

# Food Establishment Inspection Report

Score: 94

Establishment Name: WAFFLE HOUSE #754

Establishment ID: 3034011879

Location Address: 200 HANES MILL ROAD

☒ Inspection ☐ Re-Inspection

City: WINSTON SALEM

State: NC

Date: 04 / 17 / 2018 Status Code: A

Zip: 27105

County: 34 Forsyth

Time In: 10 : 30 ☒ am ☐ pm Time Out: 02 : 00 ☒ am ☐ pm

Permittee: WAFFLE HOUSE INC

Total Time: 3 hrs 30 minutes

Telephone: (770) 326-7022

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: 4

No. of Repeat Risk Factor/Intervention Violations: 3

| 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 .2652</b>   |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 1  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | PIC Present; Demonstration-Certification by accredited program and perform duties            |  |  | <u>2</u> | <u>0</u>  | <input type="checkbox"/> | <input type="checkbox"/>            |
| <b>Employee Health .2652</b>   |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 2  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Management, employees knowledge; responsibilities & reporting                                |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| 3  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper use of reporting, restriction & exclusion   |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| <b>Good Hygienic Practices .2652, .2653</b>  |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 4  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper eating, tasting, drinking, or tobacco use   |  |  | <u>2</u> | <u>1</u>  | <u>0</u>                 | <input type="checkbox"/>            |
| 5  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | No discharge from eyes, nose or mouth  |  |  | <u>1</u> | <u>03</u> | <u>0</u>                 | <input type="checkbox"/>            |
| <b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>                          |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 6  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Hands clean & properly washed  |  |  | <u>4</u> | <u>0</u>  | <u>0</u>                 | <input checked="" 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    |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| 8  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Handwashing sinks supplied & accessible  |  |  | <u>2</u> | <u>0</u>  | <u>0</u>                 | <input checked="" type="checkbox"/> |
| <b>Approved Source .2653, .2655</b>  |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 9  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Food obtained from approved source   |  |  | <u>2</u> | <u>1</u>  | <u>0</u>                 | <input type="checkbox"/>            |
| 10   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Food received at proper temperature  |  |  | <u>2</u> | <u>1</u>  | <u>0</u>                 | <input type="checkbox"/>            |
| 11   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Food in good condition, safe & unadulterated   |  |  | <u>2</u> | <u>1</u>  | <u>0</u>                 | <input type="checkbox"/>            |
| 12   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Required records available: shellstock tags, parasite destruction                            |  |  | <u>2</u> | <u>1</u>  | <u>0</u>                 | <input type="checkbox"/>            |
| <b>Protection from Contamination .2653, .2654</b>  |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 13   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Food separated & protected   |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| 14   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Food-contact surfaces: cleaned & sanitized   |  |  | <u>3</u> | <u>0</u>  | <u>0</u>                 | <input checked="" type="checkbox"/> |
| 15   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper disposition of returned, previously served, reconditioned, & unsafe food              |  |  | <u>2</u> | <u>1</u>  | <u>0</u>                 | <input type="checkbox"/>            |
| <b>Potentially Hazardous Food Time/Temperature .2653</b>                                     |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 16   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper cooking time & temperatures   |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| 17   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Proper reheating procedures for hot holding  |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| 18   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Proper cooling time & temperatures   |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| 19   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper hot holding temperatures  |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| 20   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper cold holding temperatures   |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| 21   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper date marking & disposition  |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| 22   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Time as a public health control: procedures & records  |  |  | <u>2</u> | <u>1</u>  | <u>0</u>                 | <input type="checkbox"/>            |
| <b>Consumer Advisory .2653</b>   |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 23   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Consumer advisory provided for raw or undercooked foods                                      |  |  | <u>1</u> | <u>03</u> | <u>0</u>                 | <input type="checkbox"/>            |
| <b>Highly Susceptible Populations .2653</b>  |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 24   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Pasteurized foods used; prohibited foods not offered   |  |  | <u>3</u> | <u>13</u> | <u>0</u>                 | <input type="checkbox"/>            |
| <b>Chemical .2653, .2657</b>   |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 25   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Food additives: approved & properly used   |  |  | <u>1</u> | <u>03</u> | <u>0</u>                 | <input type="checkbox"/>            |
| 26   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Toxic substances properly identified stored, & used  |  |  | <u>2</u> | <u>1</u>  | <u>0</u>                 | <input checked="" type="checkbox"/> |
| <b>Conformance with Approved Procedures .2653, .2654, .2658</b>                              |                                     |                                     |                                     |  |  |  |          |           |                          |                                     |
| 27   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan |  |  | <u>2</u> | <u>1</u>  | <u>0</u>                 | <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 .2653, .2655, .2658</b>   |                                     |                                     |                                     |   |  |  |          |           |          |                                     |
| 28   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Pasteurized eggs used where required  |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 29   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Water and ice from approved source  |  |  | <u>2</u> | <u>1</u>  | <u>0</u> | <input type="checkbox"/>            |
| 30   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Variance obtained for specialized processing methods  |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| <b>Food Temperature Control .2653, .2654</b>   |                                     |                                     |                                     |   |  |  |          |           |          |                                     |
| 31   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Proper cooling methods used; adequate equipment for temperature control                                 |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 32   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Plant food properly cooked for hot holding  |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 33   | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | Approved thawing methods used   |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 34   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Thermometers provided & accurate  |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| <b>Food Identification .2653</b>   |                                     |                                     |                                     |   |  |  |          |           |          |                                     |
| 35   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Food properly labeled: original container   |  |  | <u>2</u> | <u>1</u>  | <u>0</u> | <input type="checkbox"/>            |
| <b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>  |                                     |                                     |                                     |   |  |  |          |           |          |                                     |
| 36   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Insects & rodents not present; no unauthorized animals  |  |  | <u>2</u> | <u>1</u>  | <u>0</u> | <input type="checkbox"/>            |
| 37   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Contamination prevented during food preparation, storage & display                                      |  |  | <u>2</u> | <u>1</u>  | <u>0</u> | <input type="checkbox"/>            |
| 38   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Personal cleanliness  |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 39   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Wiping cloths: properly used & stored   |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 40   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Washing fruits & vegetables   |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| <b>Proper Use of Utensils .2653, .2654</b>   |                                     |                                     |                                     |   |  |  |          |           |          |                                     |
| 41   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | In-use utensils: properly stored  |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 42   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Utensils, equipment & linens: properly stored, dried & handled  |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 43   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Single-use & single-service articles: properly stored & used  |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 44   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Gloves used properly  |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| <b>Utensils and Equipment .2653, .2654, .2663</b>  |                                     |                                     |                                     |   |  |  |          |           |          |                                     |
| 45   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used |  |  | <u>2</u> | <u>0</u>  | <u>0</u> | <input checked="" type="checkbox"/> |
| 46   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Warewashing facilities: installed, maintained, & used; test strips                                      |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 47   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Non-food contact surfaces clean   |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input checked="" type="checkbox"/> |
| <b>Physical Facilities .2654, .2655, .2656</b>   |                                     |                                     |                                     |   |  |  |          |           |          |                                     |
| 48   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Hot & cold water available; adequate pressure   |  |  | <u>2</u> | <u>1</u>  | <u>0</u> | <input type="checkbox"/>            |
| 49   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Plumbing installed; proper backflow devices   |  |  | <u>2</u> | <u>1</u>  | <u>0</u> | <input checked="" type="checkbox"/> |
| 50   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Sewage & waste water properly disposed  |  |  | <u>2</u> | <u>1</u>  | <u>0</u> | <input type="checkbox"/>            |
| 51   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Toilet facilities: properly constructed, supplied & cleaned   |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| 52   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Garbage & refuse properly disposed; facilities maintained   |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input checked="" type="checkbox"/> |
| 53   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Physical facilities installed, maintained & clean   |  |  | <u>1</u> | <u>0</u>  | <u>0</u> | <input checked="" type="checkbox"/> |
| 54   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            | Meets ventilation & lighting requirements; designated areas used  |  |  | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/>            |
| Total Deductions: <u>6</u>   |                                     |                                     |                                     |   |  |  |          |           |          |                                     |



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County: 34 Forsyth Zip: 27105

Wastewater System: ☒ Municipal/Community ☐ On-Site System

Water Supply: ☒ Municipal/Community ☐ On-Site System

Permittee: WAFFLE HOUSE INC

Telephone: (770) 326-7022

Establishment ID: 3034011879

☒ Inspection ☐ Re-Inspection Date: 04/17/2018

Comment Addendum Attached? ☐ Status Code: A

Category #: II

Email 1: \_\_\_\_\_

Email 2: \_\_\_\_\_

Email 3: \_\_\_\_\_

## Temperature Observations

**Effective January 1, 2019 Cold Holding will change to 41 degrees**

| Item        | Location        | Temp | Item        | Location           | Temp | Item | Location | Temp |
|-------------|-----------------|------|-------------|--------------------|------|------|----------|------|
| Servsafe    | T.Moore12/5/21  | 0    | Half n half | reach in cooler    | 36   |      |          |      |
| Sausage     | reach in cooler | 41   | Steak       | walk in cooler     | 42   |      |          |      |
| Sld tom     | make unit       | 40   | Hot water   | 3 compartment sink | 142  |      |          |      |
| Steak       | final cook      | 171  | Grits       | hot holding        | 163  |      |          |      |
| Egg scrble  | final cook      | 184  |             |                    |      |      |          |      |
| Ham         | drawer cooler   | 36   |             |                    |      |      |          |      |
| Chili       | hot holding     | 200  |             |                    |      |      |          |      |
| Wffe batter | reach in cooler | 38   |             |                    |      |      |          |      |

## 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 2-301.14 When to Wash - P Repeat. Observed employee wash hand then use clean hands to turn off the faucet at the handwashing sink a few times. Food employees shall clean their hands and exposed portions of their arms after engaging in other activities that contaminate the hands. CDI: Employee rewashed hands and use disposable paper towels to turn off the faucet at the handwashing sink.
- 8 5-205.11 Using a Handwashing Sink-Operation and Maintenance - PF Repeat. Observed employee filling a plastic container with water from the handwashing sink. A handwashing sink may not be used for purposes other than handwashing. CDI: Employee discarded the water in the plastic container.  
//6-301.12 Hand Drying Provision - PF No disposable towels at the handwashing sink  
in the back area. The shipment of disposable towels did not arrive today per person in charge. Disposable towels shall be provided at the handwashing sink. CDI: Employee got disposable towels from another store until the shipment arrives today.
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P Repeat. Cutting board, pie cutter, knife, scissor, large metal containers, small metal containers, and lids were soiled. Food-contact surfaces of equipment and utensils shall be clean to sight and touch. CDI: All items taken to the three compartment sink.  
//4-501.112 Mechanical  
Warewashing Equipment, Hot Water Sanitization Temperatures - PF Hot water 134 F and thermolabel did not turn black in the Lock mechanical warewashing machine. Mechanical warewashing equipment for hot water sanitizing rinse shall be at least 180 F Text according to the data plate. As a TEMPORARY solution, the three compartment sink will be used to wash->rinse->sanitize->air  
○ dry. Chlorine 50ppm in the 3 compartment sink. CDI: Hot water 164 F in the warewashing machine.

Person in Charge (Print & Sign): *Tenia* *Moore*

Regulatory Authority (Print & Sign): *Jill* *Sakamoto* REHSI

REHS ID: 2685 - Jill Sakamoto

Verification Required Date:     /     /    

REHS Contact Phone Number: ( 336 ) 703 - 3137



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- 26 7-204.11 Sanitizers, Criteria-Chemicals - P 0 points. Both sanitizer containers with greater than 200ppm of chlorine. Chemical sanitizers applied to food-contact surfaces shall meet the requirements specified in 40 CFR 180.940 Tolerance. CDI: Sanitizer containers were changed and one container was 50ppm of chlorine.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C Repeat. Rusted shelving above prep sink, torn gasket in the reach in cooler (dressing cooler), torn gaskets on doors located in four door reach in cooler, torn gasket on the one door reach in cooler (make unit), and soda machine dispensing when the ice bin is opened. Add shut off mechanism to the soda machine when the ice bin is opened. 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 points. The following areas are soiled and need additional cleaning: tracks and gaskets on the drawers cooler, handles, spillage, and shelving on/in reach in cooler (back), and gaskets, floor corners and walls in walk in cooler. Nonfood-contact surfaces of equipment shall be free of accumulation of dust, dirt, food debris and other debris.
- 49 5-202.14 Backflow Prevention Device, Design Standard - P 0 points. Spray nozzle that can twist on/off connected to hose attached to the faucet at the outside can wash. A backflow prevention device installed on a water supply system shall meet A.S.S.E. standards for construction, installation, maintenance, inspection, and testing for that specific application and type of device. CDI: Hose was not connected to the faucet of the can wash.
- 52 5-501.111 Area, Enclosures and Receptacles, Good Repair - C 0 points. Minor hole on the left side on the dumpster. Receptacles and returnables shall be maintained in good repair.
- 53 6-501.12 Cleaning, Frequency and Restrictions - C Repeat. Observed residue and various debris on the floors in the front kitchen area. Physical facilities shall be cleaned as often as necessary to keep them clean.



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