

Food Establishment Inspection Report

Score: 95.5

Establishment Name: KING'S CRAB SHACK AND OYSTER BAR

Establishment ID: 3034012123

Location Address: 239 WEST 4TH STREET

Inspection Re-Inspection

City: WINSTON SALEM State: NC

Date: 11 / 14 / 2019 Status Code: A

Zip: 27101 County: 34 Forsyth

Time In: 01 : 30 am pm Time Out: 04 : 10 am pm

Permittee: KING'S CRAB INC.

Total Time: 2 hrs 40 minutes

Telephone: (336) 306-9567

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: 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	2	0 0 0 0
Employee Health .2652						
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13 0 0 0
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13 0 0 0
Good Hygienic Practices .2652, .2653						
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco use	2	1 0 0 0
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03 0 0 0
Preventing Contamination by Hands .2652, .2653, .2655, .2656						
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean & properly washed	4	2 0 0 0
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 0 0
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1 0 0 0
Approved Source .2653, .2655						
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1 0 0 0
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1 0 0 0
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1 0 0 0
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1 0 0 0
Protection from Contamination .2653, .2654						
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13 0 0 0
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	13 0 0 0
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1 0 0 0
Potentially Hazardous Food Time/Temperature .2653						
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time & temperatures	3	13 0 0 0
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13 0 0 0
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time & temperatures	3	13 0 0 0
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13 0 0 0
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13 0 0 0
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13 0 0 0
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	1 0 0 0
Consumer Advisory .2653						
23	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	0 0 0 0
Highly Susceptible Populations .2653						
24	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used; prohibited foods not offered	3	13 0 0 0
Chemical .2653, .2657						
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	03 0 0 0
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1 0 0 0
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	2	1 0 0 0

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	1	03 0 0 0
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1 0 0 0
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	03 0 0 0
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	1	03 0 0 0
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03 0 0 0
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	1	03 0 0 0
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03 0 0 0
Food Identification .2653						
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1 0 0 0
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	2	1 0 0 0
37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	0 0 0 0
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03 0 0 0
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03 0 0 0
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits & vegetables	1	03 0 0 0
Proper Use of Utensils .2653, .2654						
41	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03 0 0 0
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03 0 0 0
43	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03 0 0 0
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03 0 0 0
Utensils and Equipment .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	0 0 0 0
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03 0 0 0
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	0	03 0 0 0
Physical Facilities .2654, .2655, .2656						
48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot & cold water available; adequate pressure	2	1 0 0 0
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1 0 0 0
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1 0 0 0
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03 0 0 0
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03 0 0 0
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	0	03 0 0 0
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03 0 0 0
Total Deductions:					4.5	



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 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: KING'S CRAB INC.
 Telephone: (336) 306-9567

Establishment ID: 3034012123
 Inspection Re-Inspection Date: 11/14/2019
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: IV
 Email 1: kingscrabshack@gmail.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
Reginald Hall	1/12/21	0	sliced tomato	make unit	39	potato	hot well	138
Mussels	ME352SS	0	chicken breast	make unit	41	crab cake	upright	40
Middleneck	FL981SS	0	shrimp	make unit	37	chicken wings	upright	39
Oyster	VA984SP	0	scallops	make unit	37	oysters	upright	39
Hot water	three comp sink	147	cooked lobster	make unit	39	grouper	seafood cooler	40
sanitizer (qac)	three comp sink (ppm)	200	mussels	make unit	37	condiment	air temp	38
sanitizer (cl)	dish machine (ppm)	100	broccoli	hot well	148	shrimp	final cook	170
Pico	make unit	39	chili	hot well	160	fried shrimp	final cook	167

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.

- 21 3-501.17 Ready-To-Eat Potentially Hazardous Food (Time/Temperature Control for Safety Food), Date Marking - PF Three bins of portioned pasta with incorrect date markings. Date marking on bins stated 11/12, 11/10, and 11 for dates of prep. PIC stated items were prepared today and employees placed portions into previously labelled bins. CDI: PIC removed and corrected dates during inspection to reflect prep date of 11/14. ✓ Spell
- 23 3-603.11 Consumption of Animal Foods that are Raw, Undercooked, or Not Otherwise Processed to Eliminate Pathogens - PF No consumer advisory provided on drink menu for raw oyster shots. Establishment must provide a consumer advisory with reminder and advisory on menus with foods served raw or undercooked. VR: Contact Joseph Chrobak no later than 11/24/19 for verification of updated menus at Chrobajb@forsyth.cc
- 37 3-307.11 Miscellaneous Sources of Contamination - C Bins of fryer dip, breading, and oil uncovered on table by fryers. Four pans of spices uncovered on soiled shelving by steamer with string from cloth in one pan of spices. All food and ingredients shall be kept covered when not in use. Cover all containers. tale

Lock Text



Person in Charge (Print & Sign): Reginald *First* Hall *Last*
 Regulatory Authority (Print & Sign): Joseph *First* Chrobak *Last*

R. Hall Jr.


REHS ID: 2450 - Chrobak, Joseph

Verification Required Date: 11 / 24 / 2019

REHS Contact Phone Number: (336) 703 - 3164



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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- 41 3-304.12 In-Use Utensils, Between-Use Storage - C Three tongs stored on oven handles at start of inspection. Do not store tongs on handles or utensils in any areas where they are subject to potential contamination. CDI: PIC removed tongs. 0 pts
- 43 4-502.13 Single-Service and Single-Use Articles-Use Limitations - C One single service cruzan cup used as scoop in bin of seafood breading. Single service and single use articles may not be reused. Remove cup and only use scoops with handles for dispensing of food and ingredients. 0 pts.
- 45 4-501.11 Good Repair and Proper Adjustment-Equipment - C Repeat: Shelving inside upright freezer is badly chipped and rusted and needs to be repaired or replaced. / One mesh sifter was badly torn in utensil storage. Shelving chipped and rusted on edges in upright cooler in back room. Equipment shall be kept in good repair.
- 47 4-602.13 Nonfood Contact Surfaces - C Repeat: Cleaning needed on wire shelf by steamers to remove debris and dust stuck to grease. Cleaning needed on shelves for utensils storage by dish machine to remove debris and grease accumulation. Cleaning needed on castors of deep fryers to remove grease accumulation. Non food contact surfaces shall be kept clean.
- 53 6-201.11 Floors, Walls and Ceilings-Cleanability - C Repeat: Floor tiles broken around floor drain of three compartment sink and around floor drain between beer coolers at bar. Replace broken and missing floor tiles to maintain easily cleaned flooring. / No coved base in restrooms. Add a coved base to the restrooms to eliminate 90 degree joint where base and floor meet. / Physical facilities shall be kept in good repair.
- 54 6-202.11 Light Bulbs, Protective Shielding - C Light shield broken out of place over upright freezer by fryers. Replace broken light shield. 0 pts



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