۱(00	<u>d</u>	Ŀ	<u>.Sl</u>	<u>tablishment Inspection</u>	Re	po	rt						Sci	ore	: _9	<u>)5.</u>	5	_	
Establishment Name: MUSCLE MAKER GRILL Establishment ID: 3034011883																				
Location Address: 214 HARVEY ST.										Inspection ☐ Re-Inspection										
City: WINSTON SALEM State: NC										Date: 0 2 / 15 / 20 18 Status Code: A										
Zip: 27103 County: 34 Forsyth									Time In: $\underline{10}:\underline{30} \overset{\otimes}{\bigcirc} \underline{am}$ Time Out: $\underline{02}:\underline{00} \overset{\otimes}{\otimes} \underline{am}$											
										Total Time: 3 hrs 30 minutes										
	crimitee.									Category #: IV										
	Felephone: (336) 283-9407									FDA Fetablishment Type Full-Service Restaurant										
	Nastewater System: ⊠Municipal/Community □On-Site Sys								ste	tem No. of Risk Factor/Intervention Violations: 2										
Na	ate	r S	up	ply	y: ⊠Municipal/Community □ On-	Site S	Supp	oly						Repeat Risk Factor/Intervention Viola		าร:				
F	000	dbo	orne	e III	ness Risk Factors and Public Health Into	ervent	ions			Good Retail Practices										
					ibuting factors that increase the chance of developing foodb ventions: Control measures to prevent foodborne illness or	borne illness.				Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.										
	IN	оит	N/A	N/O	Compliance Status	OUT	CDI	R V	2	IN OUT N/A N/O Compliance Status							OUT CDI R VR			
$\overline{}$	uper	$\overline{}$.2652					Safe		$\overline{}$	d W	ater .2653, .2655, .2658		_				
	×				PIC Present; Demonstration-Certification by accredited program and perform duties	2 0			28	#=		×		Pasteurized eggs used where required	10	#				
$\overline{}$		yee	e He	alth	.2652 Management, employees knowledge:		الصاد		29					Water and ice from approved source	2 [1	0				
\rightarrow	X				Management, employees knowledge; responsibilities & reporting	3 1.5 0	-		30			X		Variance obtained for specialized processing methods	1 0.	5 0				
_	NO.	Live	aio-	ic D	Proper use of reporting, restriction & exclusion	3 1.5 0	اإلـــالـ			$\overline{}$		per	atur	Proper cooling methods used adequate						
$\overline{}$	$\overline{}$	Нус	yien	IC PI	Proper eating, tasting, drinking, or tobacco use	210			31	×				Proper cooling methods used; adequate equipment for temperature control	1 0	5 0				
\rightarrow	×				No discharge from eyes, nose or mouth	1 0.5 0	+		32				X	Plant food properly cooked for hot holding	1 0.	5 0				
_	_	u ntin	a Co	onta	mination by Hands .2652, .2653, .2655, .2656	L [U.3] [U	-	ا ا	33	3 🛛			\Box	Approved thawing methods used	1 0	5 0				
$\overline{}$			9 01	Jiid	Hands clean & properly washed	420			34	1 🗵				Thermometers provided & accurate	1 0.	5 0				
\rightarrow	-				No bare hand contact with RTE foods or pre-	3 1.5 0				ood	lder	ntific	atio			÷				
\rightarrow	×				approved alternate procedure properly followed Handwashing sinks supplied & accessible	210	+		╗	X				Food properly labeled: original container	2 [1	0				
_		vec	l So	urce			الحالا			$\overline{}$		n of	Foo	od Contamination .2652, .2653, .2654, .2656, .265	$\overline{}$					
\neg					Food obtained from approved source	210			11 ⊢	X				animals				Ш	Ľ	
10				X	Food received at proper temperature	210				X				Contamination prevented during food preparation, storage & display	2 1	+				
11	\boxtimes				Food in good condition, safe & unadulterated	210	+		ш	3 🛛				Personal cleanliness	1 0.	5 0				
+		П	×	П	Required records available: shellstock tags,	210			39					Wiping cloths: properly used & stored	1 0.	5 0				
				om C	parasite destruction Contamination .2653, .2654		71-1		40					Washing fruits & vegetables	1 0.	5 0				
13	X				Food separated & protected	3 1.5 0] F			se of	Ute	ensils .2653, .2654						
14		X			Food-contact surfaces: cleaned & sanitized	3 1.5] 41					In-use utensils: properly stored	1	+		-		
15	-				Proper disposition of returned, previously served,	210	+ +		42	-	X			Utensils, equipment & linens: properly stored, dried & handled	1 0.	5 🗶				
		tiall	ly Ha	azaro	reconditioned, & unsafe food dous Food TIme/Temperature .2653	1 -1-1-	1-1.		43	X				Single-use & single-service articles: properly stored & used	1 0.	5 0			þ	
16	X				Proper cooking time & temperatures	3 1.5 0			⊣⊢	×				Gloves used properly	1 0	50				
17	X				Proper reheating procedures for hot holding	3 1.5 0			46	T		nd I	Equ	ipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces		T				
18				×	Proper cooling time & temperatures	3 1.5 0	1-1] 45		X			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2 1	\blacksquare			E	
19	\rightarrow	X			Proper hot holding temperatures	3 🗙 0	+		46					Warewashing facilities: installed, maintained, & used; test strips	1 0.	+				
\rightarrow	×				Proper cold holding temperatures	3 1.5 0		45	47		×			Non-food contact surfaces clean	1	0				
21	×				Proper date marking & disposition	3 1.5 0		4	15	hysi		Faci	litie	, ,						
22			X		Time as a public health control: procedures & records	210			48	+		Ш		Hot & cold water available; adequate pressure		0			H	
т	onsi			dviso	Consumer advisory provided for raw or			71-	49	#=	×			Plumbing installed; proper backflow devices	2 🕽	+-	\vdash	Ш	Ľ	
23			X	ntibi	undercooked foods	1 0.5 0	الالا	_الـ	50					Sewage & waste water properly disposed	2 1				E	
Н 24	igni\ □□	\neg	isce	pub	le Populations .2653 Pasteurized foods used; prohibited foods not	3 1.5 0			51					Toilet facilities: properly constructed, supplied & cleaned	1 0.	5 0				
C	hem				offered .2653, .2657		الا	_	52	2 🗆	×			Garbage & refuse properly disposed; facilities maintained	\vdash	5 0		X		
25			X		Food additives: approved & properly used	1 0.5 0			53		×			Physical facilities installed, maintained & clean	10	5 🗶				
26	×				Toxic substances properly identified stored, & used	210			54	1 🗆	×			Meets ventilation & lighting requirements; designated areas used	1 0.	5 🗶				
C	onfo	rma		wit	h Approved Procedures .2653, .2654, .2658		-11			•				Total Deductions:	4.5					
27			X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	210][Total Deductions:						



27 🗆 🗆 🗷



	<u>Comme</u> i	<u>nt Adde</u>	ndum to	<u>Food E</u>	<u>Establish</u>	ment l	<u>nspection</u>	n Report			
stablishme	nt Name: MUSCLE N	MAKER GRIL	L		Establish	nment ID	: 3034011883				
Location A	ddress: 214 HARVEY	ST.		NC NC	☑ Inspection ☐ Re-Inspection Date: 02/15/2018 Comment Addendum Attached? ☐ Status Code: A						
City: WINS			Sta ⁻ Zip: ²⁷¹⁰³	te: <u>NC</u>							
County: 34	System: 🛛 Municipal/Cor	mmunity 🗆 (00	Category #: _\			
Water Supply					Email 1: 6	aperdue36	6@gmail.com				
Permittee:	MMG WINSTON SAL	EM NC, INC.			Email 2:						
Telephone	:_(336) 283-9407				Email 3:						
			Tempe	rature (Observatio	ns					
	Effectiv	ve Janua	ary 1, <mark>20</mark> 19	Cold I	Holding wi		nge to 41 de	egrees			
ltem servsafe	Location Sarah Coe 12/21/21	Temp 0	Item lettuce	Location prep unit				Location dish machine	Temp 100		
pepperoni	small prep unit	42	chlorine	dish mad	hine	100	hot water	3 compartment sink	133		
pasta salad	small prep unit	41	chili	hot holdi	ng	152	meatballs	walk in cooler	39		
wraps	small 1 door cooler	42	rice	hot holdi	ng	158	potatoes	walk in cooler	39		
raw beef	cold drawer	38	meatballs	hot holdii	ng	120	raw chix	walk in cooler	38		
raw chix	cold drawer	38	meatballs	reheat te	mp	173	chix	cook temp	193		
cheese	prep unit	42	quat sanitizer		rtment sink	400	grilled veggies	cook temp	177		
tomato	prep unit	41	quat sanitizer	front buc	ket	300	-				
addition 19 3-501.1 steam t 173F b	had food residue in Inal cleaning. 16 (A)(1) Potentially Itable 111-127F. Pote efore returning to stee 12 In-Use Utensils, Be, such as disposable	Hazardous entially haza eam table. etween-Use	Food (Time/Teardous food sh	emperatur all be hot	re Control for a held at 135 d	Safety Fo	ood), Hot and C r higher. CDI. N	Cold Holding - P Mea Meatballs reheated o	atballs on on stove to		
Lock Text		Fir	rst		Last	•	٨	•			
Person in Cha	rge (Print & Sign):	Sarah		Coe		X	man.	Car			
Regulatory Au	thority (Print & Sign):	<i>Fir</i> Amanda	rst	Taylor	Last		Si		~		
	REHS ID:	2543 - Ta	aylor, Amanda	a		Verifica	ation Required Da	ate:/			
DEUS C	antact Dhana Number	(226)	702 212					- — - —-	_		

REHS Contact Phone Number: (336)703-3136

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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Estak	olishment Name: MUSCLE MAKER GRILL	Establishment ID: 3034011883
Г		nd Corrective Actions me frames below, or as stated in sections 8-405.11 of the food code.
42		C 0 points. Stack of pans on clean dish rack stacked wet. Allow pans to ai
45	shall be in good repair. Be sure touch up paint is food sa cleanable.	nt - C 0 points. Touch up painting needed on turbochef oven. Equipment ife and done in a way that the outside of oven is smooth and easily on - C Remove domestic coffee pot from kitchen. Equipment kept in office for employee use.
47	drawers need cleaning(cleaned during inspection). Crevi	s, Nonfood-Contact Surfaces, and Utensils - C Outer surfaces of cold ice between cutting board and steam table needs cleaning, as do shelves for can opener. Non food contact surfaces of equipment shall be clean.
49	5-205.15 (B) System maintained in good repair - C Both the fixtures. Replace faucets and be sure plumbing systems.	prep sinks have faucets removed due to repairs that need to be made to em in in good repair.
52		Repeat violation. Dumpster on right observed open. Keep dumpsters such as tire and pallet from dumpster pad to eliminate possible rodent

6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods - C 0 points. Floors throughout facility are beginning to show wear and are no longer smooth and easily cleanable(inside walk-in cooler as well). Repair/resurface floors so they are

smooth and easily cleanable. Physical facilities shall be in good repair. 6-501.12 Cleaning, Frequency and Restrictions - C Clean

splash from wall and ceiling in smoothie making area. Physical facilities shall be maintained clean.

6-305.11 Designation-Dressing Areas and Lockers - C 0 points. Employee cell phone stored on shelf directly above steam table. Store employee personal items away from where they can contaminate food, clean utensils or other food contact surfaces.





Comment Addendum to Food Establishment Inspection Report

Establishment Name: MUSCLE MAKER GRILL Establishment ID: 3034011883

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.





Comment Addendum to Food Establishment Inspection Report

Establishment Name: MUSCLE MAKER GRILL Establishment ID: 3034011883

Observations and Corrective Actions

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Observations and Corrective Actions

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