Food Establishment Inspection Report

Г(Score: 98.5															
Establishment Name: HAMPTON ROAD GROCERY Establishment ID: 3034012374																
_ocation Address: 4440 HAMPTON ROAD									☐ Inspection ☐ Re-Inspection							
								Date: Ø 2 / 23 / 2015 Status Code: A								
								Time In: $\underline{11}$: $\underline{\emptyset00}$ $\underline{\otimes}$ am $\underline{\otimes}$ Time Out: $\underline{12}$: $\underline{300}$ $\underline{\otimes}$ pm								
Zip	Zip: 27012 County: 34 Forsyth								Total Time: 1 hr 30 minutes							
Pe	Permittee: TOM CARLTON															
Те	Telephone: (336) 766-4089							Category #: III								
Wa	ast	ew	ate	er S	System: Municipal/Community	On-Site S	Syst	tem				stablishment Type: Fast Food Restaurant	<u> </u>			
w:	Water Supply: ⊠Municipal/Community ☐ On-Site Supply								No. of Risk Factor/Intervention Violations:							
			- P	ر٠٩	,	C.1414-7			1/10	0. (OI F	Repeat Risk Factor/Intervention Viola	tiions.		_	
	Foodborne Illness Risk Factors and Public Health Interventions Risk factors: Contributing factors that increase the chance of developing foodborne illness.							Good Retail Practices								
	Public Health Interventions: Control measures to prevent foodborne illness or injury.								Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.							
	IN	OUT	N/A	N/O	Compliance Status	OUT CDI R	VR	IN	OUT	N/A	N/O	Compliance Status	OUT	CDI	R VR	
$\overline{}$	upei				.2652 PIC Present; Demonstration-Certification by			Safe				ater .2653, .2655, .2658			_	
					accredited program and perform duties	2 0		28 🗆		×		Pasteurized eggs used where required	1 0.5 0			
		byee	e He	alth	.2652			29 🔀				Water and ice from approved source	2 1 0			
_	×				Management, employees knowledge; responsibilities & reporting	3 1.5 0		30 🗆		×		Variance obtained for specialized processing methods	1 0.5 0			
_	×	Ш			Proper use of reporting, restriction & exclusion	3 1.5 0	Ш	Food Temperature Control .2653, .2654								
$\overline{}$	$\overline{}$		gieni	ic Pr	ractices .2652, .2653			31				Proper cooling methods used; adequate equipment for temperature control	1 0.5 0			
-	X				Proper eating, tasting, drinking, or tobacco use	2 1 0		32 🔀				Plant food properly cooked for hot holding	1 0.5 0			
_	×		. 0		No discharge from eyes, nose or mouth	1 0.5 0	Ш	33 🔀				Approved thawing methods used	1 0.5 0			
$\overline{}$	eve	ntin	g Co	onta	mination by Hands .2652, .2653, .2655, .2656 Hands clean & properly washed	420		34 🔀	П			Thermometers provided & accurate	1 0.5 0	ПГ	╦	
_	_		_		No bare hand contact with RTE foods or pre-			Food	lder	ntific	catio	·				
_	×	Ш		Ш	approved alternate procedure properly followed	3 1.5 0	Ш	35 🔀				Food properly labeled: original container	2 1 0			
8 Approved Source .2653, .2655								Preve	ntio	n of	f Foo	od Contamination .2652, .2653, .2654, .2656, .265	7			
$\overline{}$		ovec	1 50	urce				36				Insects & rodents not present; no unauthorized animals	2 1 0			
\dashv	×				Food obtained from approved source			37 🔀				Contamination prevented during food preparation, storage & display	2 1 0			
\rightarrow				×	Food received at proper temperature	2 1 0	Ш	38 🔀	П			Personal cleanliness	1 0.5 0	ПГ	市	
11	X				Food in good condition, safe & unadulterated	210 -	Ш	39 🔀				Wiping cloths: properly used & stored	1 0.5 0			
12			X		Required records available: shellstock tags, parasite destruction	210 🗆		40 🔀		П		Washing fruits & vegetables	1 0.5 0			
Protection from Contamination .2653, .2654									r He		f l ltc	ensils .2653, .2654	L1 6.3 0			
\dashv	×	Ц	Ш	Ш	Food separated & protected	3 1.5 0	Ш	41 🔀	_			In-use utensils: properly stored	1 0.5 0	ПГ		
14	X				Food-contact surfaces: cleaned & sanitized	3 1.5 0		42 🔀				Utensils, equipment & linens: properly stored,	1 0.5 0			
15	X				Proper disposition of returned, previously served, reconditioned, & unsafe food	210	Ш					dried & handled Single-use & single-service articles: properly				
Р	oter	tiall	ly Ha		dous Food Time/Temperature .2653			43	Ш			stored & used	1 0.5 0	Ш	끧	
16	Ш	Ш	Ш	X	Proper cooking time & temperatures	3 1.5 0	Щ	44		L.	Ш	Gloves used properly	1 0.5 0			
17				X	Proper reheating procedures for hot holding	3 1.5 0		Utens		and	Equ	ipment .2653, .2654, .2663 Equipment, food & non-food contact surfaces			_	
18	X				Proper cooling time & temperatures	3 1.5 0		45	X			approved, cleanable, properly designed, constructed, & used	2 🗶 0			
19	X				Proper hot holding temperatures	3 1.5 0		46 🔀				Warewashing facilities: installed, maintained, & used; test strips	1 0.5 0			
20	X				Proper cold holding temperatures	3 1.5 0		47 🔀	П			Non-food contact surfaces clean	1 0.5 0	ПГ	市	
21	×	П	П	П	Proper date marking & disposition	3 1.5 0	П	Physi	ical I	Faci	ilities	s .2654, .2655, .2656				
22		П	×	П	Time as a public health control: procedures &	210	\exists	48 🔀				Hot & cold water available; adequate pressure	2 1 0			
	ons	ume	er Ac	lviso	records orv .2653			49 🔀				Plumbing installed; proper backflow devices	2 1 0			
23			X		Consumer advisory provided for raw or undercooked foods	1 0.5 0		50 🔀	П			Sewage & waste water properly disposed	2 1 0	П	$\forall \Box$	
Н	ighl	y Su	isce	ptib	le Populations .2653			51 🔀	_	П		Toilet facilities: properly constructed, supplied	1 0.5 0			
24			X		Pasteurized foods used; prohibited foods not offered	3 1.5 0				_		& cleaned Garbage & refuse properly disposed; facilities				
$\overline{}$	hem	ical			.2653, .2657			52 🔀				maintained	1 0.5 0			
25	X				Food additives: approved & properly used	1 0.5 0		53 🗆	X			Physical facilities installed, maintained & clean	1 🗶 0		40	
26	X				Toxic substances properly identified stored, & used	210 -		54				Meets ventilation & lighting requirements; designated areas used	1 0.5 0			
	onfo		ance	wit	h Approved Procedures .2653, .2654, .2658 Compliance with variance, specialized process,				_	_	_	Total Deductions:	1.5			
	1 1 1	1 11	iixrii		, ,	n 2 m + m 0 m + 111 - 11	1 10 1					:				





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

Estabiisnme	ent Name: HAMPTON	ROAD GROCE	RY		Establishment	ID: 3034012374	1				
Location A City: CLEN County: 34			St p: ²⁷⁰¹²	ate: NC		•	On Date: 02/23/2015 Status Code: A Category #:	Status Code: A			
Wastewater System: ☑ Municipal/Community ☐ Water Supply: ☑ Municipal/Community ☐ Permittee:TOM CARLTON			On-Site System		Email 1: tomcarlton4367@gmail.com Email 2:						
Telephone	e: <u>(336) 766-4089</u>				Email 3:						
					servations						
Item raw beef	Location reach in	Temp Iter 39 co	m le slaw	Location cooler	Ten 38	np Item hot water	Location three comp sink	Tem 145			
lettuce	make unit	41 m	ashed	steam table	153	sanitizer	three comp sink (ppm)	200			
cole slaw	make unit	40 bu	ırgers	steam table	150	<u> </u>					
bbq	make unit	40 ch	icken	steam table	155	-					
vegi/beef	steam well	150 ch	ili	steam table	161						
chili	steam well	154 bb	pq	steam table	159						
hot dog	steam well	160 sa	urkraut&sa	ausaageam table	162						
vegi/beef	cooler	38 pa	stry	steam table	160						
shall be ir cleaning i	n good repair to aid in	cleaning. repart the restroom	air peeling where dir	baseboard. <i>i</i> t and debris h	// 6-501.12 Clean	ing, Frequency	e the back hand sink. Flo and Restrictions - C De love cobwebs from walls	ail			
Person in Cha	rge (Print & Sign):	First		La	est	Dn file Ingelle					

REHS Contact Phone Number: (336)703 - 3164





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Observations and Corrective Actions





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