Food Establishment Inspection Report

Establishment Name: ETON CAFE INC Establishment ID: 3034010838

Date: <u>Ø 6</u> / <u>1 Ø</u> / <u>2 Ø 1 3</u> Status Code: A						
Time In: $09 : 30 \ ^{\otimes}_{\bigcirc} \ ^{am}_{pm}$ Time Out: $11 : 40 \ ^{\otimes}_{\bigcirc} \ ^{am}_{pm}$						
Total Time: _2	2 hrs 10 minutes					
Category #: _I	IV					
Establishmen	t Type:					

Instructions:

1. Fill in the information below for the Food Establishment:

Location Address:_	108 N GORDON DRIVE						
City: WINSTON SAI	EM						
State: NC	Zip: <u>27104</u>						
County: 34 Forsyth							
Permittee: E TON	CAFE, INC						
Telephone:							
⊗Inspection							
○Re-Inspection							
Wastewater System:							
⊗Municipal/Community							
○On-Site System							
Water Supply:							
⊗Municipal/Comm	nunity						
On-Site System							

2. Click/fill the appropriate circle For "IN, OUT, N/A, N/O".

IN= In Compliance, OUT= Not in compliance N/O=Not Observed, N/A= Not Applicable

3. Click/check the appropriate Boxes for CDI and/or R, VR.

CDI= Corrected During Inspection R= Repeat Violation VR= Verification Required

4. Continue to page 2 for "Good Retail Practices".

Foodborne Illness Risk Factors and Public Health Interventions

Score: 97.5

Risk factors: Contributing factors that increase the chance of developing foodborne illness.

Public Health Interventions: Control measures to prevent foodborne illness or injury.								
Co	mpliand	e Statu	S	OUT	CDI	R	VR	
Su	Supervision .2652							
1		S O JT N/A	PIC Present; Demonstration-Certification by accredited program and perform duties	○ ⊗ 2 0	0	0	0	
En	· -	Health	.2652					
2	⊗ IN	OUT	Management, employees knowledge; responsibilities & reporting	○ ○ ○ 3 1.5 0	0	0	0	
3	⊗ IN	OUT	Proper use of reporting, restriction & exclusion	○ ○ ○ 3 1.5 0	0	0	0	
Go		gienic F	Practices .2652, .2653					
4	⊗ IN	OUT	Proper eating, tasting, drinking, or tobacco use	$\begin{array}{c c} \bigcirc \bigcirc \bigcirc \bigcirc \\ 2 & 1 & 0 \end{array}$	0	0	0	
5	⊗ IN	OUT	No discharge from eyes, nose, and mouth	0 0 0 1 0.5 0	0	0	0	
Pre	eventin	g Cont	amination by Hands .2652, .2653, .2655, .2656	5				
6	⊗ IN	OUT	Hands clean & properly washed	0 0 0 4 2 0	0	0	0	
7) & JT N/O	No bare hand contact with RTE foods or pre-approved alternate procedure properly allowed	○ ○ ○ 3 1.5 0	0	0	0	
8	⊗ IN	OUT	Handwashing sinks supplied & accessible	○ ○ ○ 2 1 0	0	0	0	
Αp	proved	l Sourc	e .2653, .2655					
9	⊗ IN	OUT	Food obtained from approved source	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0	
10	O (IN O) & JT N/O	Food received at proper temperature	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0	
11	⊗ IN	OUT	Food in good condition, safe & unadulterated	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0	
12	O O IN OUT	○ ⊗ N/A N/O	Required records available: shellstock tags, parasite destruction	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0	
Pro	otectio	n from	Contamination .2653, .2654					
13	⊗ ○ IN OUT	O O N/A N/O	Food separated & protected	○ ○ ○ 3 1.5 0	0	0	0	
14	⊗ IN	OUT	Food-contact surfaces: cleaned & sanitized	○ ○ ○ 3 1.5 0	0	0	0	
15	⊗ IN	OUT	Proper disposition of returned, previously served, reconditioned, & unsafe food	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0	
Po	tentiall	y Haza	rdous Food TIme/Temperature .2653					
16	⊗ ○ IN OUT	O O N/A N/O	Proper cooking time & temperatures	○ ○ ○ 3 1.5 0	0	0	0	
17		O O N/A N/O	Proper reheating procedures for hot holding	○ ○ ○ 3 1.5 0	0	0	0	
18	⊗ ○ IN OUT	O O N/A N/O	Proper cooling time & temperatures	○ ○ ○ 3 1.5 0	0	0	0	
19	⊗ ○ IN OUT	O O N/A N/O	Proper hot holding temperatures	○ ○ ○ 3 1.5 0	0	0	0	
20	⊗ ○ IN OUT	O O N/A N/O	Proper cold holding temperatures	○ ○ ○ 3 1.5 0	0	0	0	
21	⊗ ○ IN OUT	O O N/A N/O	Proper date marking & disposition	○ ○ ○ 3 1.5 0	0	0	0	
22	O O IN OUT	○ ⊗ N/A N/O	Time as a public health control: procedures & records	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0	0	0	0	
Со	nsume	r Advis	sory .2653					
23		JT N/A	Consumer advisory provided for raw or undercooked foods	0 0 0 1 0.5 0	0	0	0	
Ηiς	ghly Su	sceptil	ole Populations .2653					
24		JT N/A	Pasteurized foods used; prohibited foods not offered	0 0 0 3 1.5 0	0	0	0	
Ch	emical		.2653, .2657					
25		JT N/A	Food additives: approved & properly used	0 0 0 1 0.5 0	0	0	0	
26		JT N/A	Toxic substances properly identified stored, & used	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0		0	0	
Со	nforma	nce wi	th Approved Procedures .2653, .2654,	.2658				
27		⊃ ⊗ JT N/A	Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	$ \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc $ 2 1 0		0	0	

North Carolina Department of Health & Human Services ● Division of Public Health Environmental Health Section ● Food Protection Program

Food Establishment Inspection Report, continued

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Instructions, continued:

5. Click the appropriate circle to fill-in for "IN, OUT, N/A, N/O".

IN= In Compliance, OUT= Not in compliance N/O=Not Observed, N/A= Not Applicable

- Click or check the appropriate boxes for CDI and/or R, VR CDI= Corrected during Inspection R= Repeat Violation VR= Verification Required Calculate the "Total Deductions" and record.
- 7. Sign and complete "Signature Block".
- Fill in "No. Of Risk Factor Intervention Violations" and "No. of Repeat Risk Factor Intervention Violations".
- 9. Continue to page 3 for "Comment Addendum to Food Establishment Inspection Report".

Signature Block:

First Alfonso Last MENDEZ

Person in Charge (Print)

Person in Charge (Signature)

First Clark

Last Sizemore

Regulatory Authority (Print)

Regulatory Authority (Signature)

Contact Number:

(<u>336</u>)<u>703</u>-<u>3128</u>

Verification Required Date: ___/ ___/

REHS ID: 944 - Sizemore, Clark

No. of Risk Factor/ Intervention Violations: 1 No. of Repeat Risk Factor/Intervention Violations:

Good Retail Practices								
GOOD RETAIL PRACTICES Preventative measures to control the addition of pathogens.								
chemicals, and physical objects into foods.								
		nce Statu		OUT	CDI	R	VR	
-	ite Foo	od and V		000				
28	IN ⊗	OUT	Pasteurized eggs used where required	1 0.5 0	0	0	0	
29	IÑ	OUT	Water and ice from approved source	2 1 0	0	0	0	
30	IÑ O	○ ⊗ UT N/A	Variance obtained for specialized processing methods	1 0.5 0	0	0	0	
	od Te	mperatu O	re Control .2653, .2654 Proper cooling methods used; adequate equipment for	000			_	
31	IN	OUT	temperature control	1 0.5 0	0	0	0	
32	N OU	O O	Plant food properly cooked for hot holding	1 0.5 0	0	0	0	
33		○ ⊗ ΓΝ/Α Ν/Ο	Approved thawing methods used	0 0 0	0	0	0	
34	⊗ IN	OUT	Thermometers provided & accurate	0 0 0	0	0	0	
Fo		entificat	ion .2653					
35	⊗ IN	OUT	Food properly labeled: original container	O O O 2 1 0	0	0	0	
Pr		_	ood Contamination .2652, .2653, .2654, .265	6, .2657				
36	⊗ IN	OUT	Insects & rodents not present; no unauthorized animals	2 1 0	0	0	0	
37	OIN	⊗ OUT	Contamination prevented during food preparation, storage & display	○ ⊗ ○ 2 1 0	0	0	0	
38	O Z	⊗ OUT	Personal cleanliness	8 0 0 1 0.5 0	0	0	0	
39	⊗≅	OUT	Wiping cloths: properly used & stored	0 0 0	0	0	0	
40	⊗ <u>Z</u>	OUT	Washing fruits & vegetables	0 0 0	0	0	0	
Pr	oper L	Jse of U	tensils .2653, .2654					
41	⊗ IN	OUT	In-use utensils: properly stored	0 0 0	0	0	0	
42	⊗ IN	OUT	Utensils, equipment & linens: properly stored, dried & handled	0 0 0	0	0	0	
43	⊗ IN	OUT	Single-use & single-service articles: properly stored & used	0 0 0	0	0	0	
44	⊗z	OUT	Gloves used properly	0 0 0	0	0	0	
Ut			uipment .2653, .2654, .2663					
45	ON.	⊗ OUT	Equipment, food & non-food contact surfaces approved, cleanable, properly designed, constructed, & used	O O S	0	0	0	
46	⊗ IN	OUT	Warewashing facilities: installed, maintained, & used; test strips	0 0 0 1 0.5 0	0	0	0	
47	O IX	⊗ OUT	Non-food contact surfaces clean	○ ⊗ ○ 1 0.5 0	0	0	0	
Ph	nysical	Faciliti	es .2654, .2655, .2656					
48	⊗ IN	OUT	Hot & cold water available; adequate pressure	O O O 2 1 0	0	0	0	
49	⊗ IN	OUT	Plumbing installed; proper backflow devices	0 0 0 2 1 0	0	0	0	
50	⊗ IN	OUT	Sewage & waste water properly disposed	0 0 0 2 1 0	0	0	0	
51	⊗ IN	OUT	Toilet facilities: properly constructed, supplied & cleaned	0 0 0 1 0.5 0	0	0	0	
52	⊗ IN	OUT	Garbage & refuse properly disposed; facilities maintained	0 0 0 1 0.5 0	0	0	0	
53	⊗ IN	OUT	Physical facilities installed, maintained & clean	0 0 0 1 0.5 0	0	0	0	
54	⊗ IN	OUT	Meets ventilation & lighting requirements; designated areas used	0 0 0 1 0.5 0	0	0	0	
			Total Deductions:	2.5				

North Carolina Department of Health & Human Services ● Division of Public Health
Environmental Health Section ● Food Protection Program

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Establishment Name: ETON CAFE INC		Establishment ID: 3034	010838	Date: 06/10/2013
Location Address: 108 N GORDON DRIVE				Status Code: A
	State: NC			Category #:IV
County: 34 Forsyth Zip: 27	104			Email 1:
Wastewater System: ⊗ Municipal/Community (Water Supply: ⊗ Municipal/Community (Email 2:
Permittee: E TON CAFE, INC				Email 3:
Telephone:				

	Temperature Observations							
Item greens	Location steam table	Temp 148	Item onions	Location make unit	Temp 43	Item turkey	Location cooler	Temp 42
potatoes	steam table	133	ranch	make unit	42	bologna	cooler	42
corn	steam table	145	tomatoes	make unit	44	hamburger	cooler	39
beans	steam table	165	turkey	drawer	34	eggs	cooked to	161
hot water	faucet	145	raw pork	drawer	34	milk	cooler	42
gravy	steam table	180	ham	drawer	40			
grits	steam table	175	raw steak	drawer	41			
pork	steam table	145	cheese	cooler	45			

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.

The person in charge must have a food safety training certification before 1-1-14 or a two point deduction will be taken after 1-1-14. 2-102.12 Certified Food Protection Manager

37 Can not use cloths to cover biscuits in walk in cooler. Use deli paper, sheet pans or other methods to cover biscuits. 3-304.13 Linens and

Employee in back cooking did not wear a hair restraint during the entire inspection. 2-402.11 Effectiveness-Hair Restraints

One green shelf is missing some of the coating; paint with approved paint or replace. 4-201.11 Equipment and Utensils-Durability and Strength

4hh

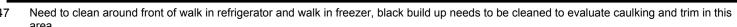


Napkins, Use Limitations

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4-601.11 (B) and (C) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils

4-602.13 Nonfood Contact Surfaces





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