Γ(<u> </u>	<u>u</u>	E	<u>.SI</u>	<u>ablishment inspection</u>	<u> Re</u> l	<u>JU</u>	<u> </u>						SC	ore: _.	<u>91</u>	<u>.၁</u>	
S	tak	lis	hn	ner	nt Name: KOWLOON							_ E	st	ablishment ID: 3034012272				
Location Address: 2255 CLOVERDALE AVE									☑ Inspection ☐ Re-Inspection									
City: WINSTON SALEM State: NC							С	Date: <u>Ø 8</u> / <u>1 9</u> / <u>2 Ø 1 9</u> Status Code: A										
Zip: 27103 County: 34 Forsyth								Time In: $12:24 \otimes pm$ Time Out: $02:47 \otimes pm$										
Permittee: KOWLOON OF WINSTON, LLC								Total Time: 2 hrs 23 minutes										
emittee.							Category #: _IV											
Telephone: (336) 724-6768						Sva	FDA Establishment Type: Full-Service Restaurant											
Wastewater System: ⊠Municipal/Community □ On-Site Sys						lei	No. of Risk Factor/Intervention Violations: 4											
N	ate	r S	up	ply	y: ⊠Municipal/Community ☐ On-	Site Si	upp	ıy			N	o. c	of F	Repeat Risk Factor/Intervention Viola	ations	: _1		
Foodborne Illness Risk Factors and Public Health Interventions									Good Retail Practices									
Risk factors: Contributing factors that increase the chance of developing foodborne illness.									Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.									
7		_	N/A	_	ventions: Control measures to prevent foodborne illness or		CDI I	R VR		INI	OUT	N/A	N/O	,	OUT		I R	TVD.
S		rvisi		IN/O	Compliance Status .2652	001	CDI I	X VK	Sa					Compliance Status ater .2653, .2655, .2658	001	СЫ	ı K	VK
\neg		$\overline{}$			PIC Present; Demonstration-Certification by accredited program and perform duties	2 0			28			X		Pasteurized eggs used where required	1 0.5			Б
E		_	e He	alth	.2652				29	X				Water and ice from approved source	210			厅
2		×			Management, employees knowledge; responsibilities & reporting	3 🗙 0	X		30			X		Variance obtained for specialized processing methods	1 0.5 (古
3	X				Proper use of reporting, restriction & exclusion	3 1.5 0							atur	re Control .2653, .2654				
\neg		Ну	gien	ic Pı	ractices .2652, .2653				31	X				Proper cooling methods used; adequate equipment for temperature control	1 0.5 (П
_	X	Ц			Proper eating, tasting, drinking, or tobacco use	2 1 0			32				X	Plant food properly cooked for hot holding	1 0.5 (石
_	X			L	No discharge from eyes, nose or mouth	1 0.5 0		╜	33				X	Approved thawing methods used	1 0.5 (ם וב		占
Р 6	reve	ntin 🔀	g Co	onta 	mination by Hands .2652, .2653, .2655, .2656 Hands clean & properly washed	4 🗷 0			34	×				Thermometers provided & accurate	1 0.5 (ь
\dashv	X				No bare hand contact with RTE foods or pre-						lder	ntific	atic	on .2653				
\dashv				Ш	approved alternate procedure properly followed				35	X				Food properly labeled: original container	21	0 🗆		
8		X	1 6 0	urce	Handwashing sinks supplied & accessible 2653, .2655	2 🗶 0					ntio	n of	Foo	od Contamination .2652, .2653, .2654, .2656, .265	7			
\neg	X X	Dvec	1 30	urce	Food obtained from approved source	210			36	X				Insects & rodents not present; no unauthorized animals	21			
10				X	Food received at proper temperature	210			37	X				Contamination prevented during food preparation, storage & display	21	<u> </u>		
\dashv	X				Food in good condition, safe & unadulterated	210			38	X				Personal cleanliness	1 0.5 (
12			×	П	Required records available: shellstock tags,	210			39	X				Wiping cloths: properly used & stored	1 0.5			
	rote	ctio		om (parasite destruction Contamination .2653, .2654	الاالتالكا		7	40	X				Washing fruits & vegetables	1 0.5 (]		
	X				Food separated & protected	3 1.5 0				_		se of	Ute	ensils .2653, .2654				
14		×			Food-contact surfaces: cleaned & sanitized	3 🗙 0	X	$\frac{1}{\Box}$	41	×				In-use utensils: properly stored	1 0.5 (₽
_	<u> </u>	$\overline{\Box}$			Proper disposition of returned, previously served,	210			42	X				Utensils, equipment & linens: properly stored, dried & handled	1 0.5			
		itiall	у На	azar	reconditioned, & unsafe food dous Food TIme/Temperature .2653			1	43	X				Single-use & single-service articles: properly stored & used	1 0.5 (1 0		
16	X				Proper cooking time & temperatures	3 1.5 0			44	X				Gloves used properly	1 0.5 (Б
17	X				Proper reheating procedures for hot holding	3 1.5 0			Ui	tens	ils a	nd l	Equ	ipment .2653, .2654, .2663				
18				×	Proper cooling time & temperatures	3 1.5 0			45		×			Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2 🗶	<u> </u>		
19	×				Proper hot holding temperatures	3 1.5 0			46	×				Warewashing facilities: installed, maintained, & used; test strips	1 0.5 (ь
20	X				Proper cold holding temperatures	3 1.5 0			47		×			Non-food contact surfaces clean	X 0.5 (ם וכ		Ħ
21	X				Proper date marking & disposition	3 1.5 0			Pł			Faci	litie	s .2654, .2655, .2656		7=		
22		П	×	П	Time as a public health control: procedures &	210	П	10	48	X				Hot & cold water available; adequate pressure	21	0 🗆		П
C	ons	ume		dviso	records ory .2653	ا کاکات			49	X				Plumbing installed; proper backflow devices	21	0 🗆		Б
23			X		Consumer advisory provided for raw or undercooked foods	1 0.5 0			50	X				Sewage & waste water properly disposed	21			石
Н	ighl	y Sı		ptib	le Populations .2653				51	×				Toilet facilities: properly constructed, supplied	1 0.5 (T
24			X		Pasteurized foods used; prohibited foods not offered	3 1.5 0			52		\mathbf{X}			& cleaned Garbage & refuse properly disposed; facilities	1 0.5			Ħ
\neg	hen X	nical			.2653, .2657 Food additives: approved & properly used	1 0.5 0			53		X			maintained Physical facilities installed, maintained & clean	1 🗷	+		F
22			<u>□</u>		,				\vdash					•	1 0.5	+	+	+
0۷	onf)rm:		wit	h Approved Procedures .2653, .2654, .2658	2 1 0	الالا	-11	34		Ц			Meets ventilation & lighting requirements; designated areas used		414		브
27			×		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	210								Total Deductions:	8.5			
					,	للللب	\perp											



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Comment Addendum to Food Establishment Inspection Report **KOWLOON** Establishment ID: 3034012272 **Establishment Name:** Location Address: 2255 CLOVERDALE AVE Date: 08/19/2019 X Inspection Re-Inspection City:_WINSTON SALEM State: NC Status Code: A Comment Addendum Attached? Zip: 27103 County: 34 Forsyth Water sample taken? Yes No Category #: Email 1: winnie16863@gmail.com Wastewater System:

■ Municipal/Community □ On-Site System Water Supply: Municipal/Community □ On-Site System Permittee: KOWLOON OF WINSTON, LLC Email 2: Telephone: (336) 724-6768 Email 3: Temperature Observations Cold Holding Temperature is now 41 Degrees or less Temp Item Location Temp Item Location Location Item Temp 203 Egg Roll reheat Noodles reach-in cooler Hot Water 3-compartment sink 134 Egg Soup hot holding 152 Wontons reach-in cooler C. Sani 3-compartment sink 50 cooked to 170 Fried Rice hot holding 201 Serv Safe Ying Ling 5-23-23 00 194 Cabbage C. Wings cooked to walk-in cooler 38 C. Wings 41 Egg Roll 38 reach-in cooler walk-in cooler Ham 41 36 make-unit Soup walk-in cooler Shrimp make-unit 40 Wings walk-in cooler 39 White Rice hot holding 159 E. Foo Young final cook 202 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. 2 2-201.11 (A), (B), (C), & (E) Responsibility of Permit Holder, Person in Charge, and Conditional Employees - P: There was no available employee health policy available and PIC didn't know what an employee policy was and couldn't verbalize the symptoms or the food borne illness, nor were any resources available. The permit holder shall require food employees and conditional employees to report the person in charge information about their health and activities as they relate to diseases that are transmissible through food. CDI: PIC was given an employee health policy and educated on the symptoms and food borne illnesses and the importance of reporting them to the local health department. 6 2-301.12 Cleaning Procedure - P: PIC turned off faucet with bare hands after washing. To avoid recontaminating their hands, food employees may use disposable paper towels to turn off faucet. CDI: PIC rewashed hands and turned off faucet with disposable papertowel. //2-301.15 Where to Wash - PF: PIC observed washing hands in the meat prep sink. After explaining the proper procedure, PIC began washing hands in 3-compartment sink. Food employees shall clean their hands in a hand washing sink or approved automatic hand washing facility and may not clean their hands in a sink used for food preparation or ware washing. CDI: PIC was educated on the appropriate area to wash hands and rewashed hands in a hand washing sink. 8 6-301.12 Hand Drying Provision-REPEAT - PF: There were no paper towel available in the men's restroom. Each hand washing sink or group of adjacent hand washing sinks shall be provided with individual disposable towels. CDI: Employee supplied disposable paper towel. Lock Text Last

First Ying Lin Person in Charge (Print & Sign): Last First Regulatory Authority (Print & Sign): Victoria Murphy

REHS ID: 2795 - Murphy, Victoria

Verification Required Date:

REHS Contact Phone Number: (336)703-3814

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program DHHS is an equal opportunity employer. Food Establishment Inspection Report, 3/2013





Establishment Name: KOWLOON Establishment ID: 3034012272

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.



- 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils P: The following items were stored soiled: 4 metal lexan pans and 7 large chicken pans. Food-contact items shall be clean to sight and touch. CDI: Employee removed items to be cleaned.//4-501.114 Manual and Mechanical Ware washing Equipment, Chemical Sanitization-Temperature, pH, Concentration and Hardness P: Sanitizer in the front counter sanitizer bucket measured at 10 ppm. A chemical sanitizer used in a sanitizing solution for manual operation shall be used in accordance with EPA-registered label use. CDI: A new concentration was mixed that measured 50 ppm.
- 45 4-205.10 Food Equipment, Certification and Classification-REPEAT C: A half of bottle was being used as a scooper to scoop rice out of the rice cooker. Except for toasters, mixers, microwave ovens, water heaters, and hoods, food equipment shall be used in accordance with manufacturer's intended used and certified or classified for sanitation by an Ansi-accredited program.
 4-501.11

Good Repair and Proper Adjustment-Equipment -REPEAT- C: Replace or repaint rusting shelving in the walk-in cooler. Equipment shall be maintained in good repair.

- 47 4-602.13 Nonfood Contact Surfaces -REPEAT- C: Cleaning needed in the following areas: Outer rims of rice cooker, clear shelf mats in walk-in cooler, shelves in walk-in cooler, walls of walk-in cooler, and ceiling of walk-in cooler. Non-food contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.
- 52 5-501.113 Covering Receptacles C: Dumpster door open. Receptacles and waste handling units for refuse, recyclables, and returnables shall be kept covered. 0-points
- 6-501.12 Cleaning, Frequency and Restrictions C: Thorough cleaning needed on the walls throughout the establishment. Physical facilities shall be cleaned as often as necessary to keep them clean.





Establishment Name: KOWLOON Establishment ID: 3034012272

Observations and Corrective Actions
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