r	0()a	lE	<u>:S</u>	tabiisnment inspection	. K	ep	0(r	[Sc	ore: S	<u> 18.</u>	<u>5</u>	_
Fs	ta	hlis	shr	ne	nt Name: MCDONALD'S #4481									F	st	ablishment ID: 3034011978	,			_
					ress: 2470 LEWISVILLE CLEMMONS RO	AD										⊠Inspection ☐ Re-Inspection				
City: CLEMMONS State: NC							Date: 08/22/2019 Status Code: A													
						Olai	ic.	_								n: <u>Ø 3</u> : <u>Ø Ø ⊗ pm</u> Time Out: <u>Ø 6</u> : <u>Ø</u>	5 Q g	m		
Zip: 27012 County: 34 Forsyth									Total Time: 3 hrs 5 minutes											
		nitt		•	RAT RACE MANAGEMENT, INC.						Category #: II									
Te	ele	ph	one	e: .	(336) 766-6509										_	· -		-		
W	as	tev	vat	er	System: ⊠Municipal/Community [Oı	n-S	Site	e S	Sys	ter	m	 -	DA	ES	stablishment Type: Fast Food Restaurant Risk Factor/Intervention Violations:	2			_
W	ate	er S	Sup	pl	y: ⊠Municipal/Community □ On-	Site	Sι	ıpp	oly	,						Risk Factor/Intervention Violations: _ Repeat Risk Factor/Intervention Viola		0		_
	Foo	odb	orn	e II	ness Risk Factors and Public Health Int	erve	ntic	ons	;		Г					Good Retail Practices		-		_
ı	Risk	fact	ors:	Cont	ibuting factors that increase the chance of developing foodb	orne ill	Ines					Goo	d R	etail F	rac	tices: Preventative measures to control the addition of patho	ogens, che	mica!	ls,	
_ '	_		_	_	ventions: Control measures to prevent foodborne illness or							I				and physical objects into foods.	T	TT		_
(out		N/C	Compliance Status .2652	OUT		CDI	R	VR	9		_	T N/A		- 1	OUT	CDI	R	Vŀ
1	X	_	$\overline{}$	Т	PIC Present; Demonstration-Certification by	2	0	П		П				$\overline{}$	u vv	Pasteurized eggs used where required	1 0.5 0			F
E		loye		ealth	accredited program and perform duties .2652						_	×		+		Water and ice from approved source	210			_
2	×		П	Π	Management, employees knowledge; responsibilities & reporting	3 1.5	0							_		Variance obtained for specialized processing		+	믬	E
3	×				Proper use of reporting, restriction & exclusion	3 1.5	0	П	П	П						methods	1 0.5 0	Ш	Ш	
_			gier	nic F	ractices .2652, .2653						<u>г</u>		rei	т —	atur	re Control .2653, .2654 Proper cooling methods used; adequate	1 🗶 0			
4	×		Ĭ		Proper eating, tasting, drinking, or tobacco use	21	0					1		+		equipment for temperature control			믬	E
5	×				No discharge from eyes, nose or mouth	1 0.5	0							+			1 0.5 0		Щ	L
_		entir	ng C	onta	mination by Hands .2652, .2653, .2655, .2656				п				Е		×	Approved thawing methods used	1 0.5 0	49		Ē
6	X				Hands clean & properly washed	42	0				34	×]		Thermometers provided & accurate	1 0.5 0			Ē
7		X			No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5	X	X				_	lde	ntific	atic				_	
8	X				Handwashing sinks supplied & accessible	2 1	0	П	П	П		×	L		-	Food properly labeled: original container	210	Ш		L
		rove	d Sc	ourc			احًا					_			Foo	od Contamination .2652, .2653, .2654, .2656, .265	TTT		一	
	×		Γ		Food obtained from approved source	21	0					×	L	1		animals	210		믜	_
10				×	Food received at proper temperature	21	0	П	П	П	37	×		_		Contamination prevented during food preparation, storage & display	210			L
11	X		H		Food in good condition, safe & unadulterated	21	0	Ħ	П	П	38		X			Personal cleanliness	0.5 0		X	L
12			×	$\frac{1}{\Box}$	Required records available: shellstock tags,	21	\vdash				39	×]		Wiping cloths: properly used & stored	1 0.5 0			Ē
_		ectio			parasite destruction Contamination .2653, .2654						40					Washing fruits & vegetables	1 0.5 0			Ē
	×	_	П	ĪΠ	Food separated & protected	3 1.5	0	П	П	П					fUte	ensils .2653, .2654				
H		×			Food-contact surfaces; cleaned & sanitized	3 1.5	\vdash	X			41	×				In-use utensils: properly stored	1 0.5 0			L
H	X				Proper disposition of returned, previously served,	21	\vdash				42	×]		Utensils, equipment & linens: properly stored, dried & handled	1 0.5 0			Ε
_			llv H	272	reconditioned, & unsafe food dous Food TIme/Temperature .2653		Ш	닠	Ш		43	×]		Single-use & single-service articles: properly stored & used	1 0.5 0			Ē
	×				Proper cooking time & temperatures	3 1.5	0	П		П	\vdash	×	Г	1		Gloves used properly	1 0.5 0	tot	\Box	Ē
17	_			×	Proper reheating procedures for hot holding	3 1.5		7	\overline{H}				ils	and	Egu	ipment .2653, .2654, .2663				
-				┢	Proper cooling time & temperatures	F					45		×	1		Equipment, food & non-food contact surfaces approved, cleanable, properly designed,	211	П	×	_
18	\vdash		Ľ	×	1	3 1.5	\vdash		븨					_		constructed, & used Warewashing facilities: installed, maintained, &				_
⊢	X	Ш	Ш		Proper hot holding temperatures	3 1.5		Ш	Щ	Ш	46	X				used; test strips	1 0.5 0			Ę
20	×				Proper cold holding temperatures	3 1.5	0				47		×]		Non-food contact surfaces clean	1 0.5			
21	X				Proper date marking & disposition	3 1.5	0							Faci	litie				_	
22	×				Time as a public health control: procedures & records	21	0				48	×	\vdash	+		Hot & cold water available; adequate pressure	210			느
(Con	sum	$\overline{}$	dvis							49		X			Plumbing installed; proper backflow devices	211			Ę
_			×	L	Consumer advisory provided for raw or undercooked foods	1 0.5	0				50	×]		Sewage & waste water properly disposed	210			Ē
	Ľ	ly S	$\overline{}$	eptik	le Populations .2653 Pasteurized foods used; prohibited foods not						51	×				Toilet facilities: properly constructed, supplied & cleaned	1 0.5 0			Ē
24		∐ nice	X		offered	3 [1.5		니	믜	Ш	52	×	Е			Garbage & refuse properly disposed; facilities maintained	1 0.5 0	同	╗	_ [
25		nica 		T	.2653, .2657 Food additives: approved & properly used	1 0.5	0						×			Physical facilities installed, maintained & clean	1 0.5	\Box	귀	_
H	-	-			,	214	\vdash				_	-		1		•	+++	+	귀	Ξ
20	X	<u> </u>	<u> </u>		Toxic substances properly identified stored, & used	2 1	0	믜	Ш	Ш	54	×	╚	1		Meets ventilation & lighting requirements; designated areas used	1 0.5 0		\Box	느



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Conformance with Approved Procedures .2653, .2654, .2658

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



Total Deductions:

		Comme	nt Add	endum to I	Food Es	<u>stablishmer</u>	nt Inspectio	n Report					
Establi	ishmer	nt Name: MCDONA	LD'S #4481			Establishment ID: 3034011978							
	tion Ac	Idress: 2470 LEWIS	SVILLE CLEN		te: NC	☐ Inspection ☐ Re-Inspection ☐ Date: 08/22/2019 Comment Addendum Attached? ☐ Status Code: A							
•	nty: <u>34</u>			_ Zip: 27012		Water sample taken? Yes No Category #: II							
Water	Supply:	ystem: ☒ Municipal/C ☒ Municipal/C RAT RACE MANAG	ommunity [On-Site System		Email 1: ral.4481@us.stores.mcd.com Email 2:							
		(336) 766-6509	•			Email 3:							
				Tempe	rature Oł	servations							
			Cold Ho	•		is now 41 De	arees or les						
Item CFPM		Location H.Fields6/19/20		Item Chicken	Location final cook		np Item French fries	Location hot holding	Temp 135				
Hot water		3 compartment sink	124	Hamburger	drawer cool	er 41							
Quat		3 compartment sink	200	Shredded	walk in cool	er 41							
Chlorine		sanitizing bucket	100	Chicken	hot holding	143							
Gravy		reach in	39	Sausage patty	hot holding	149							
Gravy		walkincooler3:14pm	50	Air	reach in co	oler 37							
Hamburger		final cook	181	Air	reach in co	oler 32							
Burrito		drawer cooler	41	Air ———————	reach in co	oler 39							
p	3-301.1 placing with the	olations cited in this re 1 Preventing Conta on the holder in the ir bare hands and s //ENT. CDI: Emp	amination fr back of th shall use su	om Hands - P,P e hot holding ur iitable UTENSIL	PF Employenit. FOOD E	e with bare hand EMPLOYEES ma	I touch the Frenc y not contact exp	h fry that was oosed, READ\	hanging out wher Y-TO-EAT FOOD				
p	olastic c	1 (A) Equipment, F containers and lids. compartment sink.	Food-conf										
ii f ii h	n coole ollowing n an ice nolding	5 Cooling Methods r doors (4 doors to g methods: 1. Shal e water bath, 5. Us equipment, food sl erhead contaminat	tal) are ope low pans, 2 e containers nall be: 1. A ion. CDI: (ned/closed duri Smaller or thir s that facilitate h .rranged to prov Gravy loosely co	ng service. nner portion neat transfe ide maximu	Cooling shall be s, 3. Rapid coolir r, 6. Add ice as ir m heat transfer a	accomplished by ag equipment, 4. agredient or 7. Of and 2. Loosely co	y using one or Stir the food ir her effective n overed or unco	more of the n container placed nethods. In cold				
Person	in Char	ge (Print & Sign):	Heather	irst irst	Fields	est	Beat	h 7	7em				
Regulat	ory Aut	hority (Print & Sign)		irst .	Sakamoto R	ast EHSI	<u> </u>	1-1-16	1-11				
		REHS ID	2685 - S	Sakamoto, Jill		Ver	ification Required	Date:/	/				

REHS Contact Phone Number: (336)703-3137

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program

DHHS is an equal opportunity employer.

Page 2 of ______ Food Establishment Inspection Report, 3/2013



Establishment Name: MCDONALD'S #4481 Establishment ID: 3034011978

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



- 2-402.11 Effectiveness-Hair Restraints C REPEAT Employees working with food such as working at the fries station were not wearing a hair restraint. FOOD EMPLOYEES shall wear hair restraints such as hats, hair coverings or nets, beard restraints, and clothing that covers body hair, that are designed and worn to effectively keep their hair from contacting exposed FOOD; clean EQUIPMENT, UTENSILS, and LINENS; and unwrapped SINGLE-SERVICE and SINGLE-USE ARTICLES.
- 4-501.11 Good Repair and Proper Adjustment-Equipment C REPEAT. Top caps missing on the carts holding food or empty happy meal boxes located in the front service area. Damaged curtains with silver tape in the walk in freezer. Two separated or damaged plastic containers. Build up of ice on the back and shelving in the reach in freezer. Missing damaged inner trim located in the reach in freezer. Frayed/burnt curtains on the toaster machine. Peeling paint on the rack used to hold buttermilk and utensils. Peeling on the cover in front of the soda machine by the drive thru window. Equipment shall be maintained in good repair. CDI: Plastic container was discarded.
- 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils C Debris by the holder of the fries in the hot holding unit. Debris inside the reach in freezer. Nonfood-contact surfaces of equipment shall be free from the accumulation of dust, dirt, food residue and other debris. CDI: Employee started to clean the bottom of the reach in freezer.
- 5-205.15 (B) System maintained in good repair C Faucet not secured at the 3 compartment sink (right side). Leak at the plastic bag wrapped around the knob to the black hose for the dispensers located at the 3 compartment sink. Plumbing system shall be maintained in good repair.
- 6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods C Cracked floor tiles in the walk in freezer on the right hand side upon entering from the walk in cooler. Physical facilities shall be maintained in good repair.





Establishment Name: MCDONALD'S #4481 Establishment ID: 3034011978

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