

# Food Establishment Inspection Report

Score: 93.5

Establishment Name: FIREHOUSE SUBS

Establishment ID: 3034012526

Location Address: 205 S. STRATFORD RD. SUITE F

Inspection  Re-Inspection

City: WINSTON SALEM

State: NC

Date: 06 / 13 / 2018 Status Code: U

Zip: 27103 County: 34 Forsyth

Time In: 10 : 30  am  pm Time Out: 02 : 07  am  pm

Permittee: PURE TRIDENT, INC.

Total Time: 3 hrs 37 minutes

Telephone: (336) 293-6230

Category #: IV

Wastewater System:  Municipal/Community  On-Site System

FDA Establishment Type: Full-Service Restaurant

Water Supply:  Municipal/Community  On-Site Supply

No. of Risk Factor/Intervention Violations: 4

No. of Repeat Risk Factor/Intervention Violations: 1

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	NO	Compliance Status	OUT	CDI	R	VR
<b>Supervision</b> .2652								
1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	<input checked="" type="checkbox"/>	<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	13	0	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13	0	<input type="checkbox"/>
<b>Good Hygienic Practices</b> .2652, .2653								
4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03	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	13	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	13	0	<input type="checkbox"/>
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	<input checked="" type="checkbox"/>	13	0	<input checked="" 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	13	0	<input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13	0	<input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13	0	<input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13	0	<input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13	0	<input type="checkbox"/>
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	<input checked="" type="checkbox"/>	0	<input checked="" 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	03	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	13	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	03	0	<input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1	0	<input 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	NO	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	<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	03	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	03	0	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03	0	<input type="checkbox"/>
33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	1	03	0	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03	0	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03	0	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03	0	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03	0	<input type="checkbox"/>
<b>Proper Use of Utensils</b> .2653, .2654								
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03	<input checked="" type="checkbox"/>	<input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03	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	<input checked="" type="checkbox"/>	0	<input checked="" type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03	0	<input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	03	<input checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1	0	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03	0	<input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03	0	<input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	1	<input checked="" type="checkbox"/>	0	<input type="checkbox"/>
54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03	0	<input type="checkbox"/>
<b>Total Deductions:</b>					6.5			



# Comment Addendum to Food Establishment Inspection Report

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 City: WINSTON SALEM State: NC  
 County: 34 Forsyth Zip: 27103  
 Wastewater System:  Municipal/Community  On-Site System  
 Water Supply:  Municipal/Community  On-Site System  
 Permittee: PURE TRIDENT, INC.  
 Telephone: (336) 293-6230

Establishment ID: 3034012526  
 Inspection  Re-Inspection Date: 06/13/2018  
 Comment Addendum Attached?  Status Code: U  
 Water sample taken?  Yes  No Category #: IV  
 Email 1: sriila\_surapaneni@yahoo.com  
 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
hot water	3 comp sink	154	lettuce	make unit	37			
quat (ppm)	3 comp sink	300	tomatoe	make unit	36			
quat (ppm)	bucket	200	roast beef	make unit	38			
hot water	in-use utensil water	127	slaw	ice bath	36			
meatballs	steam well	137	ham	walk-in cooler	40			
ambient	upright	37	turkey	walk-in cooler	37			
turkey	make unit	37	tomatoe	walk-in cooler	39			
ham	make unit	35						

## 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.

- 1 2-102.12 Certified Food Protection Manager - C- Person in charge is missing a certified food protection management certification (CFPM). Establishment currently has a transitional permit therefore person in charge is required to obtain a CFPM within 210 days. At least one employee who has supervisory and management responsibility and the authority to direct and control food preparation and service shall be a certified food protection manager who has shown proficiency of required information through passing a test that is part of an American National Standards Institute (ANSI)-ACCREDITED PROGRAM. 0pts
  
- 4 2-401.11 Eating, Drinking, or Using Tobacco - C- Observed one employee beverage stored above condiments on dry storage shelving. Employees shall eat, drink, or use any form of tobacco only in designated areas where the contamination of exposed food; clean equipment, utensils, and linens; unwrapped single-service and single-use articles; or other items needing protection can not result. 0pts
  
- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - P-REPEAT- Vegetable dicer observed with dried food residue and buildup. Food contact surfaces of equipment and utensils shall be cleaned to sight and touch. 4-602.11 Equipment Food-Contact Surfaces and Utensils-Frequency - P- Soiled meat slicer was observed on countertop. Per person in charge and staff, meat slicer was last used the day prior. Ensure meat slicers are cleaned within 4hours after use. Equipment food contact surfaces and utensils that touches potentially hazardous food shall be cleaned throughout the day at least every 4 hours. Lock Text CDI: Slicer sent to 3 compartment sink to be washed, rinsed, and sanitized. 3pts



Person in Charge (Print & Sign):  
 First: Antony Last: Howard  
 Regulatory Authority (Print & Sign):  
 First: Shaneria Last: Sanders

X A A H E  
 Shaneria Sanders, REHS/

REHS ID: 2683 - Shaneria Sanders

Verification Required Date:     /     /    

REHS Contact Phone Number: ( 3 3 6 ) 7 0 3 - 3 1 4 4



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program  
 DHHS is an equal opportunity employer.



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- 21 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF- Datemarking stickers were missing on tuna salad and lettuce stored in upright cooler. Ready-to-eat, potentially hazardous food shall be datemarked for 7 days if held at 41F and below or datemarked for 4 days if held between 42-45F. CDI: Lettuce and tuna were voluntarily discarded. 1.5pts.
- 41 3-304.12 In-Use Utensils, Between-Use Storage - C- Hot water used for storing in-use utensils in steam well measured 127F. In-use utensils shall be stored in a container of water if the water is maintained at a temperature of at least 135F and above. Increase temperature in steam well. 0pts
- 42 4-901.11 Equipment and Utensils, Air-Drying Required - C- REPEAT- 6 plastic pans on clean utensil shelving observed wetstacked. Utensil and equipment shall be allowed to air dry after washing, rinsing, and sanitizing.//
- 43 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing - C- To-go trays above line observed with food contact surface exposed to contamination. Invert trays or leave in original plastic sleeve for protection. Single-use and single-service articles shall be stored where they are protected against splash, dirt, debris, and other contamination. 0pts
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C- REPEAT- Shelving in dry storage is rusting/loosing finish. Lament is missing exposing wood to front register cabinets. Continue to working on repairs noted on transitional permit comment addendum. Repairs shall be completed by 07/22/18. Equipment shall be in good repair. 0.5pts
- 47 4-602.13 Nonfood Contact Surfaces - C- Gasket to walk-in cooler needs cleaning. Nonfood contact surfaces shall be maintained clean. 0pts



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- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C- Finish converting old restroom into storage room. Cove based is needed and remove extraneous plumbing fixtures from wall. Repair damaged baseboard tiles underneath walk-in cooler. Floors, walls, and ceilings, shall be smooth and easily cleanable. 0.5pts



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✓  
Spell



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✓  
Spell

