

Food Establishment Inspection Report

Score: 99

Establishment Name: SUBWAY #52948

Establishment ID: 3034012142

Location Address: 4158 CLEMMONS RD

Inspection Re-Inspection

City: CLEMMONS

State: NC

Date: 05 / 22 / 2019 Status Code: A

Zip: 27012 County: 34 Forsyth

Time In: 01 : 50 am pm Time Out: 03 : 40 am pm

Permittee: SUBWAY #52948 LLC

Total Time: 1 hr 50 minutes

Telephone: (336) 448-0233

Category #: II

Wastewater System: Municipal/Community On-Site System

FDA Establishment Type: _____

No. of Risk Factor/Intervention Violations: 1

Water Supply: Municipal/Community On-Site Supply

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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	PIC Present; Demonstration-Certification by accredited program and perform duties	2	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Employee Health .2652						
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, employees knowledge; responsibilities & reporting	3	13 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction & exclusion	3	13 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose or mouth	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Handwashing sinks supplied & accessible	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Approved Source .2653, .2655						
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe & unadulterated	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: shellstock tags, parasite destruction	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Protection from Contamination .2653, .2654						
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food separated & protected	3	13 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	3	13 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, & unsafe food	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Potentially Hazardous Food Time/Temperature .2653						
16	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking time & temperatures	3	13 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
17	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding	3	13 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
18	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time & temperatures	3	13 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper hot holding temperatures	3	13 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	3	13 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking & disposition	3	13 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
22	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control: procedures & records	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Consumer Advisory .2653						
23	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked foods	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Chemical .2653, .2657						
25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved & properly used	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified stored, & used	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
30	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided & accurate	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Food Identification .2653						
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled: original container	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657						
36	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects & rodents not present; no unauthorized animals	2	1 <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used & stored	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
40	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Washing fruits & vegetables	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Proper Use of Utensils .2653, .2654						
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment & linens: properly stored, dried & handled	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Single-use & single-service articles: properly stored & used	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gloves used properly	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Utensils and Equipment .2653, .2654, .2663						
45	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, & used; test strips	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
47	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Non-food contact surfaces clean	1	03 <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sewage & waste water properly disposed	2	1 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied & cleaned	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garbage & refuse properly disposed; facilities maintained	1	03 0 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained & clean	<input checked="" type="checkbox"/>	03 0 <input type="checkbox"/> <input checked="" type="checkbox"/>
54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Meets ventilation & lighting requirements; designated areas used	1	03 <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Total Deductions:					1	



Comment Addendum to Food Establishment Inspection Report

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 Location Address: 4158 CLEMMONS RD
 City: CLEMMONS State: NC
 County: 34 Forsyth Zip: 27012
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: SUBWAY #52948 LLC
 Telephone: (336) 448-0233

Establishment ID: 3034012142
 Inspection Re-Inspection Date: 05/22/2019
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: II
 Email 1: kitesubway@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
ServSafe	Ashley N. 10/30/19	0	Chicken	Reach-in	34			
Hot Water	3 Compartment Sink	110	Lettuce	Reach-in	40			
Quat. Sani.	3 Compartment Sink	200	Lettuce	Make Unit	39			
Chlor. Sani.	Sani Station	50	Tomato	Make Unit	41			
Meatballs	Hot Holding	140	Chicken	Make Unit	41			
Tomato	Walk in Cooler	41	Ham	Make Unit	41			
Beef	Walk in Cooler	39	Roast Beef	Make Unit	41			
Meatball	Walk in Cooler	40						

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.

- 1 2-101.11 Assignment - PF- Person in charge (PIC) with the only ServSafe certification was out conducting delivery upon arrival. PIC shall be present during all hours of operation. CDI: PIC arrived towards the end of inspection. REHSI suggests another employee obtain an ANSI certified "Food Protection Manager" Certification. Opts.

- 36 6-501.112 Removing Dead or Trapped Birds, Insects, Rodents and other Pest - C- Dead insects observed in light fixture in back storage area. Remove. Dead or trapped birds, insects, rodents, and other pests shall be removed from control devices and the premises at a frequency that prevents their accumulation, decomposition, or the attraction of pests.

- 47 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils - C- Additional cleaning is needed on the wire baskets over the three compartment sink. Non food contact surfaces of equipment shall be maintained clean. Opts.

Lock Text

Person in Charge (Print & Sign): Ashley *First* Newsome *Last*

Regulatory Authority (Print & Sign): Iverly *First* Patteson *Last*



REHS ID: 2744 - Patteson, Iverly

Verification Required Date: / /

REHS Contact Phone Number: (3 3 6) 7 0 3 - 3 1 4 1



North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program
 DHHS is an equal opportunity employer.



Spell

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- 53 6-201.13 Floor and Wall Junctures, Coved, and Enclosed or Sealed - C-REPEAT- No cove basing observed in both restrooms. In food service establishments in which cleaning methods other than water flushing are used for cleaning floors, the floor and wall junctures shall be coved and closed to no larger than one thirty-second inch (1 mm).
- 54 6-303.11 Intensity-Lighting - C- Lighting (in foot candles) measured 3-5fc in the walk in freezer. Light intensity shall be at least 10 foot candles in walk in refrigeration units.



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