

Food Establishment Inspection Report

Score: 98

Establishment Name: BURGER KING 108 CARROLS 757

Establishment ID: 3034012182

Location Address: 2100 PETERS CREEK PARKWAY

City: WINSTON SALEM State: North Carolina

Zip: 27127 County: 34 Forsyth

Permittee: CARROLS LLC BK

Telephone: (336) 723-6065

Inspection Re-Inspection

Wastewater System:

Municipal/Community On-Site System

Water Supply:

Municipal/Community On-Site Supply

Date: 09/28/2022 Status Code: A

Time In: 9:30 AM Time Out: 12:15 PM

Category#: III

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 |
|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-----|-----|---|----|
| Supervision .2652 | | | | | |
| 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 | | |
| Employee Health .2652 | | | | | |
| 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 | |
| Good Hygienic Practices .2652, .2653 | | | | | |
| 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 | |
| Preventing Contamination by Hands .2652, .2653, .2655, .2656 | | | | | |
| 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"/> IN <input checked="" type="checkbox"/> T/N/A | | | | |
| Handwashing sinks supplied & accessible | | 2 | X | 0 | X |
| Approved Source .2653, .2655 | | | | | |
| 11 | <input checked="" type="checkbox"/> OUT | | | | |
| Food obtained from approved source | | 2 | 1 | 0 | |
| 12 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Required records available: shellstock tags, parasite destruction | | 2 | 1 | 0 | |
| Protection from Contamination .2653, .2654 | | | | | |
| 15 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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 | |
| Potentially Hazardous Food Time/Temperature .2653 | | | | | |
| 18 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper cooking time & temperatures | | 3 | 1.5 | 0 | |
| 19 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper reheating procedures for hot holding | | 3 | 1.5 | 0 | |
| 20 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper cooling time & temperatures | | 3 | 1.5 | 0 | |
| 21 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper hot holding temperatures | | 3 | 1.5 | 0 | |
| 22 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper cold holding temperatures | | 3 | 1.5 | 0 | |
| 23 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Proper date marking & disposition | | 3 | 1.5 | 0 | |
| 24 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A/N/O | | | | |
| Time as a Public Health Control; procedures & records | | 3 | 1.5 | 0 | |
| Consumer Advisory .2653 | | | | | |
| 25 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Consumer advisory provided for raw/undercooked foods | | 1 | 0.5 | 0 | |
| Highly Susceptible Populations .2653 | | | | | |
| 26 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Pasteurized foods used; prohibited foods not offered | | 3 | 1.5 | 0 | |
| Chemical .2653, .2657 | | | | | |
| 27 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Food additives: approved & properly used | | 1 | 0.5 | 0 | |
| 28 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Toxic substances properly identified stored & used | | 2 | 1 | 0 | |
| Conformance with Approved Procedures .2653, .2654, .2658 | | | | | |
| 29 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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 |
|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|---|----------|
| Safe Food and Water .2653, .2655, .2658 | | | | | |
| 30 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| Variance obtained for specialized processing methods | | 2 | 1 | 0 | |
| Food Temperature Control .2653, .2654 | | | | | |
| 33 | <input checked="" type="checkbox"/> OUT | | | | |
| Proper cooling methods used; adequate equipment for temperature control | | 1 | 0.5 | 0 | |
| 34 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Plant food properly cooked for hot holding | | 1 | 0.5 | 0 | |
| 35 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O | | | | |
| Approved thawing methods used | | 1 | 0.5 | 0 | |
| 36 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Thermometers provided & accurate | | 1 | 0.5 | X | X |
| Food Identification .2653 | | | | | |
| 37 | <input checked="" type="checkbox"/> OUT | | | | |
| Food properly labeled: original container | | 2 | 1 | 0 | |
| Prevention of Food Contamination .2652, .2653, .2654, .2656, .2657 | | | | | |
| 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 <input checked="" type="checkbox"/> N/A | | | | |
| Washing fruits & vegetables | | 1 | 0.5 | 0 | |
| Proper Use of Utensils .2653, .2654 | | | | | |
| 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"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Single-use & single-service articles: properly stored & used | | 1 | 0.5 | X | X |
| 46 | <input checked="" type="checkbox"/> OUT | | | | |
| Gloves used properly | | 1 | 0.5 | 0 | |
| Utensils and Equipment .2653, .2654, .2663 | | | | | |
| 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 <input checked="" type="checkbox"/> OUT | | | | |
| Non-food contact surfaces clean | | 1 | X | 0 | |
| Physical Facilities .2654, .2655, .2656 | | | | | |
| 50 | <input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A | | | | |
| 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 <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> OUT | | | | |
| Physical facilities installed, maintained & clean | | 1 | X | 0 | |
| 56 | <input checked="" type="checkbox"/> IN <input checked="" type="checkbox"/> OUT | | | | |
| Meets ventilation & lighting requirements; designated areas used | | 1 | 0.5 | X | |
| TOTAL DEDUCTIONS: | | | | | 2 |



Comment Addendum to Food Establishment Inspection Report

Establishment Name: BURGER KING 108 CARROLS 757
 Location Address: 2100 PETERS CREEK PARKWAY
 City: WINSTON SALEM State: NC
 County: 34 Forsyth Zip: 27127
 Wastewater System: Municipal/Community On-Site System
 Water Supply: Municipal/Community On-Site System
 Permittee: CARROLS LLC BK
 Telephone: (336) 723-6065

Establishment ID: 3034012182
 Inspection Re-Inspection Date: 09/28/2022
 Comment Addendum Attached? Status Code: A
 Water sample taken? Yes No Category #: III
 Email 1: dchaplin@carrols.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 | 145 | | | | | | |
| quat sanitizer | three compartment sink in room | 200 | | | | | | |
| quat sanitizer | buckets in ppm | 200 | | | | | | |
| eggs | final cook temp | 187 | | | | | | |
| sausage | hot holding | 137 | | | | | | |
| eggs | hot holding | 140 | | | | | | |
| produce wash | prep sink | 7.0 | | | | | | |
| sausage and egg | hot holding | 140 | | | | | | |
| air temp | walk-in cooler | 39 | | | | | | |
| lettuce | walk-in cooler | 38 | | | | | | |
| sliced tomatoes | front pull unit | 39 | | | | | | |

First
 Person in Charge (Print & Sign): Danielle
First
 Regulatory Authority (Print & Sign): Craig

Last
 Kimbrough
Last
 Bethel




REHS ID: 1766 - Bethel, Craig
 REHS Contact Phone Number: (336) 703-3143

Verification Required Date: _____
 Authorize final report to be received via Email: _____

Comment Addendum to Inspection Report

Establishment Name: BURGER KING 108 CARROLS 757

Establishment ID: 3034012182

Date: 09/28/2022 **Time In:** 9:30 AM **Time Out:** 12:15 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.

- 10 6-301.12 Hand Drying Provision (Pf)(Repeat)
Papertowels for handwashing were not available due to low batteries at the back handwashing sink and Drive-Thru sink. Each handwashing sink shall be supplied with individual, disposable towels.
CDI - Papertowels were provided next to the sinks until the batteries were replaced by the end of the inspection.
- 36 4-203.11 Temperature Measuring Devices, Food - Accuracy (Pf)(0pts)
Thermometer was made available at the being of the inspection, but needed new batteries.
(A) FOOD TEMPERATURE MEASURING DEVICES that are scaled only in Celsius or dually scaled in Celsius and Fahrenheit shall be accurate to ± 1 oC in the intended range of use. Pf
CDI - Batteries were replaced by the end of the inspection and thermometer was accurate.
- 45 4-903.11 (A) and (C) Equipment, Utensils, Linens and Single-Service and Single-Use Articles - Storing (C)(0pts)
Single-use cup on the front counter were not being properly protected. Sleeve was half way down the stack.
EQUIPMENT and UTENSILS, laundered LINENS, and SINGLE-SERVICE and SINGLEUSE ARTICLES shall be stored.
CDI - Sleeve were pulled up to the top of the stack of cups.
(2) Where they are not exposed to splash, dust, or other contamination
- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood Contact Surfaces, and Utensils- (C) (Repeat)
Additional cleaning required on racks and outside of equipment throughout facility.
(C) Nonfood contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.
- 55 6-501.12 Cleaning, Frequency and Restrictions- REPEAT-
Additional cleaning required along the baseboards under and behind equipment and shelving units throughout the facility.
Physical facilities shall be cleaned as often as necessary to keep them clean.
- 56 6-303.11 Intensity - Lighting (C)(0pts)
Low lighting measured in the walk-in cooler. Measured 2-7 f/c.
The light intensity shall be:
(A) At least 108 lux (10 foot candles) at a distance of 75 cm (30 inches) above the floor, in walk-in refrigeration units and dry FOOD storage areas and in other areas and rooms during periods of cleaning;