

# Food Establishment Inspection Report

Score: 95.5

Establishment Name: 2 BROTHERS

Establishment ID: 3034020319

Location Address: 901 WAUGHTOWN ST.

Inspection  Re-Inspection

City: WINSTON SALEM

State: NC

Date: 02 / 15 / 2017 Status Code: A

Zip: 27107

County: 34 Forsyth

Time In: 01 : 10 <sup>am</sup> <sub>pm</sub> Time Out: 03 : 05 <sup>am</sup> <sub>pm</sub>

Total Time: 1 hr 55 minutes

Permittee: ANDRAOS BROTHERS CORP.

Category #: III

Telephone: (336) 650-1225

FDA Establishment Type: Fast Food Restaurant

Wastewater System:  Municipal/Community  On-Site System

No. of Risk Factor/Intervention Violations: 2

Water Supply:  Municipal/Community  On-Site Supply

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	<input type="checkbox"/>	<input type="checkbox"/>
<b>Employee Health</b> .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"/>
<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	<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"/>
<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	<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"/>
<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	<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"/>
<b>Protection from Contamination</b> .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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized			3	1.5	0	<input 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"/>
<b>Potentially Hazardous Food Time/Temperature</b> .2653										
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures			3	1.5	0	<input type="checkbox"/>
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding			3	1.5	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures			3	1.5	0	<input type="checkbox"/>
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures			3	1.5	0	<input checked="" 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"/>
<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	0.5	0	<input type="checkbox"/>
<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	1.5	0	<input type="checkbox"/>
<b>Chemical</b> .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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used			2	1	0	<input checked="" type="checkbox"/>
<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	<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
<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	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"/>
<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	0.5	0	<input type="checkbox"/>
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate			1	0.5	0	<input checked="" type="checkbox"/>
<b>Food Identification</b> .2653										
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container			2	1	0	<input type="checkbox"/>
<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	<input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display			2	1	0	<input type="checkbox"/>
38	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness			1	0.5	0	<input checked="" type="checkbox"/>
39	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored			1	0.5	0	<input checked="" type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables			1	0.5	0	<input type="checkbox"/>
<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	0.5	0	<input type="checkbox"/>
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled			1	0.5	0	<input type="checkbox"/>
43	<input type="checkbox"/>	<input checked="" 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"/>
<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	<input 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean			1	0.5	0	<input type="checkbox"/>
<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	<input type="checkbox"/>
49	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			2	1	0	<input checked="" 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 type="checkbox"/>	<input checked="" 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	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean			1	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	0	<input checked="" type="checkbox"/>
<b>Total Deductions:</b>							<b>4.5</b>			



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Inspection  Re-Inspection Date: 02/15/2017

City: WINSTON SALEM State: NC

Comment Addendum Attached?  Status Code: A

County: 34 Forsyth Zip: 27107

Category #: III

Wastewater System:  Municipal/Community  On-Site System

Email 1:

Water Supply:  Municipal/Community  On-Site System

Email 2:

Permittee: ANDRAOS BROTHERS CORP.

Email 3:

Telephone: (336) 650-1225

## Temperature Observations

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
ranch	cold hold	41						
potato	final cook	195						
quat sanitizer	three comp sink	200						
hot water	three comp sink	143						
ambient	upright	42						
ambient	upright	34						
servsafe	Amanda Andraos	00						

## 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.

- 19 3-501.16 (A)(1) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P: Potato wedges 126-146F, chicken gizzards 127-140F, and chicken livers 128-130F. Potentially hazardous foods shall be maintained at 135F and above. CDI: Potato wedges discarded. Chicken gizzards reheated to 204F and chicken livers reheated to 167F. Recommend time as a public health control for items not holding temperature well. See NC Food Code citation of 3-501.19 for description of requirements.
- 26 7-201.11 Separation-Storage - P: 0 pts. Greased lightning stored next to ranch dressings. Maintain chemicals stored to prevent contamination of food. CDI: Bottle moved to chemical storage rack.
- 34 4-302.12 Food Temperature Measuring Devices - PF: 0 pts. Thermometers not present in either upright cooler. Provide thermometers inside of refrigeration at warmest part of refrigerator to ensure accuracy of internal temperature. Verification is required by 2-25-17 to Michelle Bell at 336-703-3141 or bellmi@forsyth.cc.



Person in Charge (Print & Sign): Amanda <sup>First</sup> Andraos <sup>Last</sup>

Regulatory Authority (Print & Sign): Michelle <sup>First</sup> Bell REHS <sup>Last</sup>

REHS ID: 2464 - Bell, Michelle

Verification Required Date: 02 / 25 / 2017

REHS Contact Phone Number: ( 336 ) 703 - 3141



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- 38 2-402.11 Effectiveness-Hair Restraints - C: REPEAT: Food employee not wearing hair restraint at beginning of inspection. Effective hair restraints shall be worn by food employees. CDI: Employee donned restraint.
- 39 3-304.14 Wiping Cloths, Use Limitation - C: 0 pts. Two wet wiping cloths laying on surfaces. Wiping cloths, once wet, shall be stored submerged in an effective sanitizer solution or moved to soiled linen when finished with cloths. CDI: Towels moved to soiled linen bag.
- 42 4-903.11 (A), (B) and (D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C: 0 pts. Paper towel dispenser mounted over sanitizer drainboard at three comp sink. Move paper towel dispenser within splash of handsink to prevent contamination of clean equipment from splash.
- 43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C: 0 pts. Single service cups and filter powder stored in outside carwash. Single service articles and filter powder shall be stored in finished (floors, walls, ceilings with coved base and 20 ftd of lighting) and permitted spaces only to avoid contamination from premises/dust/etc. CDI: All articles moved inside in permitted, finished space.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C: 0 pts. Prep shelving holding buns chipping paint from legs. Re-caulk inside hood where caulk is drooping. Shelving chipping around brackets in upright cooler. Equipment shall be maintained in good repair.
- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C: . 0 pts. Light accumulation of grease on outside of one fryer and underneath portions of fryers. Maintain nonfood contact surfaces clean.
- 49 5-203.14 Backflow Prevention Device, When Required - P: Shut-off valves under splitter at mopsink have been added, with chemical tower on one side and open-ended hose on other side. Install atmospheric backflow preventer underneath shut-off valve on side with open-ended hose and maintain hose without pistol grip while in storage. Verification of installation required by 2-25-17 To Michelle Bell at 336-703-3141 or bellmi@forsyth.cc.//5-205.15 System Maintained in Good Repair - P: Hot water faucet does not shut-off completely at mopsink by faucet handle. Repair faucet handle to shut water off completely.



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Spell

- 51 5-501.17 Toilet Room Receptacle, Covered - C: No covered trash receptacle in employee restroom. All restrooms used by women shall have a covered receptacle available for disposal of feminine hygiene products.//6-501.18 Cleaning of Plumbing Fixtures - C: Toilet and urinal soiled. Toilet seat stained. Plumbing fixtures shall be maintained clean. Replace toilet seat and clean fixtures.//6-501.19 Closing Toilet Room Doors - C: Employee toilet door open. Toilet rooms shall be kept closed. CDI: Door closed.
- 52 5-501.113 Covering Receptacles - C: 0 pts. Wind blowing lids of dumpsters open. Maintain containers for refuse closed at all times. Obtain metal closure, if necessary.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C: REPEAT: Floors need detailed cleaning in areas around legs of three comp sink, at grease trap inset, and under three door upright cooler. Ceiling needs cleaning throughout from dust and grease or replace tiles. Walls lightly soiled in high traffic areas. Floors, walls, and ceilings shall be maintained clean.//6-201.11 Floors, Walls and Ceilings-Cleanability - C: Caulk cracking at handsink. Recaulk handsink./ Coved base missing in bathroom where wall repair has been completed. Add coved base.
- 54 6-303.11 Intensity-Lighting - C: REPEAT: Lighting low at the ice machine at 43 fcd and at employee toilet in restroom at 14 fcd. Increase lighting to 50 fcd where working with food and 20 fcd at plumbing fixtures in restroom.



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Spell

