

Food Establishment Inspection Report

Score: 99.5

Establishment Name: CIRCLE K

Establishment ID: 3034020735

Location Address: 1415 LEWISVILLE CLEMMONS RD

☒ Inspection ☐ Re-Inspection

City: CLEMMONS

State: NC

Date: 06 / 05 / 2019 Status Code: A

Zip: 27012 County: 34 Forsyth

Time In: 02 : 40 ^{am} _{pm} Time Out: 03 : 50 ^{am} _{pm}

Permittee: CIRCLE K STORES INC.

Total Time: 1 hr 10 minutes

Telephone: (336) 766-9402

Category #: II

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

FDA Establishment Type: _____

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

No. of Risk Factor/Intervention Violations: 2

No. of Repeat Risk Factor/Intervention Violations: _____

| 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 |
| Supervision .2652 | | | | | | | | | | |
| 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"/> |
| Employee Health .2652 | | | | | | | | | | |
| 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"/> |
| Good Hygienic Practices .2652, .2653 | | | | | | | | | | |
| 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"/> |
| Preventing Contamination by Hands .2652, .2653, .2655, .2656 | | | | | | | | | | |
| 6 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hands clean & properly washed | | | <u>4</u> | <u>2</u> | <u>0</u> | <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 | | | <u>3</u> | <u>13</u> | <u>0</u> | <input type="checkbox"/> |
| 8 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Handwashing sinks supplied & accessible | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| Approved Source .2653, .2655 | | | | | | | | | | |
| 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"/> |
| Protection from Contamination .2653, .2654 | | | | | | | | | | |
| 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Food-contact surfaces: cleaned & sanitized | | | <u>3</u> | <u>13</u> | <u>0</u> | <input 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"/> |
| Potentially Hazardous Food Time/Temperature .2653 | | | | | | | | | | |
| 16 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Proper cold holding temperatures | | | <u>3</u> | <u>13</u> | <u>0</u> | <input checked="" 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 type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Time as a public health control: procedures & records | | | <u>2</u> | <u>1</u> | <u>0</u> | <input type="checkbox"/> |
| Consumer Advisory .2653 | | | | | | | | | | |
| 23 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Consumer advisory provided for raw or undercooked foods | | | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/> |
| Highly Susceptible Populations .2653 | | | | | | | | | | |
| 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"/> |
| Chemical .2653, .2657 | | | | | | | | | | |
| 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"/> |
| Conformance with Approved Procedures .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 | | | <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 |
| Safe Food and Water .2653, .2655, .2658 | | | | | | | | | | |
| 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"/> |
| Food Temperature Control .2653, .2654 | | | | | | | | | | |
| 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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"/> |
| Food Identification .2653 | | | | | | | | | | |
| 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"/> |
| Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657 | | | | | | | | | | |
| 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"/> |
| Proper Use of Utensils .2653, .2654 | | | | | | | | | | |
| 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"/> |
| Utensils and Equipment .2653, .2654, .2663 | | | | | | | | | | |
| 45 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used | | | <u>2</u> | <u>1</u> | <u>0</u> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Non-food contact surfaces clean | | | <u>1</u> | <u>03</u> | <u>0</u> | <input type="checkbox"/> |
| Physical Facilities .2654, .2655, .2656 | | | | | | | | | | |
| 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plumbing installed; proper backflow devices | | | <u>2</u> | <u>1</u> | <u>0</u> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Garbage & refuse properly disposed; facilities maintained | | | <u>1</u> | <u>03</u> | <u>0</u> | <input 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>0.5</u> |



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CR
Off



Comment Addendum to Food Establishment Inspection Report

Establishment Name: CIRCLE K
 Location Address: 1415 LEWISVILLE CLEMMONS RD
 City: CLEMMONS State: NC
 County: 34 Forsyth Zip: 27012
 Wastewater System: ☒ Municipal/Community ☐ On-Site System
 Water Supply: ☒ Municipal/Community ☐ On-Site System
 Permittee: CIRCLE K STORES INC.
 Telephone: (336) 766-9402

Establishment ID: 3034020735
☒ Inspection ☐ Re-Inspection Date: 06/05/2019
 Comment Addendum Attached? ☐ Status Code: A
 Water sample taken? ☐ Yes ☒ No Category #: II
 Email 1: WVERNOOY@CIRCLEK.COM
 Email 2:
 Email 3:

Temperature Observations

Cold Holding Temperature is now 41 Degrees or less

| Item | Location | Temp | Item | Location | Temp | Item | Location | Temp |
|----------------|--------------------------|------|------|----------|------|------|----------|------|
| hot dog | roller grill | 173 | | | | | | |
| pjack saus. | roller grill | 168 | | | | | | |
| chzbgr rollerb | roller grill | 150 | | | | | | |
| slaw | cont. by roller grill | 41 | | | | | | |
| hot dogs | sm. reach-in | 35 | | | | | | |
| hot dogs | 1 door cooler | 41 | | | | | | |
| quat sani | re-made in spray bottle | 200 | | | | | | |
| Food Safety | T. Hamilton, exp 6/11/19 | 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.

- 20 3-501.16 (A)(2) and (B) Potentially Hazardous Food (Time/Temperature Control for Safety Food), Hot and Cold Holding - P Foods in Fresh Case - cheese, subs, sandwiches, chunks of watermelon, etc were 46-49F. All potentially hazardous foods must be 41F or below. CDI - off temp foods were voluntarily discarded.
- 26 7-202.12 Conditions of Use - P,PF Quat sanitizer in spray bottle was too strong at >400 ppm (test strip turned blue!) Poisonous or toxic materials shall be used according to manufacturer's use directions. CDI - sanitizer was re-made to 200 ppm.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C Replace missing ceiling tile above bag-in-box rack in back kitchen area. Seal around pipes that enter the ceiling. This is a REPEAT from the previous inspection dated 7/13/18; please fix to avoid a full point deduction on the next inspection, which is due July 2019-December 2019. |

Lock
Text



Person in Charge (Print & Sign): Tracey First Hamilton Last
 Regulatory Authority (Print & Sign): Aubrie First Welch Last

Tracey Hamilton

Aubrie Welch REHS

REHS ID: 2519 - Welch, Aubrie

Verification Required Date: / /

REHS Contact Phone Number: (336) 703 - 3131



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Spell



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Spell

