

# Food Establishment Inspection Report

Score: 98.5

Establishment Name: JERSEY MIKE'S SUBS

Establishment ID: 3034012381

Location Address: 4192 CLEMMONS RD

City: CLEMMONS State: North Carolina

Zip: 27012 County: 34 Forsyth

Permittee: AGNER ENTERPRISES LLC

Telephone: (336) 602-2844

Inspection  Re-Inspection

**Wastewater System:**

Municipal/Community  On-Site System

**Water Supply:**

Municipal/Community  On-Site Supply

Date: 11/23/2021 Status Code: A

Time In: 1:50 PM Time Out: 4:20 PM

Category#: II

FDA Establishment Type: Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 1

No. of Repeat Risk Factor/Intervention Violations: 0

**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

Compliance Status		OUT	CDI	R	VR
<b>Supervision .2652</b>					
1	<input checked="" type="checkbox"/> OUT/N/A				
PIC Present, demonstrates knowledge, & performs duties		1	0		
2	<input checked="" type="checkbox"/> OUT/N/A				
Certified Food Protection Manager		1	0		
<b>Employee Health .2652</b>					
3	<input checked="" type="checkbox"/> OUT				
Management, food & conditional employee; knowledge, responsibilities & reporting		2	1	0	
4	<input checked="" type="checkbox"/> OUT				
Proper use of reporting, restriction & exclusion		3	1.5	0	
5	<input checked="" type="checkbox"/> IN				
Procedures for responding to vomiting & diarrheal events		1	0.5	X	X
<b>Good Hygienic Practices .2652, .2653</b>					
6	<input checked="" type="checkbox"/> OUT				
Proper eating, tasting, drinking or tobacco use		1	0.5	0	
7	<input checked="" type="checkbox"/> OUT				
No discharge from eyes, nose, and mouth		1	0.5	0	
<b>Preventing Contamination by Hands .2652, .2653, .2655, .2656</b>					
8	<input checked="" type="checkbox"/> OUT				
Hands clean & properly washed		4	2	0	
9	<input checked="" type="checkbox"/> OUT/N/A/N/O				
No bare hand contact with RTE foods or pre-approved alternate procedure properly followed		4	2	0	
10	<input checked="" type="checkbox"/> OUT/N/A				
Handwashing sinks supplied & accessible		2	1	0	
<b>Approved Source .2653, .2655</b>					
11	<input checked="" type="checkbox"/> OUT				
Food obtained from approved source		2	1	0	
12	<input checked="" type="checkbox"/> IN				
Food received at proper temperature		2	1	0	
13	<input checked="" type="checkbox"/> OUT				
Food in good condition, safe & unadulterated		2	1	0	
14	<input checked="" type="checkbox"/> IN				
Required records available: shellstock tags, parasite destruction		2	1	0	
<b>Protection from Contamination .2653, .2654</b>					
15	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Food separated & protected		3	1.5	0	
16	<input checked="" type="checkbox"/> OUT				
Food-contact surfaces: cleaned & sanitized		3	1.5	0	
17	<input checked="" type="checkbox"/> OUT				
Proper disposition of returned, previously served, reconditioned & unsafe food		2	1	0	
<b>Potentially Hazardous Food Time/Temperature .2653</b>					
18	<input checked="" type="checkbox"/> IN				
Proper cooking time & temperatures		3	1.5	0	
19	<input checked="" type="checkbox"/> IN				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> IN				
Proper cooling time & temperatures		3	1.5	0	
21	<input checked="" type="checkbox"/> IN				
Proper hot holding temperatures		3	1.5	0	
22	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper cold holding temperatures		3	1.5	0	
23	<input checked="" type="checkbox"/> OUT/N/A/N/O				
Proper date marking & disposition		3	1.5	0	
24	<input checked="" type="checkbox"/> IN				
Time as a Public Health Control; procedures & records		3	1.5	0	
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> IN				
Food additives: approved & properly used		1	0.5	0	
28	<input checked="" type="checkbox"/> OUT				
Toxic substances properly identified stored & used		2	1	0	
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
29	<input checked="" type="checkbox"/> IN				
Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan		2	1	0	

**Good Retail Practices**

Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Compliance Status		OUT	CDI	R	VR
<b>Safe Food and Water .2653, .2655, .2658</b>					
30	<input checked="" type="checkbox"/> IN				
Pasteurized eggs used where required		1	0.5	0	
31	<input checked="" type="checkbox"/> OUT				
Water and ice from approved source		2	1	0	
32	<input checked="" type="checkbox"/> IN				
Variance obtained for specialized processing methods		2	1	0	
<b>Food Temperature Control .2653, .2654</b>					
33	<input checked="" type="checkbox"/> IN				
Proper cooling methods used; adequate equipment for temperature control		1	0.5	0	X
34	<input checked="" type="checkbox"/> IN				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> OUT				
Approved thawing methods used		1	0.5	0	
36	<input checked="" type="checkbox"/> OUT				
Thermometers provided & accurate		1	0.5	0	
<b>Food Identification .2653</b>					
37	<input checked="" type="checkbox"/> OUT				
Food properly labeled: original container		2	1	0	
<b>Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657</b>					
38	<input checked="" type="checkbox"/> OUT				
Insects & rodents not present; no unauthorized animals		2	1	0	
39	<input checked="" type="checkbox"/> OUT				
Contamination prevented during food preparation, storage & display		2	1	0	
40	<input checked="" type="checkbox"/> OUT				
Personal cleanliness		1	0.5	0	
41	<input checked="" type="checkbox"/> OUT				
Wiping cloths: properly used & stored		1	0.5	0	
42	<input checked="" type="checkbox"/> OUT				
Washing fruits & vegetables		1	0.5	0	
<b>Proper Use of Utensils .2653, .2654</b>					
43	<input checked="" type="checkbox"/> OUT				
In-use utensils: properly stored		1	0.5	0	
44	<input checked="" type="checkbox"/> OUT				
Utensils, equipment & linens: properly stored, dried & handled		1	0.5	0	
45	<input checked="" type="checkbox"/> OUT				
Single-use & single-service articles: properly stored & used		1	0.5	0	
46	<input checked="" type="checkbox"/> OUT				
Gloves used properly		1	0.5	0	
<b>Utensils and Equipment .2653, .2654, .2663</b>					
47	<input checked="" type="checkbox"/> OUT				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	0	
48	<input checked="" type="checkbox"/> IN				
Warewashing facilities: installed, maintained & used; test strips		1	0.5	0	X
49	<input checked="" type="checkbox"/> OUT				
Non-food contact surfaces clean		1	0.5	0	
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT				
Hot & cold water available; adequate pressure		1	0.5	0	
51	<input checked="" type="checkbox"/> OUT				
Plumbing installed; proper backflow devices		2	1	0	
52	<input checked="" type="checkbox"/> OUT				
Sewage & wastewater properly disposed		2	1	0	
53	<input checked="" type="checkbox"/> OUT				
Toilet facilities: properly constructed, supplied & cleaned		1	0.5	0	
54	<input checked="" type="checkbox"/> OUT				
Garbage & refuse properly disposed; facilities maintained		1	0.5	0	
55	<input checked="" type="checkbox"/> OUT				
Physical facilities installed, maintained & clean		1	0.5	0	
56	<input checked="" type="checkbox"/> IN				
Meets ventilation & lighting requirements; designated areas used		1	0.5	0	
<b>TOTAL DEDUCTIONS:</b>					1.5



# Comment Addendum to Food Establishment Inspection Report

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 Location Address: 4192 CLEMMONS RD  
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 Telephone: (336) 602-2844

Establishment ID: 3034012381  
 Inspection  Re-Inspection Date: 11/23/2021  
 Comment Addendum Attached?  Status Code: A  
 Water sample taken?  Yes  No Category #: II  
 Email 1: jmsubs.clemmons@gmail.com  
 Email 2:  
 Email 3:

## Temperature Observations

**Effective January 1, 2019 Cold Holding is now 41 degrees or less**

Item	Location	Temp	Item	Location	Temp	Item	Location	Temp
hot water	three compartment sink	130						
quat sanitizer	three compartment sink in room	200						
sliced tomatoes	cooling @ 2:00 pm	47						
sliced tomatoes	cooling @ 2:20 pm	38						
shredded lettuce	cooling @ 2:00 pm	43						
shredded lettuce	cooling @ 2:20 pm	40						
roast beef	walk-in cooler	38						
ham	walk-in cooler	36						
sliced cheese	walk-in cooler	37						
beef	2 door pull unit	30						
ham	display case	34						
turkey	display case	36						
tuna fish	display case	34						
cole slaw	display case	35						
shredded lettuce	front line	39						
tomatoes	front line	39						
tomatoes	small make unit	38						
ServSafe	Paul Hicks 09/18/2025	0						

Person in Charge (Print & Sign): Paul *Paul Hicks*  
*First* Hicks *Last*  
 Regulatory Authority (Print & Sign): Craig *Craig Bethel*  
*First* Bethel *Last*

REHS ID: 1766 - Bethel, Craig Verification Required Date: \_\_\_\_\_

REHS Contact Phone Number: (336) 703-3143



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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## Comment Addendum to Inspection Report

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### 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.

- 5 2-501.11 Clean-up of Vomiting and Diarrheal Event (Pf)  
No written procedures in place at the time of inspection.  
A food establishment shall have written procedures for employees to follow when responding to vomiting or diarrheal events that involve the discharge of vomitus or fecal matter onto surfaces in the food establishment. The procedures shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter.  
CDI - Information was left with management.
- 33 3-501.15 Cooling Methods (Pf)  
Tomatoes and lettuce were covered and in large containers. Tomatoes measured 47F and lettuce measured 43F. Both items were prep between 10:00 -11:00 am this morning. Removing covers and placing the tomatoes in the walk-in freezer. 41F or below was achieved on both items within 20 minutes.
- 48 4-501.19 Manual Warewashing Equipment, Wash Solution Temperature (Pf)  
Wash water at the three compartment sink measured 93F.  
The temperature of the wash solution in manual warewashing equipment shall be maintained at not less than 43oC (110oF) or the temperature specified on the cleaning agent manufacturer's label instructions. Pf  
CDI - Wash water was drained and new water above 110F was added.
- 56 6-303.11 Intensity - Lighting (C)  
Low lighting measured 34-60 f/c throughout the facility.  
The light intensity shall be:At least 50 foot candles at a surface where a food employee is working with food or working with utensils or equipment such as knives, slicers, grinders, or saws where employee safety is a factor.