0 2	4		1 =	Phy:	$\overline{}$	$\overline{}$	$\overline{}$	ities	, ,	Iraali		F		
22			×		Time as a public health control: procedures & records	2	1	0 [			'l⊢	8 🗵	_	_			Hot & cold water available; adequate pressure	2	110			L
		ume	er Ad	dvis					7	1	∄⊢	9 🗆	+	<b>X</b>			Plumbing installed; proper backflow devices	2		+		
_	X   ligh		ISCE	ntih	Consumer advisory provided for raw or undercooked foods le Populations .2653	النا	J.3		기느	<u> </u>	ĭ⊢	0 🗵	+	4			Sewage & waste water properly disposed  Toilet facilities: properly constructed, supplied	-				$\perp$
24			X	Pano	Pasteurized foods used; prohibited foods not offered	3	1.5	0 [	JE	TE	5	1 🛚		1			& cleaned	10	.5 0			$\mathbb{P}$
		nical			.2653, .2657						5	2 🗆		X			Garbage & refuse properly disposed; facilities maintained	1	0		X	
25			X		Food additives: approved & properly used	1	0.5	0 [			5	3 🗆		X			Physical facilities installed, maintained & clean	1	0		X	
26	×				Toxic substances properly identified stored, & used	2	1	0 [			5	4 🗵		J			Meets ventilation & lighting requirements; designated areas used	10	.5 0			



27 🗆 🗆 🗷

Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan

Conformance with Approved Procedures .2653, .2654, .2658



**Total Deductions:** 

Establishme	ent Name: GRAYLYN I	DINING RO	OM	Establishment ID: 3034010148										
	Address: 1900 REYNOL TON-SALEM	DA ROAD	St	ate: NC	•		Re-Inspection Attached?	Date: <u>02/13/2017</u> Status Code: <u>A</u>						
County: 34				atc	Comment	/ laachaan	Milderied:	Category #: _!						
Wastewater Supply	System: Municipal/Comy: Municipal/Com	munity 🗌 (	On-Site System		Email 1:									
	WAKE FOREST UNIVI	ERSITY				Email 2:								
Telephone	e: (336) 758-2600				Email 3:	Email 3:								
			Tempe	erature C	Observations									
Item marinara	Location hot hold	Temp 187	Item quat (ppm)	Location 3-compa	tment sink	Temp 200	Item I	Location	Temp					
artichoke	walk-in cooler	37	hot water	dish mac	hine	164								
mushrooms	walk-in cooler	38	Winfield	7-15-19 €	exp.	0								
baked apples	cooling	89												
cooked onion	cooling	50												
chili	upright cooler	40												
ambient air	upright cooler	35												
hot water	3-compartment sink	149												
crab (2/4) and had y	Ready-To-Eat Potentia , roasted red peppers vet to be discarded. All on if held at 41F or bel	(2/2), chic ready-to-	cken salad (2/ eat potentially	2), and tomy hazardou	nato sauce (2 s foods mus	2/4) all we	ere prepared more	e than 7 days prev						
with plasti	Cooling Methods - PF ic wrap while they wer at are cooling must be	e cooling.	Manager stat	ted items w	ere placed i	n walk-in	cooler to cool les	s than an hour pre						
Person in Cha	rge (Print & Sign):	<i>Fi.</i> /infield	rst	Lawton	Last	La	mater 2	Infel	<b>J</b> }/					
		<i>Fi</i> ndrew	rst		Last		<i>i</i> 1	D	•					

REHS ID: 2544 - Lee, Andrew

Verification Required Date: Ø 2 / 23 / 2017

REHS Contact Phone Number: (336)703 - 3128



Regulatory Authority (Print & Sign): Andrew



Establishment Name: GRAYLYN DINING ROOM Establishment ID: 3034010148

#### **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.



35 3-302.12 Food Storage Containers Identified with Common Name of Food - C - Flour and sugar bins in dry storage area not labelled. All containers of ingredients that are not "readily identifiable" must be labelled. 0 pts.

37 3-305.11 Food Storage-Preventing Contamination from the Premises - C - Several boxes of food stored underneath shelves on the floor of the walk-in freezer. Food must be stored at least 6 inches off the floor. 0 pts.

4-501.11 Good Repair and Proper Adjustment-Equipment - C - Torn gasket present on walk-in freezer and several shelves in walk-in cooler have began to rust. Replace torn gasket and rusted shelves. 0 pts.

5-203.14 Backflow Prevention Device, When Required - P - 3 coffee brewers do not have evident backflow prevention devices on water lines. VR - Check spec sheets to determine if machines have internal backflow prevention. If internal backflow prevention is not present install ASSE 1022 backflow preventers on each individual water line to each piece of equipment. Complete by 2-23-17 and contact Andrew Lee at (336) 703-3128 when completed.

5-501.114 Using Drain Plugs - C - Repeat - Dumpsters do not have drain plugs. Contact waste management company to install drain plugs on both dumpsters.

6-201.11 Floors, Walls and Ceilings-Cleanability - C - Repeat - Handsink beside prep table needs to be recaulked to wall and grout between floor tiles is worn in some areas. Physical facilities shall be in good repair and be easily cleanable. // 6-501.12 Cleaning, Frequency and Restrictions - C - Mold beginning to form on wall behind dish machine drainboard. Physical facilities shall be kept clean.



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52



Establishment Name: GRAYLYN DINING ROOM Establishment ID: 3034010148

Observations and Corrective Actions
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Establishment Name: GRAYLYN DINING ROOM Establishment ID: 3034010148

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Establishment Name: GRAYLYN DINING ROOM Establishment ID: 3034010148

### **Observations and Corrective Actions**

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