

# Food Establishment Inspection Report

Score: 96.5

Establishment Name: FULL MOON OYSTER BAR

Establishment ID: 3034011536

Location Address: 1473 RIVER RIDGE ROAD

City: CLEMMONS State: North Carolina

Zip: 27012 County: 34 Forsyth

Permittee: FULL MOON INC

Telephone: (336) 712-8200

☒ Inspection ☐ Re-Inspection

## Wastewater System:

☒ Municipal/Community ☐ On-Site System

## Water Supply:

☒ Municipal/Community ☐ On-Site Supply

Date: 09/27/2022 Status Code: A

Time In: 3:40 PM Time Out: 6:50 PM

Category#: IV

FDA Establishment Type: Full-Service 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"/> OUT	Procedures for responding to vomiting & diarrheal events	1	0.5	0
<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"/> OUT	N/O 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"/> OUT/N/A/N/O	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"/> OUT/N/A/N/O	Proper cooking time & temperatures	3	1.5	0
19	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Proper reheating procedures for hot holding	3	1.5	0
20	<input checked="" type="checkbox"/> OUT/N/A/N/O	Proper cooling time & temperatures	3	1.5	0
21	<input checked="" type="checkbox"/> OUT/N/A/N/O	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"/> IN OUT/N/A/N/O	Proper date marking & disposition	3	0	X
24	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Time as a Public Health Control; procedures & records	3	1.5	0
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> OUT/N/A	Consumer advisory provided for raw/undercooked foods	1	0.5	0
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN OUT/N/A	Pasteurized foods used; prohibited foods not offered	3	1.5	0
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> IN OUT/N/A	Food additives: approved & properly used	1	0.5	0
28	<input checked="" type="checkbox"/> OUT/N/A	Toxic substances properly identified stored & used	2	1	0
<b>Conformance with Approved Procedures .2653, .2654, .2658</b>					
29	<input checked="" type="checkbox"/> IN OUT/N/A	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 OUT/N/A	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 OUT/N/A	Variance obtained for specialized processing methods	2	1	0
<b>Food Temperature Control .2653, .2654</b>					
33	<input checked="" type="checkbox"/> IN OUT	Proper cooling methods used; adequate equipment for temperature control	1	0	X
34	<input checked="" type="checkbox"/> IN OUT/N/A	Plant food properly cooked for hot holding	1	0.5	0
35	<input checked="" type="checkbox"/> IN OUT/N/A/N/O	Approved thawing methods used	1	0.5	X
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"/> IN OUT	Contamination prevented during food preparation, storage & display	2	1	X
40	<input checked="" type="checkbox"/> IN OUT	Personal cleanliness	1	0.5	X
41	<input checked="" type="checkbox"/> OUT	Wiping cloths: properly used & stored	1	0.5	0
42	<input checked="" type="checkbox"/> OUT/N/A	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"/> OUT	Warewashing facilities: installed, maintained & used; test strips	1	0.5	0
49	<input checked="" type="checkbox"/> IN OUT	Non-food contact surfaces clean	X	0.5	0
<b>Physical Facilities .2654, .2655, .2656</b>					
50	<input checked="" type="checkbox"/> OUT/N/A	Hot & cold water available; adequate pressure	1	0.5	0
51	<input checked="" type="checkbox"/> IN OUT	Plumbing installed; proper backflow devices	2	1	X
52	<input checked="" type="checkbox"/> OUT	Sewage & wastewater properly disposed	2	1	0
53	<input checked="" type="checkbox"/> OUT/N/A	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"/> IN OUT	Physical facilities installed, maintained & clean	1	0	X
56	<input checked="" type="checkbox"/> OUT	Meets ventilation & lighting requirements; designated areas used	1	0.5	0
<b>TOTAL DEDUCTIONS:</b>					3.5



# Comment Addendum to Food Establishment Inspection Report

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Permittee: FULL MOON INC

Telephone: (336) 712-8200

Establishment ID: 3034011536

☒ Inspection ☐ Re-Inspection Date: 09/27/2022

Comment Addendum Attached? ☒ Status Code: A

Water sample taken? ☐ Yes ☒ No Category #: IV

Email 1: amandafullmoon@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
ServSafe - 2/13/2025	Cody Shin	00	grits	grill station unit	38			
hot water	3-comp sink	137	cream cheese mixture (moon)	walk-in cooler	40			
final rinse	dishmachine	181	roasted red peppers	walk-in cooler	38			
qt sanitizer (ppm)	sani bucket	400	coleslaw	walk-in cooler	36			
qt sanitizer (ppm)	sani bucket	200	chili sauce	walk-in cooler	40			
broccoli	cooling in walk-in cooler @ 4:02nm	73	crab dip	walk-in cooler	39			
broccoli	cooling in walk-in cooler @ 4:37nm	62	cooked pasta	walk-in cooler	40			
alligator cheesecake	cooling in walk-in cooler @ 4:41nm	103	raw shrimp	ice bath	37			
alligator cheesecake	cooling in walk-in cooler @ 5:28nm	76	scallops	ice bath	38			
salmon	final cook	147	cooked shrimp	salad make unit	39			
pinapple salsa	make unit (top)	40	diced tomatoes	salad make unit	41			
cooked chicken	make unit (top)	41	mashed potatoes	hot holding at bar	158			
diced tomatoes	make unit (top)	40	mashed potatoes	hot holding at bar	147			
seaweed salad	make unit (reach-in)	39	FL-54-SP	shellstock tags	00			
crab dip	make unit (reach-in)	40	VA-846-SP	shellstock tags	00			
rice	steam well	140	VA-1517-SS	shellstock tags	00			
corn	steam well	138	PE-2386-SS	shellstock tags	00			
mashed potatoes	steam well	145						
bisque	soup cooker	164						
clam chowder	soup cooker	159						

First  
Person in Charge (Print & Sign): Cody

Last  
Shin

First  
Regulatory Authority (Print & Sign): Travis

Last  
Addis

*[Signature]*

*[Signature]*

REHS ID: 3095 - Addis, Travis

Verification Required Date:

REHS Contact Phone Number:

Authorize final report to  
be received via Email:



North Carolina Department of Health & Human Services

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• Division of Public Health • Environmental Health Section  
DHHS is an equal opportunity employer.  
Food Establishment Inspection Report, 10/2021

• Food Protection Program



## Comment Addendum to Inspection Report

**Establishment Name:** FULL MOON OYSTER BAR

**Establishment ID:** 3034011536

**Date:** 09/27/2022 **Time In:** 3:40 PM **Time Out:** 6:50 PM

### 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.

- 23 3-501.17 Ready-To-Eat Time / Temperature Control for Safety Food, Date Marking (Pf) Multiple TCS foods were stored in cooling units without date marking; in make unit: 1 container of cooked chicken, 1 container of pineapple salsa, 1 container of diced tomatoes, 1 container of crab dip; in salad make unit: 1 container of diced tomatoes. Ready-to-eat, time/temperature control for safety food prepared and held in a food establishment for more than 24 hours shall be clearly marked to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded when held at a temperature of 41F or less for a maximum of 7 days. The day of preparation shall be counted as Day 1. CDI: REHS intervention: per PIC, all items were prepped earlier today and were date marked accordingly.
- 33 3-501.15 Cooling Methods (Pf) At the beginning of inspection, 1 container of steamed broccoli measured at a range of 76-83F in the make unit. Upon inquiry, the PIC stated the broccoli was recently cooked and set in the unit to cool. Prep/make units are designed to hold food at cold temperatures once they have cooled to 41F or less and are not intended for cooling foods. Use walk-in cooler or freezer when cooling foods and arrange food in shallow, metal pans to allow for optimal cooling. CDI: REHS intervention; education provided. Broccoli was relocated to shallow pan and set in the walk-in cooler.
- 35 3-501.13 (E) Thawing (Pf) Reduced oxygen packaged fish in walk-in cooler were thawed in the original, unopened package. Reduced oxygen packaged fish that bears a label indicating that it is to be kept frozen until time of use shall be removed from the reduced oxygen environment: prior to its thawing under refrigeration. CDI: Education provided; all packages were cut open.
- 39 3-307.11 Miscellaneous Sources of Contamination (C) Clean dusty fan above salad make unit/salad prep space. Food shall be protected from contamination that may result from a factor or source not specified under Subparts 3-301 - 3-306.
- 40 2-402.11 Effectiveness - Hair Restraints (C) 1 food employee was observed not wearing a hair restraint while working with food on the cook line. 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.
- 49 4-601.11 (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils (C) REPEAT. The following areas require additional cleaning: clean interior of all refrigeration and freezers as there is food debris, legs and bottom shelves of prep tables, interior and exterior of roaster, can rack, interior of beer coolers at main bar and keg cooler at side bar. Nonfood-contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.
- 51 5-205.15 (B) System Maintained in Good Repair (C) Repair leaking faucet at 3-comp sink. A plumbing system shall be maintained in a state of good repair.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) REPEAT. Additional cleaning is needed on floors under cooking and cooling equipment. Clean FRP where food splash is present. Physical facilities shall be cleaned as often as necessary to be maintained.
- 6-501.11 Repairing - Premises, Structures, Attachments, and Fixtures - Methods (C) Repair/replace dusty ceiling vents above cook line and prep spaces. Physical facilities shall be maintained in good repair.