Food Establishment Inspection Report Score: 98.5

Es	Establishment Name: FOOD LION #473 PRODUCE Establishment ID: 3034020811																	
	ocation Address: 3505 PATTERSON																	
Cit	y: <u>V</u>	۷IN	IST	ON	N SALEM	Stat	e: <u>N</u>	١C				D	ate	:01	1/09/2020 Status Code: A	_		
Zip: 27105 County: 34 Forsyth							Time In:12:00 PM Time Out: 1:00 PM											
					FOOD LION, LLC							To	ota	ΙT	ime: 1 hrs 0 min			
	Permittee: FOOD LION, LLC Felephone: (336) 744-7508							Category #: II										
	Vastewater System: Municipal/Community							FDA Establishment Type: Fast Food Restaurant										
									-	ter	П	N	0. (of F	Risk Factor/Intervention Violations: 1			
Water Supply: ☐ Municipal/Community ☐ On-Site Supply No. of Repeat Risk Factor/Intervention Violations: 0										_	_							
Foodborne Illness Risk Factors and Public Health Interventions						Good Retail Practices												
					ibuting factors that increase the chance of developing foods		ness.				Goo	d Re	tail F	Prac	tices: Preventative measures to control the addition of pathogens, of and physical objects into foods.	nemic	cals,	
P		_	_		ventions: Control measures to prevent foodborne illness o	r injury.	CD	ا م ا	MD	L		OUT				T _C r	y D	lue
S	uper	_	_	NO	Compliance Status .2652	001	CD	R	VK	S	afe F		N/A Lan			CC) R	VR
_					PIC Present; Demonstration-Certification by accredited program and perform duties	2			П							dг		ī
	mple			alth	accredited program and perform duties .2652		ت رت	10		29	-	_				75	1=	4=
$\overline{}$	Ø				Management, employees knowledge;	3 15			П	\vdash	-	-		H	Variance obtained for enecialized processing	-		
-			_		responsibilities & reporting Proper use of reporting, restriction & exclusion	3 1.5			뒴	\vdash	_			L	methods — — —	익드		坚
			ieni	c Pr	ractices 2652, 2653	التاليا	ت رب		Ц				per	atur	re Control .2653, .2654 Proper cooling methods used; adequate	_		_
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Proper eating, tasting, drinking, or tobacco use	2 1	olг		П	31	X				equipment for temperature control		쁘	坚
-			_		No discharge from eyes, nose or mouth				뒴	32			X		Plant food properly cooked for hot holding	피디	<u> </u>	ᆙ
.			n Cz	onta	mination by Hands .2652 .2653 .2655 .2656	إحالنا	ت إلك		니	33			\boxtimes		Approved thawing methods used	희디	10	ı c
_	Ø		9 0.	211114	Hands clean & properly washed	4 2	mI	П	П	34	X				Thermometers provided & accurate	0 0		ıĒ
-	\rightarrow	\rightarrow		П	No bare hand contact with RTE foods or pre-	3 1.5	_		\vdash	F	ood	lder	tific	atio	on .2653			
-	\rightarrow	-	ᆜ		approved alternate procedure properly followed		_	-	-	35					Food properly labeled: original container 2 1	희ㄷ		ı⊫
_		X	Co	1800	Handwashing sinks supplied & accessible	2 🗙			ᆜ	Р	reve	ntio	n of	Foo	od Contamination .2652, .2653, .2654, .2656, .2657	Ţ		Ţ
_	ppro	$\overline{}$	50	urce	Food obtained from approved source					36					Insects & rodents not present; no unauthorized animals	미디	미	ᆙ
-	\rightarrow			57		2 1	_		\dashv	37	×				Contamination prevented during food preparation, storage & display	0 0		ıĒ
10	$\overline{}$		_	N.	Food received at proper temperature	2 1	_	1	\dashv	38					Personal cleanliness	0	╁	ホ
11	▧	믜			Food in good condition, safe & unadulterated	2 1		몓		⊢		-		\vdash	Wiping cloths: properly used & stored	+-		
12	미				Required records available: shellstock tags, parasite destruction	2 1	▥▢			⊢	_	-		\vdash		_		
Protection from Contamination 2653, 2654 40 🖾 🗆 Washing fruits & vegetables TEO 🗆 Proper Use of Utensils .2653, .2654									<u>'I'</u>									
13	⊠				Food separated & protected	3 1.5	0 0			-			98 01	UL	In-use utensils: properly stored		T	T
14					Food-contact surfaces: cleaned & sanitized	3 1.5				\vdash	_	_					_	
15	☒				Proper disposition of returned, previously served, reconditioned, & unsafe food	2 1	0 🗆			⊢		-			dried & handled	-	_	+
P	oten	tiall	у На	zar	dous Food Time/Temperature .2653					43					Single-use & single-service articles: properly stored & used	미ㅁ		ᆙ
16	미		X		Proper cooking time & temperatures	3 15	0			44					Gloves used properly	미디		ılc
17	미		X		Proper reheating procedures for hot holding	3 1.5	0 0			U	itens	ils a	nd	Equ	ipment .2653, .2654, .2663			
18	ᆸ		X		Proper cooling time & temperatures	+++	0 🗆			45	⊠				Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	<u> </u>		ı
19	미		X		Proper hot holding temperatures	3 15				46					Warewashing facilities: installed, maintained, & used: test strips	0 0	攌	上
20	☒				Proper cold holding temperatures	3 1.5	0 0	同		47		X			Non-food contact surfaces clean	+	+	+
21					Proper date marking & disposition	3 1.5	0 -			Р	hysi	cal l	Faci	litie	s .2654, .2655, .2656			
22	ᅥ	ᆸ	X		Time as a public health control: procedures & records	2 1	0 0		ᆸ	48					Hot & cold water available; adequate pressure 2 1	0		ı
С	onsi	_	_	lviso	ory .2653					49	X				Plumbing installed; proper backflow devices 2 1	0		ı
23			X		Consumer advisory provided for raw or undercooked foods	1 0.9	0			50					Sewage & waste water properly disposed 211	0 0		谑
Н	ighly	$\overline{}$	_	ptib	le Populations .2653					\vdash	_	_			Toilet facilities: properly constructed, supplied	010	朩	卞
24			X		Pasteurized foods used; prohibited foods not offered	3 1.5	0			\vdash	_	-	H		Garbage & refuse properly disposed; facilities	_	+	+
	hem	_			.2653, .2657					\vdash					maintained LLEI	\rightarrow	-	+
25		믜	X		Food additives: approved & properly used	1 0.9	_	미		\vdash		-			Physical facilities installed, maintained & clean	ᅃ	叩	业
_	⊠				Toxic substances properly identified stored, & used	2 1	0		믜	54	X				Meets ventilation & lighting requirements; designated areas used	<u> </u>		ı
- 0	anto	****	-		h Approved Dropoduros 2052 2054 2050					1								



27 🗆 🗆 🖾

Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan



Total Deductions: 1.5

Comment Addendum to Food Establishment Inspection Report Establishment ID: 3034020811 Establishment Name: FOOD LION #473 PRODUCE Date: 01/09/2020 Location Address: 3505 PATTERSON Inspection □ Re-Inspection City: WINSTON SALEM State: NC Comment Addendum Attached? Status Code: A Zip: 27105 County: 34 Forsyth Water sample taken? Yes X No Category #: Wastewater System: Municipal/Community On-Site System Email 1: S0473SM@RETAIL.FOODLION.COM Municipal/Community On-Site System Email 2: Permittee: FOOD LION, LLC Telephone: (336) 744-7508 Email 3: Temperature Observations Effective January 1, 2019 Cold Holding is now 41 degrees or less Location Temp Item Location Temp Item Temp 41.0 walk-in cooler Watermelon 41.0 retail display case Watermelon 121.0 Hot Water 3-compartment sink 400.0 Quat Sani 3-compartment sink

Person in Charge (Print & Sign): Steven

First
Swain

First
Last
Regulatory Authority (Print & Sign): Victoria

Wurphy

Last

Murphy

REHS ID: 2795 - Murphy, Victoria

Verification Required Date:





Comment Addendum to Food Establishment Inspection Report

E	stablishment Name: FOOD LION #473 PRODUCE	Establishment ID	: 3034020811					
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.								

- 8 6-301.12 Hand Drying Provision - PF: There were no paper towel at the hand sink. Each handwashing sink or group of adjacent handwashing sinks
- shall be provided with individual disposable towels. CDI: Employee supplied paper towel.

 4-602.13 Nonfood Contact Surfaces C: Cleaning needed to/on the following items: fan covers above storage area, ceilings in the walk-in cooler, fan covers in the walk-in cooler, floors in the walk-in cooler, and walls in the walk-in cooler. Nonfood-contact surfaces of equipment shall be cleaned 47 at a frequency necessary to preclude accumulation of soil residues.