Food Establishment Inspection Report Score: 97.5

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Establishment Name: MCDONALD'S								Establishment ID: 3034011948											
Location Address: 5226 REIDSVILLE RD										☐ Re-Inspection									
City: WALKERTOWN							State: NC Date: 1 Ø / 2 Ø / 2 Ø 2 Ø Status Code: A												
Zip: 27051 County: 34 Forsyth							Time In: $09:00^{\circ}$ am Time Out: $11:45^{\circ}$ am pm												
DED FOODO INIO							Total Time: _2 hrs 45 minutes												
remillee							Category #: II												
Telephone: (336) 765-8960							_		_			FI	٦A	Fs	stablishment Type: Fast Food Restaurant		-		
Wastewater System: $igtigtigtigtigtigtigtigtarrow{ ext{N}}$ Municipal/Community						☐ On-Site Syste									Risk Factor/Intervention Violations:	1			_
W	ate	r S	up	pl	y: ⊠Municipal/Community □On-	Site	Sι	Jpp	ly						Repeat Risk Factor/Intervention Viola	ations:			
		مالہ	rn	~ II	Incor Diely Festers and Dublic Health Int		ntic								Good Retail Practices				_
ı					Iness Risk Factors and Public Health Intoributing factors that increase the chance of developing foodb						Goo	d Re	tail I	rac	tices: Preventative measures to control the addition of patho	gens, che	mical	s,	
F	Publi	He	alth I	Inte	rventions: Control measures to prevent foodborne illness or	injury.									and physical objects into foods.				
		_	N/A	N/C	¥	ОИТ	г	CDI	R VR	⇃ᅳ			N/A		'	OUT	CDI	R۱	/R
1	upe	rvisi	on		.2652 PIC Present; Demonstration-Certification by						Safe I	000	T	d W				7	_
I F	mpl	OVE	∟ ه H۵	alth	accredited program and perform duties		Ш			28	-		X		Pasteurized eggs used where required	1 0.5 0		井	_
	X		5 110	aiti	Management, employees knowledge; responsibilities & reporting	3 1.5	П			1		Ш			Water and ice from approved source Variance obtained for specialized processing	210		#	_
3	X				Proper use of reporting, restriction & exclusion	3 1.5							×		methods	1 0.5 0		<u> </u>	_
			nein	ic F	Practices .2652, .2653	J 1.9	اكا				$\overline{}$	Ten	nper	atur	e Control .2653, .2654 Proper cooling methods used; adequate				
4	X		J		Proper eating, tasting, drinking, or tobacco use	2 1	0		510		X	Ш			equipment for temperature control	1 0.5 0	Щ	坢	_
5	X				No discharge from eyes, nose or mouth	1 0.5	0		$\exists \Box$	l					Plant food properly cooked for hot holding	1 0.5 0		긔[\Box
_		_	g Co	onta	amination by Hands .2652, .2653, .2655, .2656					33					Approved thawing methods used	1 0.5 0		<u> </u>	
	X		_		Hands clean & properly washed	4 2	0			34		X			Thermometers provided & accurate	0.5 0		×	
7	X				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5	0				ood	lder	ntific	atic					
8		X			Handwashing sinks supplied & accessible	2 🗶		X	$\frac{1}{1}$	١⊢	×				Food properly labeled: original container	2 1 0		<u> </u>	_ _
	ppr		l So	urc	111		اگا				Т	ntio	n of	Foo	od Contamination .2652, .2653, .2654, .2656, .2657 Insects & rodents not present; no unauthorized			<u></u>	
	X				Food obtained from approved source	2 1	0			1		Ш			animals	2 1 0	Щ	4	_
10				×	Food received at proper temperature	21	0				×				Contamination prevented during food preparation, storage & display	210		<u> </u>	_
\vdash	\boxtimes	П			Food in good condition, safe & unadulterated		0			38					Personal cleanliness	1 0.5 0		<u> </u>	\exists
12			×	П	Required records available: shellstock tags,	21	0			39					Wiping cloths: properly used & stored	1 0.5 0		<u> </u>	\exists
_		ctio		om	parasite destruction Contamination .2653, .2654		اكا			40			×		Washing fruits & vegetables	1 0.5 0		기 [
13	X				Food separated & protected	3 1.5	0			-		r Us	se o	f Ute	ensils .2653, .2654				
-	X	П			Food-contact surfaces: cleaned & sanitized	3 1.5	0			41	X				In-use utensils: properly stored	1 0.5 0		ᆜ	\exists
<u> </u>	X				Proper disposition of returned, previously served,	\vdash	0			42	2 🗷				Utensils, equipment & linens: properly stored, dried & handled	1 0.5 0		<u> </u>	
_		ntiall	ly Ha	azaı	reconditioned, & unsafe food rdous Food TIme/Temperature .2653					43					Single-use & single-service articles: properly stored & used	1 0.5 0			
	X				Proper cooking time & temperatures	3 1.5	0			44					Gloves used properly	1 0.5 0		寸	$\overline{\Box}$
17	X				Proper reheating procedures for hot holding	3 1.5	0			ι	Jtens	ils a	and	Equ	ipment .2653, .2654, .2663				
18				X	Proper cooling time & temperatures	3 1.5	0			45					Equipment, food & non-food contact surfaces approved, cleanable, properly designed,	210			
\vdash	X				Proper hot holding temperatures	\vdash	0		70	╂	-				constructed, & used Warewashing facilities: installed, maintained, &			+	_
\vdash		_				3 1.5	\vdash			1 —					used; test strips	1 0.5 0		#	_
20					Proper cold holding temperatures		\vdash			47		X	Faa:	litio	Non-food contact surfaces clean	1 0.5	ᆜᄔ	ᅶ	
	X				Proper date marking & disposition Time as a public health control: procedures &	\vdash	0				hysi	Cai	Faci	nue	S .2654, .2655, .2656 Hot & cold water available; adequate pressure	210		T	_
22		Ш		4: -	records	21	0	Щ		1					Plumbing installed; proper backflow devices				_
23	ons	$\overline{}$	X X	JVIS	Consumer advisory provided for raw or	1 0.5	0			1⊢	+							╬	_
				ptik	undercooked foods ble Populations .2653	المالي	العا	١١١		1⊢			L		Sewage & waste water properly disposed Toilet facilities: properly constructed, supplied	210	끧	井	_
24			X		Pasteurized foods used; prohibited foods not offered	3 1.5	0			51	×				& cleaned	1 0.5 0		墹	_
(hen	nical			.2653, .2657					52		×			Garbage & refuse properly disposed; facilities maintained	1 🔀 0		긔[\exists
25	X				Food additives: approved & properly used	1 0.5	0			53		×			Physical facilities installed, maintained & clean	1 0.5			
26	X				Toxic substances properly identified stored, & used	21	0			54	×				Meets ventilation & lighting requirements; designated areas used	1 0.5 0		٦Ī	Ī
(conf			wi	th Approved Procedures .2653, .2654, .2658			Ţ			•	•	•			2.5			
27			X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	2 1	0								Total Deductions:				





	Comm	ent Adde	endum to	Food E	<u>stablish</u>	ment l	<u>Inspection</u>	n Report			
Establishme	nt Name: MCDON	ALD'S			Establishment ID: 3034011948						
	ddress: 5226 REID	SVILLE RD		. NC	☑Inspection ☐Re-Inspection Date: 10/20/2020						
City: WALK				ite: <u>NC</u>	Comment Addendum Attached? Status Code: A						
County: 34	System: Municipal/0	Community	Zip: 27051		Water sample taken? Yes X No Category #: II						
Water Supply	-	Community (Email 1: Email 2:						
	(336) 765-8960				Email 3:						
			Tempe	rature O	bservatio	ns					
		Cold Hol	ding Temp	perature	is now 4	11 Degr	ees or les	SS			
Item servsafe	Location Sierra Jay 6/16/25	Temp 0	Item air temp	Location drive thru		Temp 37	Item air temp	Location coffee cooler 1	Temp 36		
hot water	active washing	110	half and half	front glass	cooler	38	milk mix	coffee cooler 3	38		
hot water	3 compartment sink	131	cheese	rear glass	cooler	37	sausage	hot holding	157		
lettuce	walk in cooler	38	milk	biscuit coo	ler	38	eggs	hot holding	163		
eggs	walk in cooler	38	chlorine	3 comparti	ment sink	100	canadian	raw cooler	39		
sausage	cook temp	167	chlorine	wiping clot	h bucket	100					
raw beef	cold drawer	33 hash browns co		cook temp		178					
fish	reheat tem;p	171	whip cream	coffee coo	ler 2	34					
8 6-301.1	1 Handwashing C	leanser, Avai	lability - PF Fr	ont hand si	nk soap dis	penser no	ot working pro	5.11 of the food code. perly. Soap dispens ser for use until repa			
	I12 Temperature Ngs are stored. Prov							ft coffee cooler or co ent.	ooler where		
								f soft serve dispense mulation of soil resid			
Text							(
	/	<i>Fil</i> Raven	rst	L Smith	ast	h	4	1.00			
Person in Char	rge (Print & Sign):					4	my	WV*0			
Pogulatory Aug	thority (Print & Sigr	Fii N. ^{Amanda}	rst	<i>L</i> Taylor	ast		195	LOPO			
Negulatory Au	anonny (i nini & siyi	' /·									

REHS ID: 2543 - Taylor, Amanda

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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Verification Required



Establishment Name: MCDONALD'S Establishment ID: 3034011948

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.



- 52 5-502.11 Frequency-Removal C Both dumpsters overflowing with garbage and recycling. Refuse, recyclables, and returnables shall be removed from the premises at a frequency that will minimize the development of objectionable odors and other conditions that attract or harbor insects and rodents.
 - 5-501.113 Covering Receptacles C Lids on both dumpsters open due to overflowing garbage. Keep dumpster and other outside waste handling containers for refuse, recyclables, and returnables covered with tight-fitting lids or doors.
- 6-501.12 Cleaning, Frequency and Restrictions C 0 points. Minor wall cleaning needed in maintenance closet to remove cobwebs and dust. All physical facilities shall be maintained in good repair and shall be cleaned as often as necessary to keep them clean and by methods that prevent contamination of food products.





Establishment Name: MCDONALD'S Establishment ID: 3034011948

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.





Establishment Name: MCDONALD'S Establishment ID: 3034011948

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.





Establishment Name: MCDONALD'S	Establishment ID: 3034011948
ESTADIISTIMENT NAME: MODONALD'S	ESTADIISTIMENT ID: 30340 1 1940

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.



