

# Food Establishment Inspection Report

Score: 97

Establishment Name: PIZZA HUT #2842

Establishment ID: 3034020871

Location Address: 3025 WAUGHTOWN ST.

City: WINSTON SALEM State: North Carolina

Zip: 27107 County: 34 Forsyth

Permittee: HUT CAROLINAS LLC

Telephone: (407) 299-2555

Inspection  Re-Inspection

**Wastewater System:**

Municipal/Community  On-Site System

**Water Supply:**

Municipal/Community  On-Site Supply

Date: 02/02/2023 Status Code: A

Time In: 1:45 PM Time Out: 3:15 PM

Category#: II

FDA Establishment Type: Fast Food Restaurant

No. of Risk Factor/Intervention Violations: 0

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"/> IN OUT				
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 OUT				
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"/> OUT/N/A/N/O				
Proper reheating procedures for hot holding		3	1.5	0	
20	<input checked="" type="checkbox"/> IN 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"/> OUT/N/A/N/O				
Proper date marking & disposition		3	1.5	0	
24	<input checked="" type="checkbox"/> IN OUT				
Time as a Public Health Control; procedures & records		3	1.5	0	
<b>Consumer Advisory .2653</b>					
25	<input checked="" type="checkbox"/> IN OUT				
Consumer advisory provided for raw/undercooked foods		1	0.5	0	
<b>Highly Susceptible Populations .2653</b>					
26	<input checked="" type="checkbox"/> IN OUT				
Pasteurized foods used; prohibited foods not offered		3	1.5	0	
<b>Chemical .2653, .2657</b>					
27	<input checked="" type="checkbox"/> IN OUT				
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				
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				
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				
Variance obtained for specialized processing methods		2	1	0	
<b>Food Temperature Control .2653, .2654</b>					
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 OUT				
Plant food properly cooked for hot holding		1	0.5	0	
35	<input checked="" type="checkbox"/> OUT/N/A/N/O				
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"/> IN 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"/> IN				
Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed & used		1	0.5	X	
48	<input checked="" type="checkbox"/> IN				
Warewashing facilities: installed, maintained & used; test strips		X	0.5	0	X
49	<input checked="" type="checkbox"/> IN				
Non-food contact surfaces clean		X	0.5	0	X
<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"/> 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"/> IN				
Toilet facilities: properly constructed, supplied & cleaned		1	X	0	X
54	<input checked="" type="checkbox"/> OUT				
Garbage & refuse properly disposed; facilities maintained		1	0.5	0	
55	<input checked="" type="checkbox"/> IN				
Physical facilities installed, maintained & clean		1	X	0	X
56	<input checked="" type="checkbox"/> IN				
Meets ventilation & lighting requirements; designated areas used		1	0.5	X	
<b>TOTAL DEDUCTIONS:</b>					<b>3</b>



# Comment Addendum to Food Establishment Inspection Report

Establishment Name: PIZZA HUT #2842  
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 County: 34 Forsyth Zip: 27107  
 Wastewater System:  Municipal/Community  On-Site System  
 Water Supply:  Municipal/Community  On-Site System  
 Permittee: HUT CAROLINAS LLC  
 Telephone: (407) 299-2555

Establishment ID: 3034020871  
 Inspection  Re-Inspection Date: 02/02/2023  
 Comment Addendum Attached?  Status Code: A  
 Water sample taken?  Yes  No Category #: II  
 Email 1: ha037940@hutamerican.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	Michael Grier 3/26/25	0						
hot water	3 comp sink	144						
hot water	dish machine	128						
chlorine sanitizer	dish machine	200						
quat sanitizer	bucket	200						
cheese pizza	final cook	190						
wings	hot holding pass thru	174						
wings	upper reach in cooler	41						
pepperoni	walk in cooler	38						
wings	walk in cooler	35						
mozzarella	make unit	37						
chicken	make unit	30						
ham	make unit	37						
diced tomatoes	make unit	40						
pepperoni	make unit	40						

Person in Charge (Print & Sign): *Michael*

*Last*  
Grier

*Michael Grier*

Regulatory Authority (Print & Sign): *Lauren*

*Last*  
Pleasants

*Lauren Pleasants*

REHS ID: 2809 - Pleasants, Lauren

Verification Required Date:

REHS Contact Phone Number: (336) 703-3144

Authorize final report to be received via Email:

*[Signature]*



## Comment Addendum to Inspection Report

**Establishment Name:** PIZZA HUT #2842

**Establishment ID:** 3034020871

**Date:** 02/02/2023 **Time In:** 1:45 PM **Time Out:** 3:15 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.

- 47 4-501.11 Good Repair and Proper Adjustment - Equipment (C) - Gasket is torn on reach in freezer door. Recaulk splashguards at both handwashing sinks. Recaulk 3 compartment sink backsplash to the wall. Shelves in the walk in freezer are bowed from weight, and there is ice buildup on the fan box. Maintain equipment in good repair.
- 48 4-501.14 Warewashing Equipment, Cleaning Frequency (C) Repeat- The sanitize-side drainboard of dish machine soiled with food residue. Dish machine soiled inside and on doors with lime buildup. Prep sink basin soiled. A warewashing machine, the compartments of sinks, basins, or other receptacles used for washing and rinsing equipment, utensils, or raw foods shall be cleaned: before use; throughout the day at a frequency necessary to prevent recontamination of equipment and utensils and to ensure that the equipment performs its intended function; and if used, at least every 24 hours. Increase cleaning frequency of sinks.
- 49 4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils (C) Repeat- Additional cleaning needed on all equipment especially in crevices and base of warming cabinet, external components of dish machine, underneath 3 compartment sink, shelves in proofer, ALL shelving of grease residue, doors and handles of coolers, the natural gas line, rolling cart, and floor of walk in freezer. Nonfood-contact surfaces of equipment shall be free of dust, dirt, food residue, and other debris.
- 53 6-501.18 Cleaning of Plumbing Fixtures (C) Repeat- All handwashing sinks need cleaning. Toilet needs cleaning around the base. Plumbing Fixtures such as handwashing sinks, toilets, and urinals shall be cleaned as often as necessary to keep them clean.
- 55 6-501.12 Cleaning, Frequency and Restrictions (C) Repeat- Floor and wall cleaning needed behind dish machine and 3 compartment sink. Floor cleaning needed under fryers and under the other cooking equipment, and around the perimeter of the kitchen. Wall cleaning needed around sinks and equipment. Physical facilities shall be maintained clean.
- 56 6-501.110 Using Dressing Rooms and Lockers (C) - Employee phone and keys stored on top of the make unit. Use designated areas for the storage of employee possessions to prevent cross contamination.