Food Establishment Inspection Report Score: 96.5																	
											ablishment ID: 3034020599						
Location Address: 5180 REIDSVILLE RD								Establishment ib									
Cit	City: WALKERTOWN State: NC								Date: 1 2 / Ø 8 / 2 Ø 1 7 Status Code: A								
Zip: 27051 County: 34 Forsyth								Time In: $11:30\%$ am 0 Time Out: $01:15\%$ pm									
									Total Time: 1 hr 45 minutes								
	Permittee: LOWES FOOD STORES INC Felephone: (336) 595-7448								Category #: III								
	-								FDA Establishment Type: Seafood Department								
					System: Municipal/Community				tem				Risk Factor/Intervention Violations:	1			
Wa	ate	r S	up	ply	y: ⊠Municipal/Community □ On-	Site Su	upply	′		No	o. (of F	Repeat Risk Factor/Intervention Viola	tions:			
F	-	dha	orne	ااا د	ness Risk Factors and Public Health Int	erventi	ons						Good Retail Practices				
Risk factors: Contributing factors that increase the chance of developing foodborne illness. Good Retail Practices: Preventative measures to control the addition of pathogens, chemical control of the addition of pathogens.											micals	3,					
Public Health Interventions: Control measures to prevent foodborne illness or injury.						1.00	and physical objects into foods.										
IN OUT N/A N/O Compliance Status OUT CDI R				VR	IN OUT N/A N/O Compliance Status OUT CDI R Safe Food and Water .2653, .2655, .2658							R VR					
$\overline{}$	X	_			PIC Present; Demonstration-Certification by accredited program and perform duties	2 0			28 🗆		×		Pasteurized eggs used where required	1 0.5 0			
Eı	mplo	oyee	e He	alth	.2652				29 🔀	П			Water and ice from approved source	210		盂	
2	×				Management, employees knowledge; responsibilities & reporting	3 1.5 0			30 🗆		×		Variance obtained for specialized processing	1 0.5 0		==	
3	X				Proper use of reporting, restriction & exclusion	3 1.5 0			\perp	\perp		atur	methods e Control .2653, .2654				
$\overline{}$	$\overline{}$	Ну	gieni	ic Pr	actices .2652, .2653				31		ipci		Proper cooling methods used; adequate	1 0.5 0		П	
4	×				Proper eating, tasting, drinking, or tobacco use	210			32 🗆		\boxtimes	П	equipment for temperature control Plant food properly cooked for hot holding	1 0.5 0		==	
5	×				No discharge from eyes, nose or mouth	1 0.5 0			33 🗆				Approved thawing methods used	1 0.5 0		#	
\neg	$\overline{}$	ntin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656				34 🔀		Ш			1 0.5 0		#	
-	×				Hands clean & properly washed	4 2 0			Food	Ider	ntific	atio	Thermometers provided & accurate 2653	LI [0.3 [U]		끄	
_	×				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5 0			35 🔀				Food properly labeled: original container	2 1 0		而	
	×				Handwashing sinks supplied & accessible	210			\perp	ntio	n of	Foc	od Contamination .2652, .2653, .2654, .2656, .265				
$\overline{}$			Sou	urce					36				Insects & rodents not present; no unauthorized animals	210		可	
_	×				Food obtained from approved source	2 1 0			37 🔀				Contamination prevented during food preparation, storage & display	210		盂	
-	×	Ш		Ш	Food received at proper temperature	210		Ц	38 🔀				Personal cleanliness	1 0.5 0		古	
\rightarrow	×				Food in good condition, safe & unadulterated	210			39 🔀	П			Wiping cloths: properly used & stored	1 0.5 0		盂	
_	×				Required records available: shellstock tags, parasite destruction	210			40 🗵		П		Washing fruits & vegetables	1 0.5 0		듬	
_		=		m C	Contamination .2653, .2654			П	\perp	er Us	se of	f Ute	ensils .2653, .2654	القال القا			
13	-			Ш	Food separated & protected	3 1.5 0			41 🔀				In-use utensils: properly stored	1 0.5 0		可	
\dashv	-+	X			Food-contact surfaces: cleaned & sanitized Proper disposition of returned, previously served,				42 🔀				Utensils, equipment & linens: properly stored, dried & handled	1 0.5 0		攌	
	⊠	LI tiall	у Ца	170r	reconditioned, & unsafe food dous Food Time/Temperature .2653	2 1 0		Ш	43 🔀	П			Single-use & single-service articles: properly	1 0.5 0		朩	
16	Diei	HIAII	у па		Proper cooking time & temperatures	3 1.5 0		П	44 🗵				stored & used Gloves used properly	1 0.5 0		盂	
17			X		Proper reheating procedures for hot holding	3 1.5 0				ils a	nd	Equi	ipment .2653, .2654, .2663				
18			X		Proper cooling time & temperatures	3 1.5 0			45 🗆	×			Equipment, food & non-food contact surfaces approved, cleanable, properly designed,	2 🗶 0		X 🗆	
\dashv] [_					\vdash	_			constructed, & used Warewashing facilities: installed, maintained, &				
19			×		Proper hot holding temperatures	3 1.5 0			46				used; test strips	1 0.5 0		4	
\dashv	×				Proper cold holding temperatures	3 1.5 0			47 🗵				Non-food contact surfaces clean	1 0.5 0		<u> </u>	
21	×	Ш	Ш	Ш	Proper date marking & disposition	3 1.5 0		Ш	Physi		aci	lities	S .2654, .2655, .2656 Hot & cold water available; adequate pressure	210		70	
22			×		Time as a public health control: procedures & records	210										#	
$\overline{}$		ume	r Ad	lviso	Consumer advisory provided for raw or				49 🗵				Plumbing installed; proper backflow devices	210		_	
_	X iabl		ISCAI	ntih	undercooked foods le Populations .2653	1 0.5 0			50 🔀	Ш			Sewage & waste water properly disposed	210	쁘	#	
24		y 30	X	μιιω	Pasteurized foods used; prohibited foods not	3 1.5 0		П	51 🔀				Toilet facilities: properly constructed, supplied & cleaned	1 0.5 0		10	
	hem	ical	\Box		.2653, .2657				52				Garbage & refuse properly disposed; facilities maintained	1 0.5 0			
25			X		Food additives: approved & properly used	1 0.5 0			53 🗆	X			Physical facilities installed, maintained & clean	0.5 0		X 🗆	
26	×				Toxic substances properly identified stored, & used	210			54 🗵				Meets ventilation & lighting requirements; designated areas used	1 0.5 0			
С	onfo	rma		witl	h Approved Procedures .2653, .2654, .2658									3.5			
27			X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	210							Total Deductions:	0.0			





	Commen	ıt Addendu	m to Food	l Establish	nment Inspection	n Report						
Establ	ishment Name: LOWES FO	ODS STORE SEAF	OOD 182	Establis	Establishment ID: 3034020599							
Loca	ation Address: 5180 REIDSVI	LLE RD		⊠Inspe	ction Re-Inspectio	n Date: 12/08/	Date: 12/08/2017					
	WALKERTOWN		State: NC	Comment	Comment Addendum Attached? Status Cod							
	nty: 34 Forsyth	Zip:_2		-		Category #:	III					
	ewater System: Municipal/Comer Supply: Municipal/Com	munity On-Site S		Email 1:								
	nittee: LOWES FOOD STORE		ystem	Email 2:								
Telephone: _(336) 595-7448				Email 3:								
	•	Т	emperature	Observation	ons							
	Effectiv		•		vill change to 41 c	legrees						
Item FSP	Location Roger K Brown 2/28/21	Temp Item	Locat	•	Temp Item 300	Location	Temp					
oysters	MD 329 SS	0										
salmon	display case	37										
catfish	display case	38										
shrimp	display case	37										
tilapia	walk in cooler	39										
oysters	walk in cooler	37										
hot wat	ter 3 compartment sink	136										
	Violations cited in this rend			Corrective	Actions as stated in sections 8-405	11 of the food code	_					
i (4-501.11 Good Repair and P is smooth and easily cleanab good repair. 4-205.10 Food Equipment, C department. Equipment shall	ole. Replace rusto Certification and C	ed wall shelf wi Classification -	th shelf that is	smooth and easily clean	able. Equipment	shall be in					
	6-501.11 Repairing-Premises compartment sink and aroun					. Repair cracks ir	n floor under 3					
Lock Text		First		l a a t	0 0							
Person	in Charge (Print & Sign):	<i>First</i> andy	Weave	Last		A Kam	•					
Regula	tory Authority (Print & Sign): ^A	<i>First</i> manda	Taylor	Last			2					
	REHS ID:	2543 - Taylor, A	Amanda		Verification Required [Date: / /						
F	REHS Contact Phone Number:			ublic Health • Env	vironmental Health Section • F	Food Protection Progra	am 🛕					

VCPH

Establishment Name: LOWES FOODS STORE SEAFOOD 182 Establishment ID: 3034020599

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.





Establishment Name: LOWES FOODS STORE SEAFOOD 182 Establishment ID: 3034020599

Observations and Corrective Actions
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